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High intensity hepatitis C point-of-care testing campaigns in Victorian prisons: making progress towards elimination

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Disclosures

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Acknowledgement of country



I recognise we are all meeting in Naarm on the traditional lands of the Wurundjeri Woi-wurrung people.

Background

HCV care in Victorian Prisons

- State-wide Hepatitis Program started in 2015
 - 1 FT NP + 3 PT CNCs across 14 sites
 - Prison health service responsible for testing
 - SHP responsible for assessment, management and treatment
 - Regular nurse-led clinics at each site + Telehealth for complex patients
 - Number of HCV treatments over this time: Approx 4000
- Number of people with HCV steadily declining
- HCV prevalence estimates largely unknown

Background

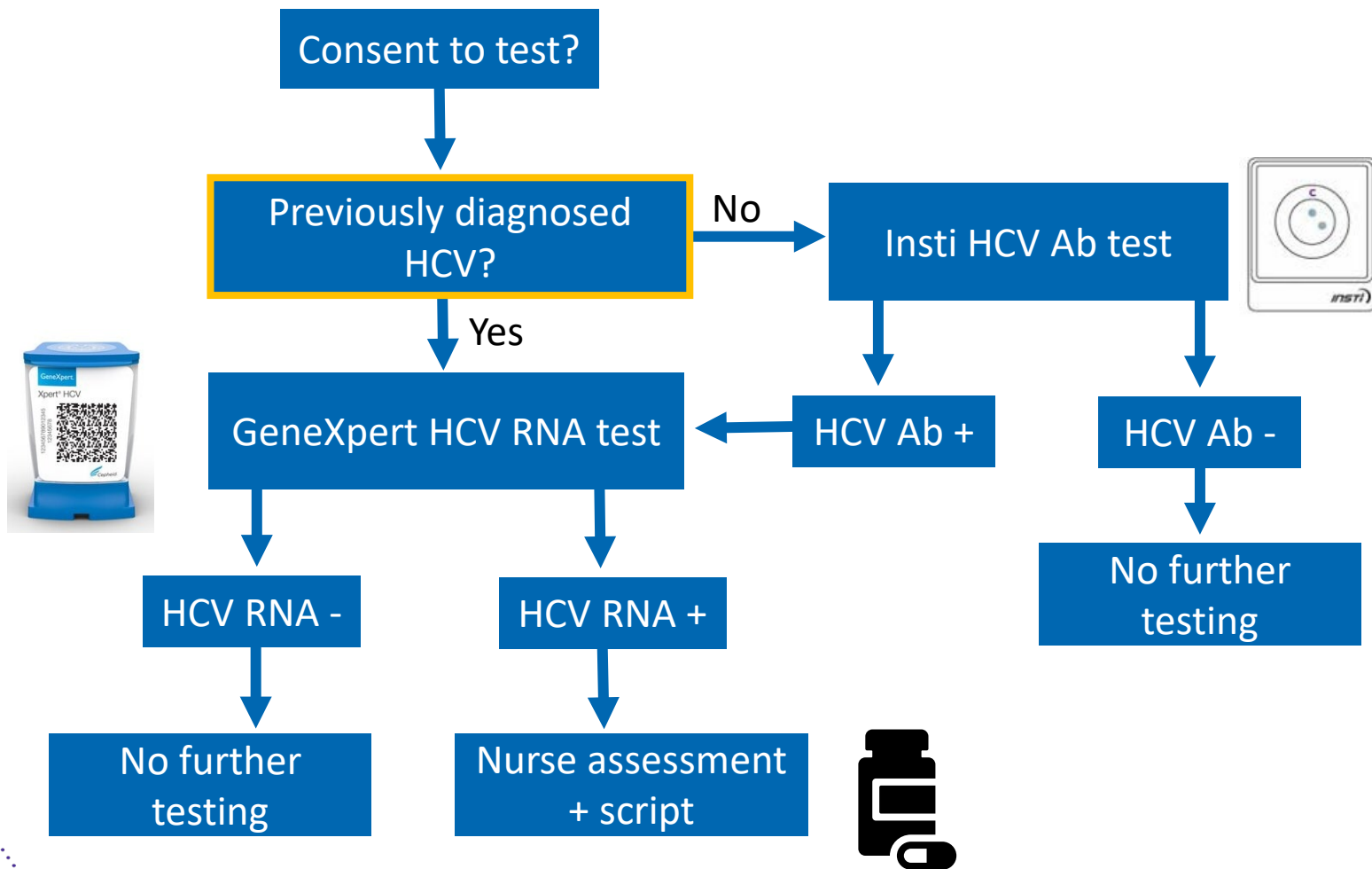
HCV care in Victorian Prisons

- Point-of-care testing has been crucial to significantly increase testing efforts
 - Victorian Prisons enrolled in the National Program
 - Opt-out testing commenced in reception at MRC May 2024
 - Tested 1100 people, 58% of all receptions
 - Testing campaigns December 2024 + May 2025
 - Multiple funding sources to support nursing workforce to deliver testing

