

Models of Care

Rapporteur session

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Odense University Hospital

New track this year

- 49 posters
- 30+ oral presentations

What is a model of care

- The Who
- The by Whom
- The Where
- The What
- And maybe The Why and whats next



Context of a model of care

The Cultural Context

Awareness

Pre test
counselling

The Health System

Ressources

Access

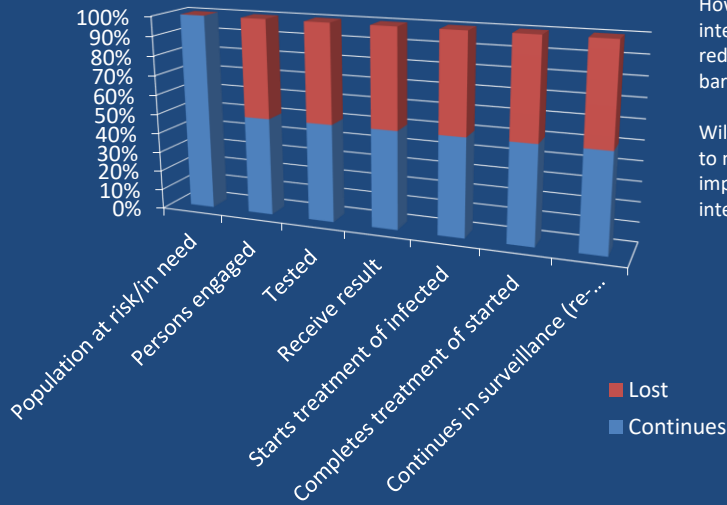
The Model of Care

Population

Interventions

Measures of
success

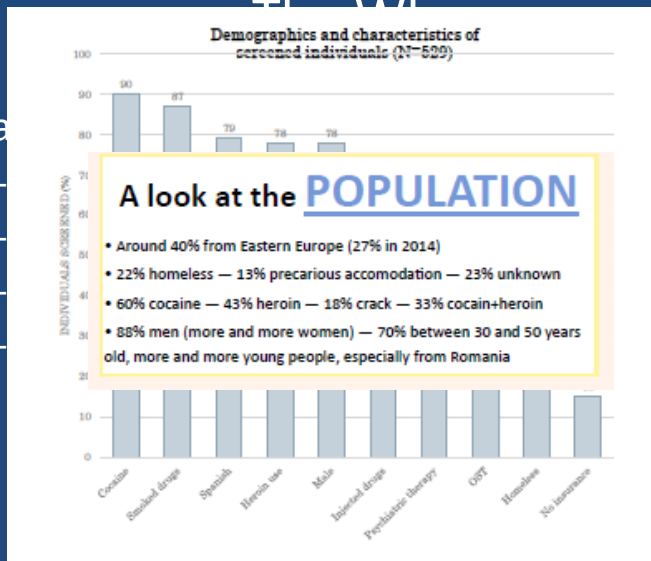
50-50-50-50-50-50-50



How does each intervention reduce the red bars?

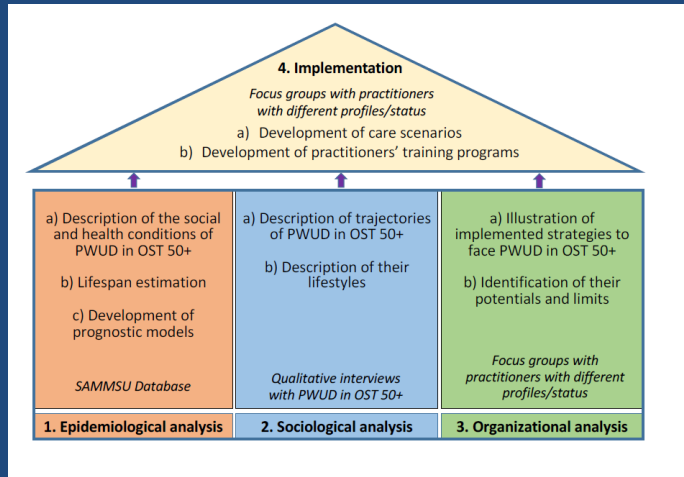
Will we be able to measure the impact of our interventions

