

Evaluation of the Hero Rewards – the Choice is Yours campaign for The Queensland Aboriginal and Islander Health Council (QAIHC)

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Disclaimer

The information and advice within this report is based solely on representations and information provided to us by the Queensland Aboriginal and Islander Health Council (QAIHC) and nominees. We therefore take no responsibility for any errors caused by the provision of inaccurate or deficient information. It is imperative that you ensure that all references in our advice to information provided by QAIHC and nominees are correct and complete. If not, you must bring this to our attention immediately so that the correct information can be considered and any required change to our advice made.

1 Executive summary

Background

The purpose of this evaluation is to:

- *assess whether the Hero Rewards...the Choice is Yours campaign has achieved its objectives, and*
- *inform how the campaign can be enhanced and adapted to meet the changing and diverse needs of the Queensland Aboriginal and Torres Strait Islander population.*

The Queensland Aboriginal and Islander Health Council (QAIHC) developed and project managed the *Hero Rewards...Come Be a Hero* campaign between May to October 2010. This was funded to coincide with the commencement of the Australian Government's Indigenous Chronic Diseases Package.

The launch of the second phase of the campaign, *Hero Rewards...The Choice is Yours* was in August 2011. The overall aim of *Hero Rewards...The Choice is Yours* was to improve the health of Aboriginal and Torres Strait Islander people, through increasing the number of Aboriginal and Torres Strait Islander people who are receiving and engaged in follow up care services through community controlled health services (Health Services).

Funding from the National Partnership Agreement on Preventive Health (NPAPH) ceases on 30 June 2013. As part of the funding obligations an end of campaign evaluation is required.

The purpose of this evaluation is to:

- assess whether the *Hero Rewards...the Choice is Yours* campaign has achieved its objectives, and
- to inform how the campaign can be enhanced and adapted to meet the changing and diverse needs of the Queensland Aboriginal and Torres Strait Islander population.

The scope of this evaluation is the *Hero Rewards...the Choice is Yours* campaign.

Methodology

The evaluation research methodology had four key elements.

1. A review of Medicare Australia Statistics during the period of the *Hero Rewards – The Choice is Yours* campaign to assess the trend in uptake of Aboriginal and Torres Strait Islander Health Assessment (MBS Item 715) and follow up care (MBS Item 10987) in Queensland relative to the rest of Australia.
2. A review of internal campaign statistics.
3. In depth semi structured exploratory interviews undertaken with 15 of

a total of 22 Health Services.

4. In depth semi structured exploratory interviews undertaken with two key stakeholders.

Campaign objectives

The objectives of the *Hero Rewards...the Choice is Yours* campaign are:

1. to continue to build awareness of the importance of Health Assessments within communities
2. to maximise the opportunities available through PIP Indigenous Health Incentive and PBS Co-Payment Measure (CTG)
3. to support Health Services to introduce a model of care that improves coordination of care for Aboriginal and or Torres Strait Islander people.
4. to promote programs that are health promotion and allied health service focussed.

Findings

There is no doubt that the *Hero Rewards - the Choice is Yours* Campaign is achieving its objective to continue to build awareness of the importance of Health Assessments among communities.

A review of the Medicare data, in combination with qualitative research findings suggests that the Hero Rewards program has had a very positive impact. Queensland has a higher rate of Health Assessments of Indigenous Australians compared to all other states or Territories.

Due to data limitations it has not been possible to measure the isolated contribution of *Hero Rewards... the Choice is Yours* to these increases in Health Assessments. However it is noted that the rate of increase in Queensland for both Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) is markedly greater since the launch of *Hero Rewards... the Choice is Yours*. This suggests that the design of *Hero Rewards...The Choice is Yours* may have facilitated sustained and increasing Health Service and community engagement.

This increase in Health Assessments means the opportunities through the Practice Incentive Program Indigenous Health Incentive and PBS Co-Payment Measure (CTG) have certainly been maximised in Queensland Health Services.

'Hero Rewards...the Choice is Yours crystallised the need for us to focus on Health Assessments'

Qualitative research revealed that Health Services credited their engagement with *Phase 1: Hero Rewards...Come be a Hero* as a key trigger to engage in community based promotion to generate an increase in Health Assessments.

In particular the success of the funded incentives provided in *Phase 1...Come be a Hero* prompted the Health Services to self-fund the incentives during *Phase 2...the Choice is Yours*. Significantly this engagement has been facilitated by the overarching state wide brand awareness and support of the QAIHC Health Promotions Officer Social Marketing. This support was highly valued.

...take up of support from Hero Rewards has varied across Health Services - based on the capacity of each Health Service to engage.

It is exciting that the Health Services responded by developing localised promotional approaches. However, this very local approach has meant they have not used the state-wide branded resources and tools developed for *Phase 2: Hero Rewards...the Choice is Yours* as much as was anticipated. Instead they have preferred their own locally branded materials.

Despite unanimous and passionate support for a model of care that uses Health Assessments as a gateway to preventative health care, the take up of support from Hero Rewards has varied across Health Services - based on the capacity of each Health Service to engage. This capacity was not simply a factor of size or location. Broad capacity issues such as funds, reporting capability, development of systems and processes, staff turnover, management support, and governance status influenced in different ways the ability of Health Services to participate, report and monitor.

The research suggests that the state wide structural support of the Hero Rewards program can be more comprehensively applied at the local community level to deliver equality of engagement and therefore equality of outcomes across Queensland. Without ongoing and customised capacity building support and annual refreshes and facilitation, the Health Services will lose momentum and the gains of recent years.

The promotion of programs that are health promotion and allied health service focussed was a key objective of the *Hero Rewards...the Choice is Yours* campaign. Subjective evidence suggests that once a patient has a Health Assessment they are actively encouraged to participate in the relevant health promotion initiatives offered. However the Hero Rewards campaign materials and tools (post cards, online tools and website) seem to be rarely used for this purpose. There appears to be a lack of objective measures to determine the extent of the increase in take up of health promotions and allied health services.

The key to the *Hero Rewards...the Choice is Yours* campaign success has been:

- a strong state wide brand and communications
- showing the Health Services the value of the use of incentives
- inspiring the Health Services to work at attracting patients specifically for Health Assessments and subsequent follow up care
- building the capacity of Health Services to implement local

promotional approaches supported by the state-wide Hero Rewards framework

- passionate and committed Health Service personnel who understand that access to Health Assessments and the flow on access to preventative health care is the key to closing the indigenous health gap
- the use of targeted, community based promotion, incentives and programs, and
- capacity building support provided by the QAIHC Health Promotion Officer Social Marketing.

Recommendations

There is an opportunity to harness the powerful passion and interest of the Health Services that was clearly in evidence throughout this evaluation.

There is an opportunity to harness the powerful passion and interest of the Health Services that was clearly in evidence throughout this evaluation.

Yet despite broad philosophical support, the capacity of each Health Service to engage was inconsistent. Health Services with a broader skill mix, larger staff numbers and greater access to funds were clearly in a better position to implement *Hero Rewards...the Choice is Yours*.

The research suggests that the state wide structural support of the Hero Rewards program can be more comprehensively applied at the local community level to deliver equality of engagement and therefore equality of outcomes across Queensland. Without ongoing capacity building support and annual refreshes and external facilitation the Health Services will lose momentum.

In summary, there is benefit for the state wide overarching Hero Rewards program with its strong brand connection to continue. The program would be enhanced by the provision of a streamlined and locally relevant suite of resources and comprehensive targeted one on one support – where required. Importantly this support should facilitate a greater local reporting, planning and review discipline to motivate momentum.



Specifically this evaluation has shown that a future Hero Rewards program should include the following key elements.

- Continued use of incentives.
- Disciplined market segmentation.
- A deep understanding of the barriers to participation from both the Health Service and client's perspective.
- Continued use of state-wide Hero Rewards branding and communications to increase Health Service engagement and client knowledge and acceptance of the health check.

- Delivery of comprehensive customised support at a local level to help each Health Service develop, manage and monitor a structured community based action plan (based on social marketing principals) to attract clients for Health Assessments and follow up care and to integrate with local health promotion programs.
- Continue the focus on the collection of reliable and relevant performance data at the Health Service level.
- Create clarity on how the program will integrate with and support local health promotion initiatives. Agree performance indicators around this.
- Streamline the current support resources. Devolve funding so that it is allocated to deliver the specific local action plan under the guidance of the QAIHC Project Officer Social Marketing.
- Collaborate with local Councils who have received funding via the Healthy Communities Initiative (HCI) to support Local Government Areas (LGAs) in delivering effective community-based physical activity and healthy eating programs, as well as developing a range of local policies that support healthy lifestyle behaviours
- Facilitate positive sharing and comparing among the Health Services.