Delivery of service – testing campaigns



Delivery of service – testing campaigns



Metropolitan Remand Centre (MRC) Overview

- Large male remand centre in Melbourne, Victoria
- Point-of-care (reception) in place prior to testing campaign (since May 2024)
- 9 total days of testing in December 2024
- 6 nurses and 3-4 COs per day
- Partnership between GEO Healthcare, Corrections Victoria and St Vincent's Hospital Melbourne

MRC	N (%)
Total People Tested	583/779 (75%)
Median Age	35 years
Aboriginal or Torres Strait Islander	112/583 (19%)
Past Injecting History	244/583 (42%)
Ever Diagnosed HCV	116/583 (20%)
Ever treated HCV	98/116 (84%)

Metropolitan Remand Centre (MRC) Testing Results

MRC	ALL	PWID	ATSI
# People tested HCV Ab	469/583	141/244	81/112
- Positive	9 (2%)	7 (5%)	2 (2%)
- Negative	460 (98%)	134 (95%)	79 (98%)
# People tested HCV PCR	137/583	110/244	33/112
- Positive	9 (7%)	8 (7%)	2 (6%)
- Negative	114 (93%)	102 (93%)	31 (94%)
- Error rate	14 (10%)		
Estimated HCV Ab prevalence	123/583 (21%)*	110/244 (45%)*	33/112 (30%)*
HCV PCR prevalence	9/583 (1.5%)	8/244 (3.3%)	2/112 (1.8%)
Commenced on DAAs	9/9 (100%)	8/8 (100%)	2/2 (100%)

**HCV Ab prevalence estimate calculated by self-reported prior diagnosis of HCV in addition to HCV Ab positive INSTI test*

Port Phillip Prison (PPP) Overview

- Large sentenced male prison in Melbourne, Victoria
- Currently in the process of being closed down
- 6 total days of testing in May/June 2025
- 6 nurses and 1 CO per day
- Partnership between G4S Security and St Vincent's Hospital Melbourne

PPP	N (%)
Total People Tested	502/737 (68%)
Median Age	33 years
Aboriginal or Torres Strait Islander status	93/502 (19%)
Past Injecting History	201/502 (40%)
Ever Diagnosed HCV	97/502 (19%)
Ever treated HCV	75/97 (77%)