2 Introduction

**Phase 1:
Hero Rewards –
Come Be a Hero
campaign
executed between
May to October
2010.**

**Phase 2:
Hero Rewards -
The Choice is
Yours launched
August 2011.**

QAIHC developed and project managed the *Hero Rewards...Come Be a Hero* campaign between May to October 2010. This was funded to coincide with the commencement of the Australian Government's Indigenous Chronic Diseases Package. This campaign gained strong community response with the call to action having a significant impact on demand for services, specifically the Aboriginal and Torres Strait Islander Health Check (MBS Item 715).

The launch of the second phase of the campaign, *Hero Rewards...The Choice is Yours* was in August 2011. The overall aim of *Hero Rewards...The Choice is Yours* was to improve the health of Aboriginal and Torres Strait Islander people, through increasing the number of Aboriginal and Torres Strait Islander people who are receiving and engaged in follow up care services through community controlled health services.

The *Hero Rewards...The Choice is Yours* campaign dovetails with other national strategies aligned with Closing the Gap and improving lifestyle risk factors that contribute to chronic disease including the Practice Incentive Program Indigenous Health Incentive measure, the PBS Co-payment Measure (CTG) initiatives, the Tackling Indigenous Chronic Disease initiatives and the Swap iT, Don't Stop iT campaign.

Funding from the National Partnership Agreement on Preventive Health (NPAPH) ceases on 30 June 2013. As part of the funding obligations an end of campaign evaluation is required.

The purpose of this evaluation is to:

- assess whether the *Hero Rewards...the Choice is Yours* campaign has achieved its objectives, and
- to inform how the campaign can be enhanced and adapted to meet the changing and diverse needs of the Queensland Aboriginal and Torres Strait Islander population.

The scope of this evaluation is the *Hero Rewards...the Choice is Yours* campaign.

3 Objectives: the Choice is Yours campaign

Awareness

Prevention

Leverage Closing the Gap initiatives

Enhancing the model of care

1. To continue to build awareness of the importance of Health assessments within communities.
2. To maximise the opportunities available through PIP Indigenous Health Incentive and PBS Co-Payment Measure (CTG).
3. To support Health Services to introduce a model of care that improves coordination of care for Aboriginal and or Torres Strait Islander people
4. To promote programs that are health promotion and allied health service focussed.



4 Campaign description

Overview

The *Hero Rewards... the Choice is Yours* campaign was the second phase of the Hero Rewards program.

The first phase, the *Come be a Hero* campaign, was a communication campaign aimed at providing a suite of communication key messages and communication channels and tools to assist the Health Services attract clients for a Health Assessment (MBS Item 715).

'The Hero Rewards...The Choice is Yours campaign is about letting the community know about the services and support available locally, in a positive, friendly and welcoming way, reflecting the positive way your service already works' Selwyn Button, QAIHC CEO

The *Hero Rewards...The Choice is Yours* was also a communication campaign but delivered an upgraded suite of communication key messages and communication channels and tools. While the campaign continued to assist the Health Services to attract clients for a Health Assessment (MBS Item 715) it also focused on helping the Health Services encourage follow up care (MBS Item 10987) and access to allied health services.

The key difference between the two campaigns is that the *Choice is Yours* campaign did not offer a funded incentive. In addition the online resources on the dedicated Hero Rewards program website (<http://www.herorewards.com.au/>) were significantly upgraded.

Social marketing

The design of both phases of the Hero Rewards program took into account contemporary social marketing theory. It is widely accepted that campaigns that rely solely on providing information often have little or no effect upon behaviour.¹ The community based social marketing model was adopted because its pragmatic approach has been shown to be very effective at bringing about behaviour change.

With its robust understanding of the community controlled health sector QAIHC was able to design a culturally relevant campaign that combined targeted communications with behaviour change tools and techniques executed at the community level. Supported by QAIHC, the participating Health Services were empowered to increase their

¹ McKenzie-Mohr D, 2008, *Fostering Sustainable Behaviour – An Introduction to Community Based Social Marketing*, New Society Publishers, Canada.

community's participation in preventative health initiatives such as Health Assessments and health promotion programs. The key social marketing techniques applied to Hero Rewards were:

- use of incentives to motivate the desired behaviour
- use of tools and prompts to support the behaviour change
- leveraging ego - because we act in ways that make us feel better about ourselves
- gaining commitment from the community via the completion of the online survey
- recalibrating community norms by the use of well-known personalities to endorse the program
- personalised support provided to participating Health Services by the QAIHC Health Promotion Officer, and
- development of key messages crafted from a deep understanding of the intended audience and how it can be integrated into local community communications.

Importantly while Hero Rewards gave the Health Services a packaged approach it still allowed them to overlay their deeper insight into the needs, motivation and barriers of their own communities to deliver a relevant and effective campaign. This enabled communities to customise their approach. For example some sponsored the local football team to target men. Others developed baby packs to attract parents while others door knocked to generate interest.

The Hero Rewards... the Choice is Yours campaign

A fully funded service start-up kit was made available free of charge to all of the 22 Health Services in Queensland. The start-up kit contained the resources listed below.



- Hero Rewards Service handbook x2
- Just in time reminders
 - Perforated brochures x100.
 - Desk top Calender x10.
 - pens x10.
 - Notepads x10.
 - Stress footballs x10.
 - Bottled water x25.
 - Bucket hats x10.
- Indoor/outdoor promotional tools
 - Point of entry – window easy peel labels x5.
 - A2 posters x5.
 - Pull up banner x1.
 - Post cards – Health Checks for Diabetes, Physical Activity Walking Groups, Nutrition Good Quick Tukka, Tobacco, Immunisation, Antenatal Checks, Mean's Health and Optometry x100.
- Online resources
 - TV commercial (30 and 60 seconds).
 - *The Choice is Yours* campaign resources are available online.
 - A new sign up process for the community to register their interest in getting a health check.
 - A new online survey tool called *How's Your Health* - a self-administered health check that provides feedback on the users health status. It can be printed out and taken to their next health service appointment. This was in place by October 2012.
 - A Hot Link page providing useful links and pages that provides health education and awareness.
 - A new online search tool that allows community to find their closest health service and a website links that directs them to each services website.

A quarterly newsletter was delivered in collaboration with the QAIHC Preventative Health team.

Resources

Health services were able to purchase additional resources as they required.

Statewide branding

Personalised support was provided to participating Health Services by the QAIHC Health Promotion Officer. Every Health Service received a start-up briefing with the exception of the Charleville and Western Areas Aboriginal and Torres Strait Islander Corporation and the Cunnamulla Aboriginal Corporation for Health.

One on one support

Each participating Health Service was free to execute the campaign as they saw appropriate in their local area giving them autonomy to use the resource kit and support from QAIHC to meet their local needs.

Local execution

The campaign had a suite of key messages designed to assist the Health Services communicate and promote their health promotion initiatives at a local level, while linking logically to the State-wide Hero's Reward branding. The key messages were:

Key health messages

Men come together to talk about men's business!

Heroes don't just talk, they walk and get active!

Heroes can do anything, choose to be smoke free!

Choose to have regular eye checks for healthy eyes!

Heroes eat Good Quick Tukka

Heroes get regular check-ups, how's your sugar?

We help look after Heroes of tomorrow, today!

Even our littlest Heroes need protecting!

'We employ local mob to look after local families'

The supporting message was that *'We employ local mob to look after local families'* which helped to emphasise the personal and caring service that is available at the Health Service.

5 Project management

Funding agreement

In 2010, under the National Partnership Agreement on Preventive Health (NPAPH), QAIHC was funded to 'Provide Aboriginal and Torres Strait Islander communities' access to campaign resources, programs and activities'.

The funding included the appointment of a dedicated Project Coordinator to work in QAIHC.

It was intended that this funding would extend the reach and access to the national Measure Up and Tomorrow People campaigns and related physical activity and nutrition programs for Aboriginal and Torres Strait Islander communities in place at the time.