Port Phillip Prison (PPP) Testing Results

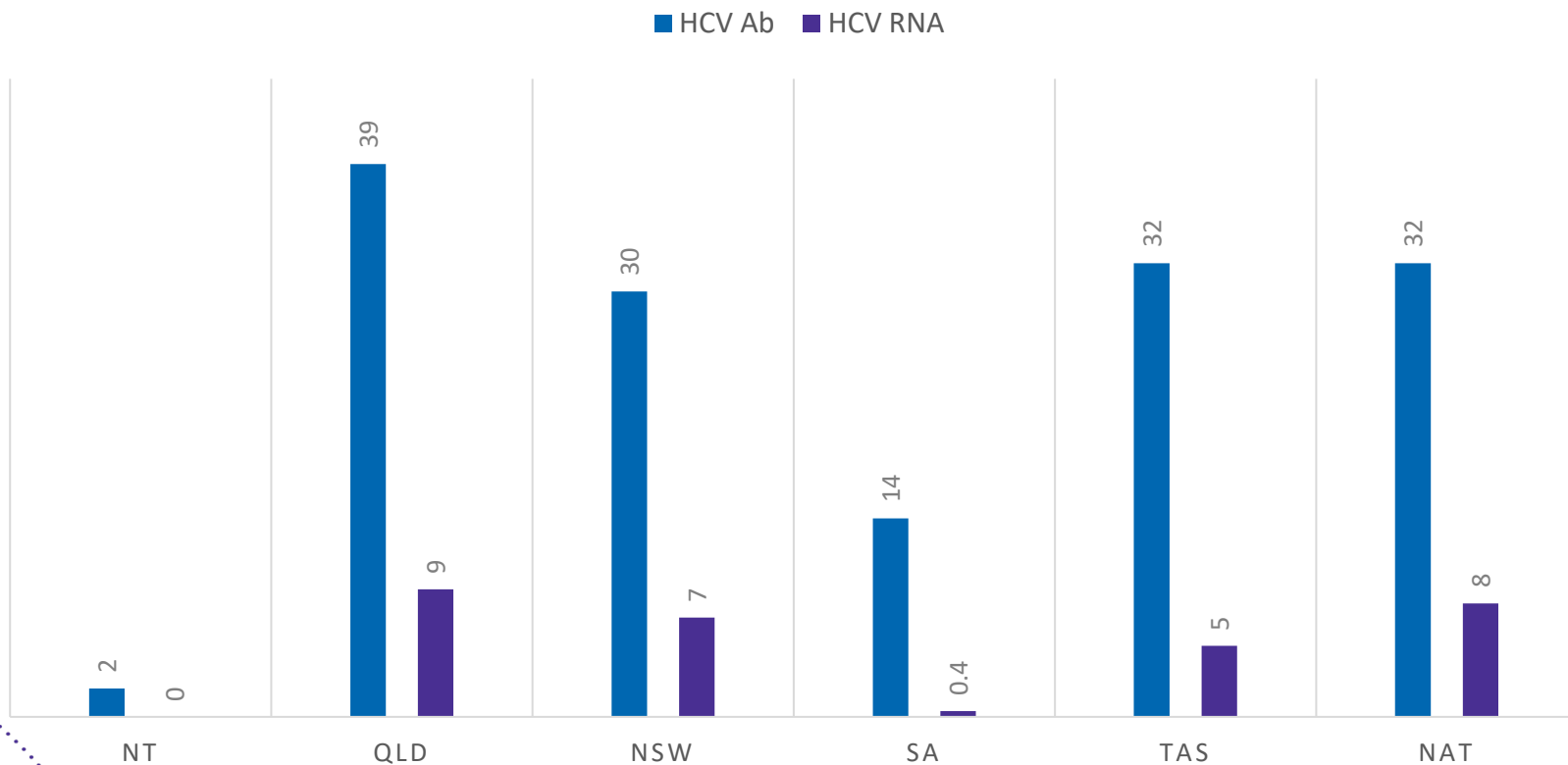
PPP	ALL	PWID	ATSI
# People tested HCV Ab	402/502	107/201	69/93
- Positive	8 (2%)	7 (7%)	4 (6%)
- Negative	394 (98%)	100 (93%)	65 (94%)
# People tested HCV PCR	108/502	101/201	28/93
- Positive	3 (3%)	3 (3%)	1 (4%)
- Negative	105 (97%)	98 (97%)	27 (96%)
- Error rate	12 (13%)		
Estimated HCV Ab prevalence	105/502 (21%)*	101/201 (50%)*	28/93 (30%)*
HCV PCR prevalence	3+1 [^] /502 (0.8%)	3/201 (1.5%)	1/93 (1%)
Commenced on DAAs	3/4 (75%)	3/4 (75%)	1/1 (100%)

*HCV Ab prevalence estimate calculated by self-reported prior diagnosis of HCV in addition to HCV Ab positive INSTI test

[^]1 person included in this data had an error on initial point-of-care testing, was transferred out the following day and subsequently tested HCV PCR positive on transfer to another prison site

National HCV prevalence estimates

HCV Ab + RNA Prevalence in Prisons (male)



National Prisons Hepatitis Network (NPHN) Surveillance Dashboard (2025) <https://www.nphn.net.au/dashboard>

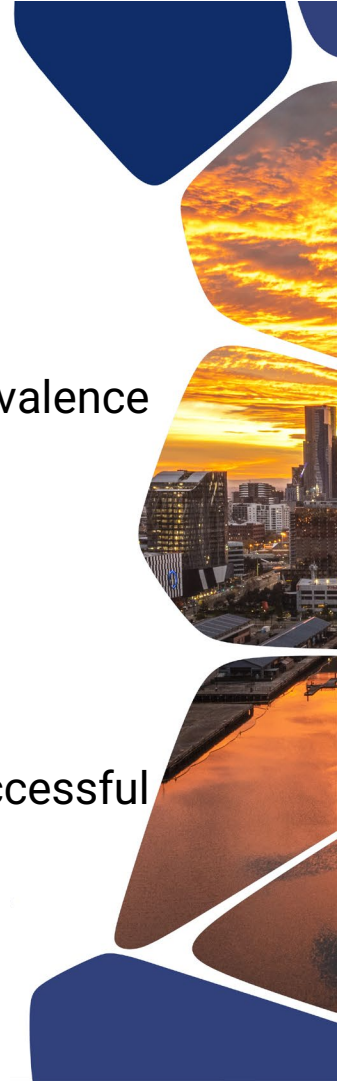
What's next for point-of-care testing?

- Two more testing campaigns in September 2025
 - Barwon Prison
 - Melbourne Assessment Prison
- Set up intake/reception testing at Melbourne Assessment Prison in the final quarter of 2025
- Testing campaign Ravenhall Correctional Centre early 2026



KEY ACTIONS & TAKEAWAYS

1. Point-of care-testing increases testing uptake and provides current prevalence estimates in individual prisons
2. Having a token exchange for testing (eg gummy bears/chocolates) **SIGNIFICANTLY** increases participation
3. Adequate funding of nursing workforce is crucial for the delivery of successful point-of-care testing programs (and all viral hepatitis care)



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