By the launch of Phase 2 *Hero Rewards...the Choice is Yours* in August 2011 the Measure Up and Tomorrow People campaigns were replaced by the national Swap It, Don't Stop It campaign. The National Swap It, Don't Stop It social marketing campaign was launched in March 2011 as part of the Australian Better Health Initiative (ABHI). It was a funding requirement that *Hero Rewards... the Choice is Yours* campaign support the culturally relevant execution of Swap IT, Don't Stop It campaign in Queensland indigenous communities.

The deliverables required as part of the funding implementation plan are outlined below. *Phase 2 Hero Rewards...the Choice is Yours* was specifically designed to contribute, in part only, to these deliverables.

- Build capacity of existing nutrition, physical activity and healthy lifestyle staff and stakeholders located in the Queensland and community controlled sector to integrate Tomorrow People messages into their current programs.
- Market and distribute campaign resource, activity kits and materials to nutrition, physical activity and healthy lifestyle staff and partners and the Community Controlled Health Services.
- Coordinate health workers and partners to deliver local activities and programs that incorporate the campaign messages and timed to coincide with the Tomorrow People and Go for 2&5 campaign initiatives (e.g. cooking demonstrations, bush tucker tasting); build on initiatives developed for the Indigenous Go for 2&5 campaign and Tomorrow People.

- Ensure health workers:
 - advocate and support partners to include campaign messages in their initiatives
 - promote the Living Strong program
 - advocate and support partners to distribute campaign resources
 - link with community events and initiatives that may arise to promote campaign messages (e.g. NAIDOC events, Drumley Walk)
 - display point of sale decision prompts consistent with key campaign messages, e.g. notices in stairwells, and
 - explore opportunities to work with the QAICH media unit to promote local Tomorrow People activities and messages through Indigenous media organisations.
- Encourage health workers to link with Healthy Lifestyle Coordinators to increase the number of Living Strong programs delivered.

Project governance

- Project sponsor:
 - Queensland Health representative - Michael Tilse
- Project Manager:
 - QAHC Preventative Health Unit Manager or Director – Katie Panaretto
- Project Office:
 - QAHC Health Promotion Officer – Social Marketing – David Hodgson
- Project Workers:
 - Based in Health Service
 - CheckUp (formally General Practice Queensland)
 - Institute for Urban Indigenous Health.
- Advisory Group:
 - Chair – Kate Panaretto/David Hodgson
 - Project Officer – David Hodgson
 - Queensland Health, Health Living branch – Simone Nalatus
 - Apunipima Cape York Health Council
 - Community controlled Health Services
 - Divisions of General Practice
 - CheckUp (formally General Practice Queensland)

6 Evaluation methodology

The evaluation research methodology had four key elements.

National data analysis

Operational data analysis

Community controlled health service interviews

Stakeholder interviews

1. A review of Medicare Australia Statistics during the period of the *Hero Rewards – The Choice is Yours* campaign to assess the trend in uptake of Aboriginal and Torres Strait Islander Health Assessment (MBS Item 715) and follow up care (MBS Item 10987) in Queensland relative to the rest of Australia.
2. A review of internal statistics that provide indications of participation and engagement.
 - Number of online surveys completed.
 - Volume of re-orders of campaign resources.
 - Number of Email updates/newsletters sent.
 - Volume of online registrations for a health check.
 - Facebook interaction.
3. In depth semi structured exploratory interviews were undertaken with 15 of a total of 22 Health Services. Of these, one was face to face (Aboriginal and Torres Strait Islander Community Health Service Brisbane Ltd) and the remainder were conducted by telephone. The participating Health Services are listed below.
 - Kalwun Health Service, Oxenford
 - Carbal Medical Centre
 - Goolburri Aboriginal Health Advancement Company Ltd, Toowoomba
 - Barambah Regional Medical Service (Aboriginal Corporation), Cherbourg
 - Bidgerdii, Rockhampton
 - Cunnamulla Aboriginal Corporation for Health
 - The Townsville Aboriginal & Torres Strait Islander Corporation for Health Services
 - Aboriginal and Torres Strait Islander Community Health Service Brisbane Ltd
 - Charleville & Western Areas Aboriginal and Torres Strait Islander Community Health Ltd, Charleville
 - Nhulundu Worribah Indigenous Health Organisation (Nhulundu Worribah), Gladstone
 - Girudala Community Cooperative Society Ltd, Bowen
 - Gurriny Yealamucka Health Service, Yarrabah
 - Apunipima Cape York Health Council, Cairns
 - Mulungu Aboriginal Corporation Medical Centre, Mareeba
 - Mt Isa Aboriginal Community Controlled Health Service t/a Gidgee Healing

Refer to Appendix 1 for a copy of the Interview Guide.

4. In depth exploratory interviews were undertaken with two key stakeholders. These were:
 - Makeeta Ratulevu, Indigenous Community Development Officer, Brisbane City Council, and
 - Ian Lacey, Institute for Urban Indigenous Health.

Refer to Appendix 2 for a copy of the interview guide.

7 Use of campaign resources

- There was a low completion rate of the on line survey and related on line registration facility - with a total 25 online surveys completed.
- A quarterly newsletter was delivered in collaboration with the QAIHC Preventative Health Team. It was initially intended to deliver a separate newsletter and email update but it was found to be more useful to combine communications with the Preventive Health Team.
- Four Health Services re-ordered resource material over and above the free start-up kit. The total of re-orders is listed below. Clearly the jerseys are the most popular with most used as incentives.
 - Hats: 400
 - Jerseys: 510
 - Bottled water: 200
 - Footballs: 200
- At the time of the *Hero Rewards...The Choice is Yours* evaluation the Facebook page had only been operational since May 2012. Analysis of the Facebook data shows that is considerable potential to grow its reach, particularly using viral (i.e. people who see a story posted by a friend) approaches. The hero rewards Facebook page had the following key statistics as of 10 May 2013
 - Total 'Likes' 100.
 - Weekly reach (the number of people who saw the Hero Rewards Facebook page) is steadily increasing with a total weekly reach in early April 2013 of 67 people growing to 634 by May 2013.
 - The majority (563 people) of this reach has been gained virally (i.e. people who saw a story posted by a friend).
 - 73 per cent of reach is female.
 - The majority (24.4 per cent) are 25-34 years of age.
 - The majority (38 per cent) are from Brisbane (239 out of 630).
 - The number of people 'talking about the site' (i.e. actively engaging with the site by for example posting, commenting or sharing rather than simply viewing) each week was 55 by May 2013 compared to two in early April 2013.

....it (Facebook) has the potential to develop into a valuable tool for Health Services and communities to interact, share and connect.

While numbers are small at this stage the trend shows that there is potential to drive the reach of the Hero Rewards Facebook page. The tone of content and the way users are interacting with the Facebook page suggests that users will be attracted to Hero Rewards Facebook - as a hub across which all Health Services can interact. It has the potential to develop into a valuable tool for Health Services and communities to interact, share and connect.

8 Qualitative research

The qualitative research undertaken as part of this evaluation has provided insight into the performance of the *Hero Rewards...the Choice is Yours* campaign and has informed future direction of ongoing programs.

Figure 1 presents the themes that emerged from the qualitative interviews. An analysis of the qualitative data was undertaken whereby the common themes were extracted from the data and categorised into clusters of similar issues. These clusters of similar issues are represented by the orange circles in Figure 1. These summarise the cluster of issues and reveal what is going on in the texts.

The clusters of similar issues have then been encapsulated into a Global Theme. The Global Theme is both a 'catch all' summary of the main themes and a revealing interpretation of the transcripts. As this is an interpretation by the researcher, debate and discussion by QAIHC and its stakeholders about its applicability is encouraged.

Engagement & commitment to Health Assessments

The enthusiasm and commitment of individual staff champions was key to active engagement

Of the 15 Services interviewed all but two had engaged directly with the Hero Rewards campaigns. The two that stated they had not engaged were in fact very proactive and were delivering similar local awareness and incentive campaigns.

Of those engaged the level and extent of engagement differed over time and was influenced primarily by capacity issues such as staff turnover, management support, size of the Health Service, consistency and adequacy of Medical Officers and capacity.

.....access to Health Assessments (MBS Item 715) is the key 'gateway' to accessing a comprehensive model of preventative health care.

The Health Services interviewed were unanimous that an increase in access to Health Assessments and its flow on access to preventative health care is the key to closing the health gap. All the Health Services interviewed were supportive of a model of care that facilitates Health Assessments and follow up care. As such there is a powerful passion and interest by the Health Services to participate in campaigns that help them grow Health Assessment volumes.

In terms of 'Closing the Health Gap' maximising the percentage of a community that presents for Health Assessments was considered a critical lead indicator. The Practice Incentive Program Indigenous Health Incentive

measure and PBS Co-payment Measure are for naught if no one presents. For this reason all were supportive of the Hero Rewards campaign as a means to maintain momentum.

The enthusiasm and commitment of Individual staff champions was key to active engagement.

Building awareness – incentives and local approach is key

Since the Services have funded their own incentives they have been innovative, creative and proactive in bringing Hero Rewards to life in their community.

The qualitative feedback made it clear that the *Hero Rewards...the Choice is Yours* Campaign has achieved its objective:

'to continue to build awareness of the importance of Health Assessments within communities.'

Hero Rewards...Come be a Hero played a critical role in showing the Services that incentives work, so continuing to engage with *Hero Rewards...the Choice is Yours* campaign despite the withdrawal of a funded incentive made sense to the Health Services.

'They needed an incentive to do this. By offering an incentive the interest grew. They do respond well and once here we can get them to do more.'

Hero Rewards...Come be a Hero showed the Health Services the power of incentives and the *Hero Rewards...The Choice is Yours* campaign maintained the momentum.

In fact, the withdrawal of the funded incentive was a catalyst for the engaged services to develop their own localised incentive and promotional campaigns. Since the services have funded their own incentives they have been innovative, creative and proactive in bringing Hero Rewards to life in their community.

The incentives used were varied. Some continued to self-fund shopping vouchers and others offered fruit baskets or goody bags such as baby or kids packs. T-shirts were reported as highly popular incentives among the communities. Some used the Hero Rewards merchandise and some liked the Deadly Choices T-shirts. The key feedback about T-shirts was the need to refresh annually to make it attractive to return for ongoing health assessments.

Of most interest was that the Health Services were very proactive at designing incentives and localised promotions that their communities would enjoy and that targeted the segments they knew were at risk or in need. For example, baby packs were created to attract parents with young children and T-shirts to attract the men and boys. Most communities interviewed expanded their local campaigns to by doing things such as sponsoring the football team, attending community days and even simply door knocking.

Feedback indicated that the Hero Rewards brand is an extremely well known state wide brand and 'it would be a shame to lose it'. The challenge is reconciling this with a view that the program should evolve to be more locally focussed.

The Health Services embraced an approach that was very 'local' and community based and they were creative and enterprising in the execution. They believe that a targeted promotional program and locally branded incentives are key to motivating demand for Health Assessments within their communities.

Resources and support

Health Services have used the key messages and resource copy provided in the resource kit to script local communications.

- The resource kit has not been fully utilised. Elements such as the posters and pull up banner are very popular. Others elements such as the post cards and calendars are less so.
- The website and online tools are also underutilised. The Health Services indicated that this is due to low usage of online and digital technology generally. This requires more case by case assessment to determine if this is the case generally or if it is more of a design or choice of technology (e.g. twitter, pinterest, Facebook web etc) issue. Feedback suggested that there is a difference among communities in their use of digital technology in use and choice of medium.
- When applying local promotional strategies the Health Services have used the key messages and resource copy provided in the resource kit to script local communications.
- The Health Services appear to prefer to implement local promotional campaigns. While they benefit from and welcome support to deliver these local promotional tactics they do not find a large generic suite of materials useful. They would rather a basic suite that they can more readily customise to target their own community appropriately.
- Support from the QAIHC Health Promotion Officer, Social Marketing is highly valued and helps to motivate engagement and overcome local barriers.
- Respondents indicated a passion for increasing the number of Health Assessments and they demonstrated great intuitive capabilities. Yet their ability to do so is limited by their capacity – time, people, funds and capability. The Health Services would benefit from more consistent, intensive and structured local support to plan and monitor performance. For this reason it was generally agreed that without a supported program such as Hero Rewards facilitating capacity building the momentum for driving Health Assessments will slow.
- It is not clear whether *Hero Rewards...the Choice is Yours* is directly delivering increased demand for health promotion services. Feedback indicates that once a patient has a Health Assessment they are actively

encouraged to participate in relevant health promotion initiatives offered. However the Hero Rewards campaign materials and tools (post cards, online tools, website) were rarely used for this purpose.

- There would be benefit in creating forums for collaboration between the Services – to share ideas. These could be held with existing conferences. Given the potential of Facebook this may also be a valuable forum through which to facilitate connections.
- There is an opportunity to collaborate with local Councils who have received funding via the Healthy Communities Initiative (HCI) to support Local Government Areas (LGAs) in delivering effective community-based physical activity and healthy eating programs, as well as developing a range of local policies that support healthy lifestyle behaviours.

The conclusion - global theme

Hero Rewards can be more comprehensively applied at the local community level to deliver equality of engagement and therefore outcomes across Queensland.

The enthusiasm and commitment of individual staff champions is key to active engagement. There is an opportunity to harness this powerful passion and interest of the Health Services that was evident among the respondents.

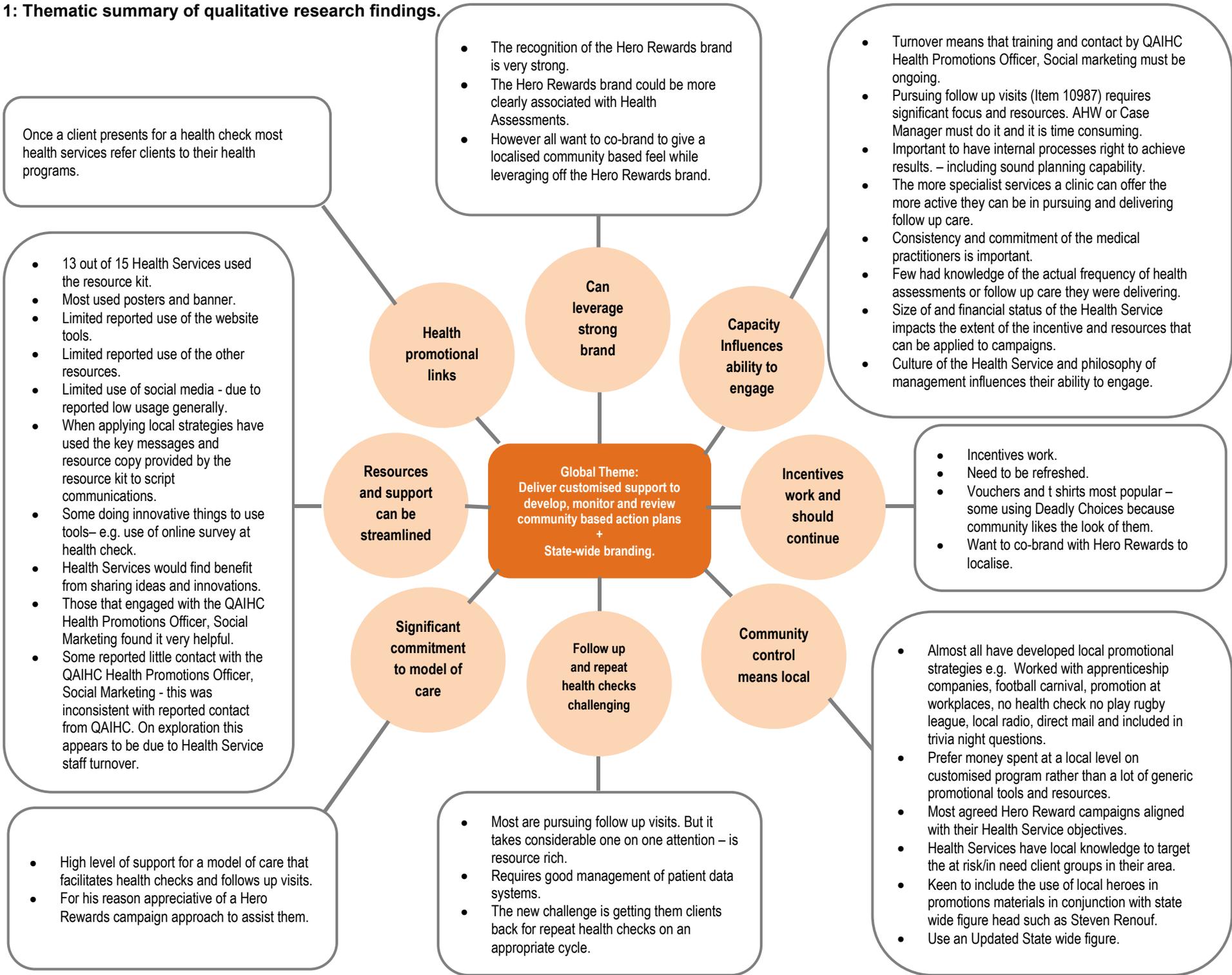
It was clearly evident that despite broad philosophical support, the capacity of each Health Service to engage was inconsistent. This capacity was not simply a factor of size or location. Broad capacity issues such as funds, reporting capability, development of systems and processes, staff turnover, management support, and governance status influenced in different ways the ability of Health Services to participate, report and monitor.

Importantly this support should facilitate a greater local reporting, planning and review discipline to motivate momentum.

For example Health Services with a stable and experienced team, well developed reporting and performance systems, management support, a broader skill mix and greater access to funds were clearly in a better position to implement *Hero Rewards...the Choice is Yours*. The research suggests that the state wide structural support of the Hero Rewards program can be more comprehensively applied at the local community level to deliver equality of engagement and therefore equality of outcomes across Queensland. Without ongoing capacity building support and annual refreshes and facilitation the Health Services will lose momentum.

In summary the qualitative research indicates that the state wide overarching Hero Rewards program with its strong brand connection should continue. The program would be enhanced by the provision of streamlined and locally relevant suite of resources and comprehensive targeted one on one support – where required. Importantly this support should facilitate a greater local reporting, planning and review discipline to motivate momentum.

Figure 1: Thematic summary of qualitative research findings.



9 Data Analysis

It was never intended that the Hero Rewards program would be the sole driver of Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) volume.

It was never intended that the Hero Rewards program would be the sole driver of Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) volume. Rather, it was designed to dovetail with other national strategies aligned with Closing the Gap and improving lifestyle risk factors that contribute to chronic disease including the Practice Incentive Program Indigenous Health Incentive measure, the PBS Co-payment Measure, the tackling Indigenous Chronic Disease initiatives and the Swap IT, Don't Stop It campaign.

As such Hero Rewards did not establish performance targets around an increase in the volume of Health Assessments (MBS Item 715) or follow up services (MBS Item 10987). Rather it set an objective to build awareness and maximise the opportunities available through the Practice Incentive Program Indigenous Health Incentive and PBS Co-Payment Measure (CTG), tackling Indigenous Chronic Disease initiatives and the Swap IT, Don't Stop It campaign. With this integrated approach the overall demand for Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) was expected to increase.

Comprehensive data reporting by the Health Services via QAICH is a new, evolving and voluntary discipline. As such Queensland community controlled health services are at different stages in their capacity to deliver consistent and accurate data. As a result, the data provided by the community controlled health services was unable to be used as part of this evaluation. Instead national Medicare statistics have been reviewed as means to glean an indication of the impact of the Hero Rewards program on Health Assessments (MBS Item 715) and follow up service (MBS Item 10987) uptake. It is important to note that this data is sourced from all health services across Australia and as such is not confined to community controlled health services.

A review of the national Medicare Australia Statistics during the period of the Hero Rewards program shows the rate of Health Assessments did indeed increase. Figure 2 shows clear growth in Health Assessments (MBS Item 715) occurred across all states and territories - most likely as a consequence of the range of national strategies in place. It is notable however, that Queensland has experienced a greater increase relative to the other states.

Similarly Figure 3 shows a steady increase in the uptake of follow up services (MBS Item 10987) for most states and territories. Interestingly, Queensland has a sudden and sustained increase in uptake of follow up services (MBS Item 10987) from quarter 3, 2011 coinciding with the commencement on *Hero Rewards...the Choice is Yours* in August 2011.

Figure 2: Uptake of Aboriginal and Torres Strait Islander Health Assessment (MBS Item 715) Source: https://www.medicareaustralia.gov.au/statistics/mbs_item.shtml

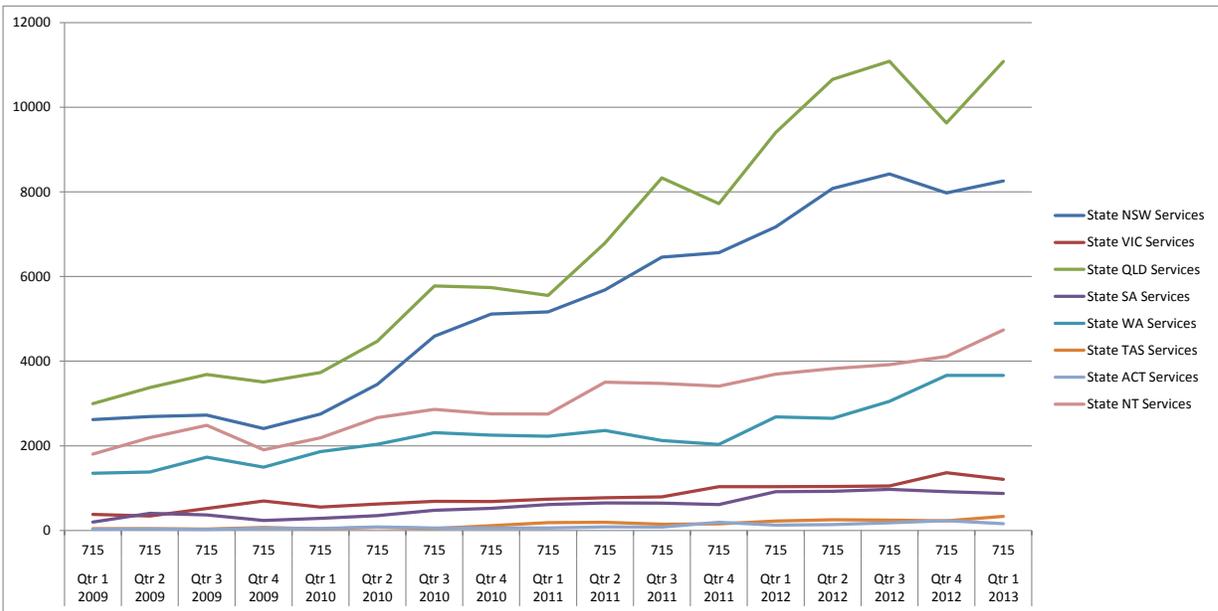
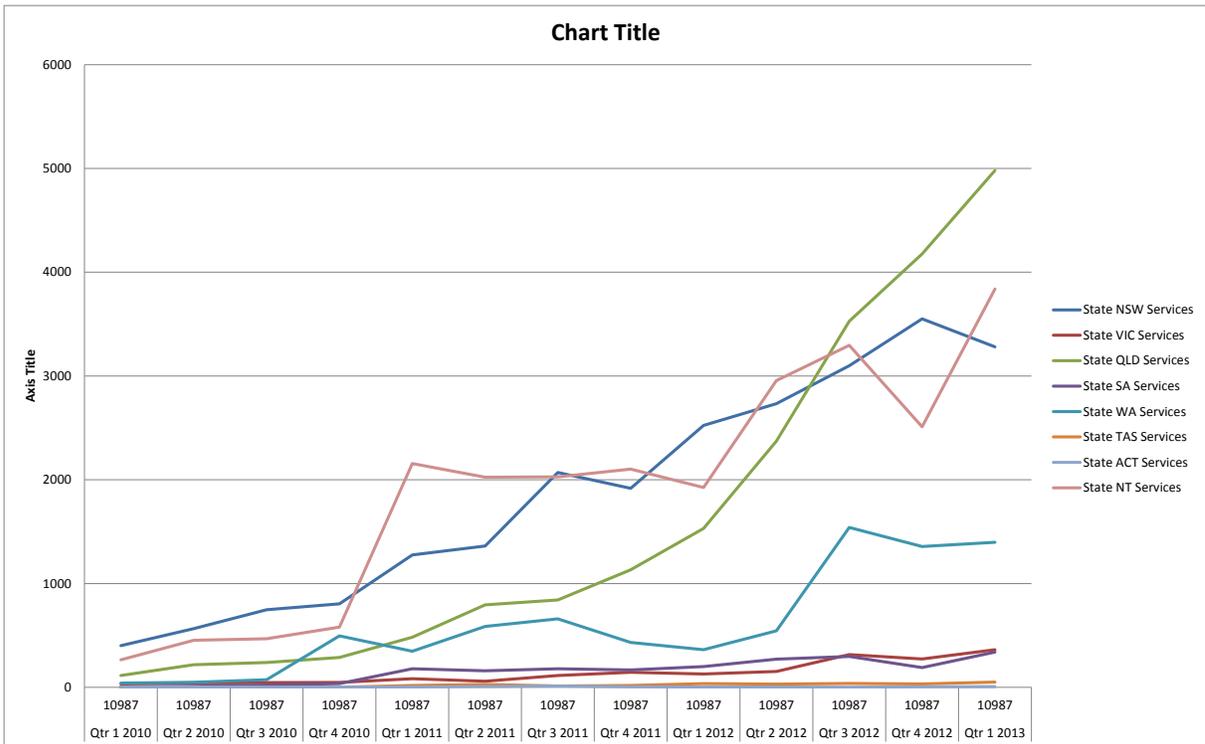


Figure 3: Uptake of Aboriginal and Torres Strait Islander Follow up services (MBS Item 10987) Source: https://www.medicareaustralia.gov.au/statistics/mbs_item.shtml



Queensland's rate of increase for both Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) is greater since the launch of *Hero Rewards... the Choice is Yours* in August 2011.

The rate of increase for both Health Assessments (MBS Item 715) and follow up services (MBS Item 10987) is greater since the launch of *Hero Rewards... the Choice is Yours*.

- The average monthly billing volume of Queensland Health Assessments (MBS Item 715) during *Hero Rewards... the Choice is Yours* was 9,700 compared to 5,666 during *Hero Rewards...Come be a Hero*.
- The average monthly billing volume of Queensland Follow up Services (MBS Item 10987) during *Hero Rewards... the Choice is Yours* was 2,652 compared to 403 during *Hero Rewards...Come be a Hero*.

The Aboriginal and Torres Strait Islander Health Performance Framework 2012 report: Queensland² found the rate of Indigenous people in Queensland undertaking health checks and Health Assessments at age 0–14, 15–54, and 55 and over was higher than for Indigenous people nationally. Further there has been a significant increase in Health Assessments provided to Indigenous Australians in Queensland since the introduction of the National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes in July 2009. Rates of child health checks and adult Health Assessments almost doubled between 2008–09 and 2010–11.

Conclusions

Queensland has a higher rate of Health Assessments of Indigenous Australians compared to all other states or Territories.

A review of the Medicare data, in combination with qualitative research findings suggests that the *Hero Rewards* program has had a very positive impact. Queensland has a higher rate of Health Assessments of Indigenous Australians compared to all other states or Territories.

It seems that the cessation of a funded incentive scheme has not adversely impacted on the growth in Health Assessments completed.....

QAIHC has advised that to the best of their knowledge no other state of Australia has implemented an incentive program - over and above the Practice Incentive Program - to encourage indigenous Health Assessments. With the rate of increase greater in Queensland relatively to other states there is some indication that the *Hero Rewards* program has had a positive impact.

Importantly the rate of increase for both Health Assessments (MBS Item 715) and follow up services (Item MBS) is greater since the launch of *Hero Rewards... the Choice is Yours*. This suggests that the design of *Hero Rewards...The Choice is Yours* may have facilitated sustained and increasing Health Service and community engagement.

It seems that the cessation of a funded incentive scheme has not adversely

² Australian Institute of Health and Welfare 2013. Aboriginal and Torres Strait Islander Health Performance Framework 2012 report: Queensland. Cat. no. IHW 85. Canberra: AIHW.

impacted on the growth in Health Assessments completed during the *Hero Rewards...the Choice is Yours* campaign. A finding fully consistent with the qualitative research findings that emerged as part of this evaluation.

There are very positive indications from this data that the Hero Rewards program and in particular the *Hero Rewards ... the Choice is Yours* campaign has had a significant positive impact. However the data limitations mean that it is not conclusive. Medicare data sourced from all health services in Queensland does not isolate the performance of community controlled health services nor does it reveal the contribution of other state based programs such as Deadly Choices. To fully isolate the impact on the community controlled health services a continued focus on the collection of accurate and complete data from the community controlled health services is important.

10 Conclusions

There is no doubt that the *Hero Rewards - the Choice is Yours* Campaign is achieving its objectives.....

The *Hero Rewards...the Choice is Yours* campaign and its predecessor *Hero Rewards...Come be Hero* has primed Queensland's community controlled health services to focus on increasing Health Assessments and growing their preventative health programs. Queensland's Health Services have demonstrated that they are keen and ready to embrace an approach that is localised and truly community based. There is an opportunity to harness this commitment and offer a refreshed *Hero Rewards* program that builds on its state-wide brand while helping the Services deliver targeted and robust community based social marketing campaigns that overcome the barriers and execute the right enablers.

***Hero Rewards...the Choice is Yours* campaign performance against its objectives**

Objective 1: To continue to build awareness of the importance of Health Assessments within communities.

There is no doubt that the *Hero Rewards - the Choice is Yours* Campaign is achieving its objective to continue to build awareness of the importance of Health Assessments among communities. A review of the Medicare data suggests that the *Hero Rewards* program has had a very positive impact. Queensland has a higher rate of Health Assessments of Indigenous Australians compared to all other states or Territories.

Qualitative research revealed that Health Services credited their engagement with *Phase 1: Hero Rewards...Come be a Hero* as a key trigger to engage in community based promotion to generate an increase in Health Assessments. From this trigger they have continued to be engaged in *Phase 2: Hero Rewards...the Choice is Yours*.

Significantly this engagement has been facilitated by the overarching state wide brand awareness and support of the QAIHC Health Promotions Officer Social Marketing. It is exciting that the Health Services responded by developing localised promotional approaches. However, this very local approach has meant they have not used the resources and tools developed for *Phase 2: Hero Rewards...the Choice is Yours* a much as was anticipated. The key barriers to using the resources were reported to be cost and a desire to apply a local community based approach with more local branding. The Health Services would possibly have used the resources and tools more if they were provided with more detailed guidance on how to integrate those resources with local community based promotional initiatives.

Objective 2: To maximise the opportunities available through PIP Indigenous Health Incentive and PBS Co-Payment Measure (CTG).

Importantly the rate of growth in Health Assessments in Queensland is higher than for Indigenous people nationally.

Data analysis at all levels indicates significant increases in Health Assessments. Importantly the rate of growth in Health Assessments in Queensland is higher than for Indigenous people nationally. This increase in Health Assessments means the opportunities through PIP Indigenous Health Incentive and PBS Co-Payment Measure (CTG) have certainly been maximised.

Due to data limitations it has not been possible to measure the isolated contribution of *Hero Rewards... the Choice is Yours* to these increases in Health Assessments. Given its positive role in building awareness of the importance of Health Assessments within communities it can be surmised that *Hero Rewards...the Choice is Yours* has contributed to maximising the opportunities available through PIP Indigenous Health Incentive and PBS Co-Payment Measure (CTG).

Objective 3: To support Health Services to introduce a model of care that improves coordination of care for Aboriginal and or Torres Strait Islander people.

The Hero Rewards...the Choice is Yours campaign has certainly provided support to introduce a model of care that improves coordination of care for Aboriginal and or Torres Strait Islander people.

...the take up of support from Hero Rewards has varied across Health Services - based on the capacity of each Health Service to engage.

Despite unanimous and passionate support for a model of care that uses Health Assessments as a gateway to preventative health care, the take up of support from Hero Rewards has varied across Health Services - based on the capacity of each Health Service to engage.

The research suggests that the state wide structural support of the Hero Rewards program can be more comprehensively applied at the local community level to deliver equality of engagement and therefore equality of outcomes across Queensland. Without ongoing capacity building support and annual refreshes and facilitation the Health Services will lose momentum.

Objective 4: To promote programs that are health promotion and allied health service focussed.

Anecdotal evidence suggests that once a patient has a Health Assessment they are actively encouraged to participate in the relevant health promotion initiatives offered. However the Hero Rewards campaign materials and tools (post cards, online tools, website) seem to be rarely used for this purpose. There appears to be a lack of objective measures to determine the extent of the increase in take up of health promotions and allied health services.

Keys to success to date

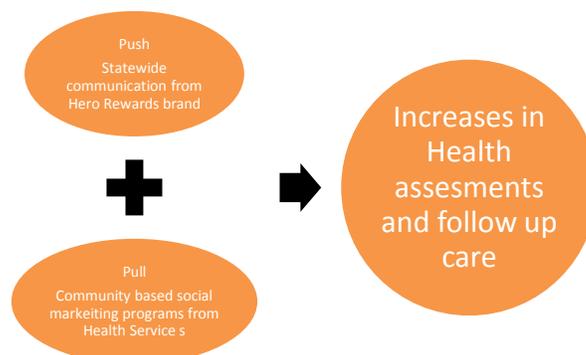
The Hero Rewards...the Choice is Yours campaign and its predecessor Hero Rewards...Come be Hero has primed Queensland's community controlled health services to focus on increasing Health Assessments and growing their preventative health programs.

Key to the *Hero Rewards...the Choice is Yours* campaign's success to date has been:

- a strong state wide brand and communications
- showing the Health Services the value of the use of incentives
- inspiring the Health Services to work at attracting patients specifically for Health Assessments and subsequent follow up care
- building the capacity of Health Services to implement local promotional approaches supported by the state-wide Hero Rewards framework
- passionate and committed Health Service personnel who understand that access to Health Assessments and the flow on access to preventative health care is the key to closing the indigenous health gap
- the use of targeted, community based promotion, incentives and programs, and
- capacity building support provided by the QAIHC Health Promotion Officer Social Marketing.

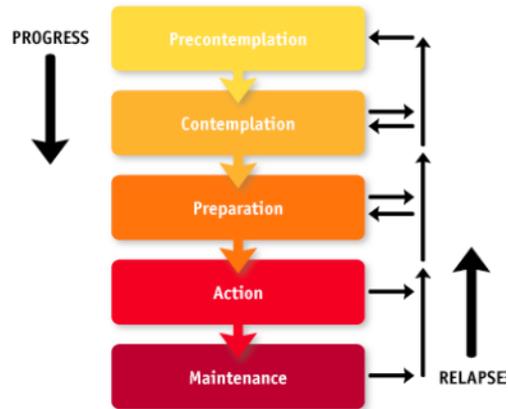
As a community based social marketing program *Hero Rewards...the Choice is Yours* has been successful in contributing to an increase in the number of indigenous people consenting to Health Assessments and follow up care. While the state-wide branding and promotional campaign has 'pushed' some clients to the Health Services, this has been complimented by the support provided to the Health Services to 'pull' clients. This two way approach is critical to future success. Refer to Figure 4.

Figure 4: Two way approach to increase the rate of Health Assessments and follow up care



Using the Diclemente and Prochaska model of behaviour change, since 2009 Queensland communities have moved from not even contemplating the need for a Health Assessment or follow up care to Health Services and their clients now actively engaging. Refer to Figure 5: Behaviour change journey adapted from Diclemente and Prochaska 1998. In fact, Queensland is leading Australia in the rate of Health Assessments being undertaken in Indigenous communities.

Figure 5: Behaviour change journey adapted from Diclemente and Prochaska 1998.



While the increased rate of Health Assessment and follow up care is encouraging this evaluation has highlighted that scope remains to achieve further increases. The sources of these increases are the following segments:

- continued conversion of existing patients
- new patients attending specifically to undertake health checks
- repeat Health Assessments as required, and
- pursuit of and measurement of follow up care (MBS Item 10987).

Each of these segments will require a targeted community based approach driven by the local Health Service.

Without a dedicated Hero Rewards style program providing support, the risk is that the Health Services and their communities will at best stem the increase in Health Assessments and follow up care and at worst relapse back to their old ways. This is illustrated by the Diclemente and Prochaska behaviour change model (refer to Figure 5). This risk of behaviour decay was reinforced by the qualitative research findings where it was found that due to varied capacity of each Health Service, the ability to engage was inconsistent. Without ongoing support and annual refreshes and facilitation the Health Services will certainly lose momentum.

The barriers

The findings that emerged from the Qualitative research were mirrored in a recent Queensland based study by Askew et al³. This study showed that while Aboriginal medical services staff believes in the utility of the Health Assessment there are a variety of barriers that still exist against increasing their uptake.

The barriers in achieving an increase in Health Assessments identified by their study were:

- clinical systems for conducting Health Assessments were unclear to staff
- time pressures for both patients and clinic staff
- lack of clarity about staff responsibilities for initiating and conducting the Health Assessment
- some staff perceived some content as sensitive, invasive, culturally inappropriate and of questionable value
- concerns about community health literacy
- disengagement with preventative health care, and
- suspicion about confidentiality and privacy.

The study identified a range of measures to address the barriers including the development of clear service-wide systems that support the conduct of Health Assessments combined with supportive local clinical leadership and audit and feedback systems, staff training, consideration of culture and roles, and critical review of Health Assessment content to improve staff confidence and community acceptance. Importantly the study found that community-based health education and promotion is strongly supported by staff to increase client engagement, knowledge and acceptance of the Health Assessment.

This evaluation identified similar issues as key barriers to achieving consistent and disciplined engagement in the pursuit of Health Assessments and follow up care across Queensland's community controlled health services

Like the respondents in the study outlined above (Askew et al 2013) the respondents in this Hero Rewards evaluation indicated a passion for increasing the number of Health Assessment. Their ability to do so however is limited by their capacity. This capacity was not simply a factor of size or location. Capacity issues such as funds, reporting capability, development of systems and processes, staff turnover, management support, and governance status all influenced the ability to participate, report and monitor.

The research suggests that the state wide structural support of the *Hero*

³ Askew D Spurling G Jennings W, 2013, Yarning about health checks: barriers and enablers in an urban Aboriginal medical service, Australian Journal of Primary Health, CSIRO Publishing.

Rewards...The Choice is Yours can be more comprehensively applied at the local community level to facilitate equality of engagement and therefore outcomes across Queensland. The program would be enhanced by the provision of streamlined and locally relevant suite of resources and comprehensive targeted one on one support – where required. Importantly this support should facilitate a greater local reporting, planning and review discipline to motivate momentum.

Recommendations

There is an opportunity to harness the powerful passion and interest of the Health Services that was clearly in evidence throughout this evaluation.

Yet despite broad philosophical support, the capacity of each Health Service to engage was inconsistent. Larger Health Services with a broader skill mix, larger staff numbers and greater access to funds were clearly in a better position to implement *Hero Rewards...the Choice is Yours*.

The research suggests that the state wide structural support of the Hero Rewards program can be more comprehensively applied at the local community level to deliver equality of engagement and therefore equality of outcomes across Queensland. Without ongoing capacity building support and annual refreshes and external facilitation the Health Services will lose momentum.

In summary there is benefit for the state wide overarching Hero Rewards program with its strong brand connection to continue. The program would be enhanced by the provision of a streamlined and locally relevant suite of resources and comprehensive targeted one on one support – where required. Importantly this support should facilitate a greater local reporting, planning and review discipline to motivate momentum. The global theme emerging from this evaluation is the need to deliver:

THE PULL:
Attract patients for Health Assessments using local action plans

THE PUSH:
Drive community members to the Health Service by leveraging the strong umbrella brand of Hero Rewards

- THE PULL: comprehensive customised support at a local level to help each Health Service develop, manage and monitor a structured community based action plan (based on social marketing principals) to attract patients for Health Assessments and follow up care and to integrate with local health promotion.
- THE PUSH: Leverage the strong umbrella brand of Hero Rewards to educate and drive community members to the Health Service

Specifically this evaluation has shown that a future Hero Rewards program should include the following key elements.

- Continued use of incentives.
- Disciplined segmentation and reporting by:
 - opportunistic Health Assessments

- dedicated Health Assessments
 - repeat Health Assessments, and
 - follow up care (MBS Item 10987)
- A deep understanding of the barriers to participation from both the Health Service and client's perspective.
- Continued use of state-wide Hero Rewards branding and communications to increase Health Service engagement and client knowledge and acceptance of the health check.
 - Design the creative suite such that it can be co-branded at the local community level.
 - Continue to use public identities to endorse the program.
 - Refresh current creative to ensure it has cut through amongst other messages in market.
 - Continue to pursue social media, in particular Facebook, in a locally appropriate way.
- Deliver comprehensive customised support at a local level to help each Health Service develop, manage and monitor a structured community based action plan (based on social marketing principals) to attract patients for Health Assessments and follow up care and to integrate with local health promotion programs.
 - Help them review the local barriers and motivations from both the Health Service and client's perspective.
 - Help them identify solutions - local incentives, use local heroes, local programs.
 - Help them set targets.
 - Encourage the use of the online resources by educating them on how to use them and the benefits.
 - Help them track and monitor performance – providing a simple monthly performance report.
 - Monitor staff changes and re-engage with new staff as required
 - Help them refresh the plan annually.
- Continue the focus on the collection of reliable and relevant performance data. Working at a local level to demonstrate the power of understanding the numbers will encourage this process.
- Create clarity on how the program will integrate with and support local health promotion initiatives. Agree performance indicators around this.
- Streamline the current support resources. Devolve funding so that it is allocated to deliver the specific local action plan under the guidance of the QAIHC Project Officer Social Marketing. For example rather than have a start-up kit – allocate the funding so that each Health Service can create a customised order based on their local action plan.
- Collaborate with local Councils who have received funding via the Healthy Communities Initiative (HCI) to support Local Government Areas (LGAs) in delivering effective community-based physical activity and healthy eating programs, as well as developing a range of local policies that support healthy lifestyle behaviours
- Facilitate positive sharing and comparing among the Health Services.

11 Appendix 1

***Hero Rewards – The Choice is Yours* campaign Community Controlled Health Service – participants Interview Guide**

Preamble

The Queensland Aboriginal and Islander Health Council has engaged me (SANDBOX) to evaluate and review the *Hero Rewards...The Choice is Yours* campaign.

We hope the evaluation will provide valuable insight into how the social marketing campaign has contributed to change within the community controlled health sector and how the campaign can be further improved and adapted to meet the changing and diverse needs of the Aboriginal and Torres Strait Islander population.

The evaluation includes interviewing key staff from within Aboriginal and Islander Community Controlled Health Services and collecting and analysing service delivery data related to the campaigns objectives. We are in the process of collecting the data form each CCHS.

Nature/extent of health service participation

1. Are you familiar with the *The Hero Rewards – The Choice is Yours* campaign?
 - a. What do you know about it?
2. Did you implement The Hero Rewards – The Choice is Yours campaign in your CCHS?
 - a. To what extent?
3. Can you describe how you engaged with the program?
 - a. Did you offer reward/incentives?
 - b. Did you receive the Service Start Up Kit?
If yes did you use it? Why/why not?

Motivation to participate

4. Why did you participate in *Hero Rewards – The Choice is Yours* campaign?
5. Did *The Hero Rewards – The Choice is Yours* campaign approach align/support the objectives of your Health Service?
6. Did you provide an incentive to clients to attend for a health check as part of the *Hero Rewards – The Choice is Yours* campaign.
 - a. If yes – what was it?
7. What do they think are the barriers to have Health Assessments and did the Hero Rewards' campaign help to overcome them?

Who is attending?

8. Is it attracting new clients? What percentage of total?
9. Is it attracting an equal mix of male and females?
10. What age groups are participating?

Program impact

11. What do you think have been the benefits of the *Hero Rewards...The Choice is Yours* campaign.
12. Do you believe the *Hero Rewards... The Choice is Yours* campaign has led to an increase in the number of community members presenting for an Aboriginal and Torres Strait Islander Health Check (MBS Item 715)?
13. If yes what do you think the percentage increase is approximately?
14. Do you believe the *Hero Rewards - The Choice is Yours* campaign has led to an increase in the number of community members participating in follow up care. (MBS item 10987).
 - a. If yes – why?
 - b. If no why not?
 - c. What percentage of those presenting for a health check are presenting for follow up care? (MBS item 10987)
15. Do you think that the *Hero Rewards - The Choice is Yours* campaign has raised the community's awareness of the holistic services that are available to them?
16. Do you think that the *Hero Rewards - The Choice is Yours* campaign has led to an increase in demand for services that support healthy lifestyles and allied health care. If yes – what services?

Prompts:

- GP Management Plans
 - Team Care Arrangements
 - Referrals to nurses, Aboriginal Health Workers, Dieticians, Exercise Physiologist, Podiatrists, Diabetes, Education, lifestyle modification programs such as Quick Tukka, Living Strong, walking groups, podiatrists, MEND and Brief Intervention.
17. Has the *Hero Rewards - The Choice is Yours* campaign prompted your Service to create new services/programs that support healthy lifestyles and allied health care.
 18. Has the *Hero Rewards - The Choice is Yours* campaign prompted your Service to refresh/revise existing new services/programs that support healthy lifestyles and allied health care

34. Evaluation of the *Hero Rewards...the Choice is Yours* campaign May 2013

19. Do you think that the *Hero Rewards - The Choice is Yours* campaign has/is leading to improved health outcomes for participants?
- a. If yes – describe what the improvements are.
 - b. If no – why not?

Program support

20. Did you feel you have had enough support to implement the *Hero Rewards - The Choice is Yours* campaign?
21. Did you find the Service Start Up Kit useful.
- c. If yes – how was it useful and were there any particular elements of the kit that were most useful?
 - d. If not – why not?
22. Did your staff receive training?
- a. If yes – what sort?
23. Was the training support adequate?
- a. If no - why not?
24. How important has it been to have a project officer supporting the program?
- a. If important – why.
 - b. If not - why not?
25. How do you think the campaign support could be improved?
26. How could the campaign overall be improved?

12 Appendix 2

Hero Rewards – The Choice is Yours campaign Community Controlled Health Service – Stakeholder Interview Guide

Preamble

The Queensland Aboriginal and Islander Health Council has engaged me (SANDBOX) to evaluate and review the *Hero Rewards...The Choice is Yours* campaign.

We hope the evaluation will provide valuable insight into how the social marketing campaign has contributed to change within the community controlled health sector and how the campaign can be further improved and adapted to meet the changing and diverse needs of the Aboriginal and Torres Strait Islander population.

The evaluation includes interviewing key staff from within Aboriginal and Islander Community Controlled Health Services, interviews with key sector stakeholders such as yourself and collecting and analysing service delivery data related to the campaigns objectives. We are in the process of collecting the data from each CCHS.

1. What has been your involvement with The *Hero Rewards – The Choice is Yours* campaign?
2. Do you believe the *Hero Rewards - The Choice is Yours* campaign has led to an increase in the number of community members presenting for an Aboriginal and Torres Strait Islander Health Check (MBS Item 715)?
3. If yes what was it about the campaign that achieved this?
4. Similarly do you believe the *Hero Rewards - The Choice is Yours* campaign has led to an increase in the number of community members participating in follow up care. (MBS Item 10987).
 - a. If yes – why?
 - b. If no why not?
5. Do you think that the *Hero Rewards - The Choice is Yours* campaign has raised the community's awareness of the holistic services that are available to them?
6. Do you think that the *Hero Rewards - The Choice is Yours* campaign has led to an increase in demand for services that support healthy lifestyles and allied health care.

Prompts:

- GP Management Plans
- Team Care Arrangements

- Referrals to nurses, Aboriginal Health Workers, Dieticians, Exercise Physiologist, Podiatrists, Diabetes, Education, lifestyle modification programs such as Quick Tukka, Living Strong, walking groups, podiatrists, MEND and Brief Intervention.
7. Has your organisations links with/ involvement in *Hero Rewards* contributed to and supported your organisation's work in the indigenous communities?
 8. Is there anything more we can do to help make your organisation's work more 'culturally relevant'?
 9. Do you think that the *Hero Rewards - The Choice is Yours* campaign has/is leading to improved health outcomes for participants?
 - e. If yes – describe what the improvements are.
 - f. If no – why not?
 10. How important has it been to have a project officer supporting the program?
 2. a. If important – why.
 3. b. If not - why not?
 11. Overall do you think the Hero Rewards - The Choice is Yours campaign has been able to achieve its objectives.

These are:

- To build awareness of the importance of Health Assessments among the community.
 - To maximise opportunities available through the PIP indigenous Health Incentive and PBS Co-Payment Measure.
 - To support health services to introduce a model of care that improves coordination of care for Aboriginal and or Torres Strait Islander people.
 - Promote programs that are health promotion and allied health services focussed.
12. If the campaign was to continue what should the next phase look like?
 - What would be the objectives of a next phase?
 - How would you like to see us work with your organisation?
 - Specifically what would it look like?:
 - Localised campaigns?
 - Generic communication materials?
 - What type of support materials?
 - Use of social media?
 - Use of a TV campaign?
 - Continued Support Officer
 - Continued health lifestyle team
 - Incentives – what should they look like?