• Ta



131 Ryan (Spain) # 138 Tournadre(France)

The aging population



#121 Moriggia

The by Whom

Peer led programs, peer based testing, navigators
 Nurse led programs

Liver Health Event: An Innovative Approach to Improve Hepatitis C Screening and Linkage to Care in Indigenous Communities



Reed N¹, Pandey M², Skinner S², Lafond D¹, Ahenakew V¹, Nicodemus A³



¹Ahtahkakoop Cree Nation Community, ²Saskatchewan Health Authority, ³Leading Edge Group

Community Led Hepatitis C Treatment Amongst People with Active Injection Drug Use in an Indigenous Community in Canada



Reed N¹, Ahenakew, V¹, Pandey M², Skinner S³, Gallagher L⁴, Despins R⁵, Loufty M⁶,



¹Ahtahkakoop Cree Nation Community, ²Saskatchewan Health Authority, ³University of Saskatchewan, ⁴Saskatchewan Infectious Diseases Care Network, ⁵Wellness Wheel, ⁶University of Toronto

The Where

- Van based / pop-up-clinics
- Drug and alcohol setting
- Fast track clinics "friendly" to users
- Hospital "The Hospital Zero" REMY #129
 - Training nurses to refer patient with a diagnosis

The where

- Housing projects
 - The Seek an treat project Barnet(Friday))
- The dedicated homeless practice #116 Macbeth
- Prison setting



Integrating

- Sexual Health Clinics Ryder # 132
- Pharmacies Byrne/Dillon #101 (super –DOT C,)
- Established programs Rehak #128 (Czech)

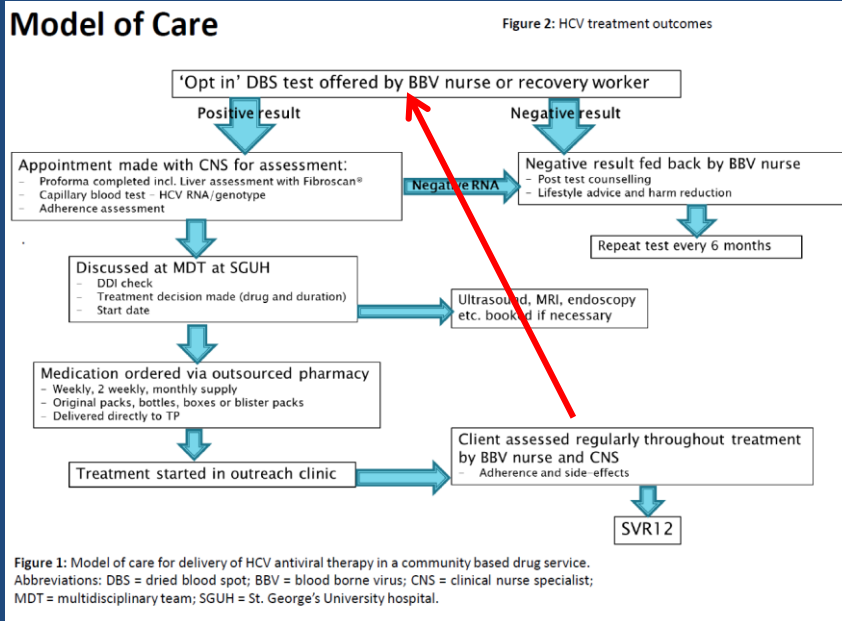
COE Site	AB testing	Confirmatory testing	EMR Modification	On site capacity for HCV treatment	Establish referral and linkage to care protocol
COE A: Clinical setting (with HCV treatment capacity)	◆	◆	◆	◆	◆
COE B: Outpatient perinatal MAT treatment in a hospital setting	◆	◆	N/A	N/A	◆
COE C: Outpatient perinatal MAT treatment in a hospital setting	◆	◆	N/A	N/A	◆
COE D: Community based housing program with clinical services	◆	◆	N/A	N/A	◆
COE E: Needle/syringe exchange program	◆	◆	N/A	N/A	◆
COE F: Intensive outpatient drug treatment in a hospital setting	◆	◆	◆	◆	◆
COE G: Clinical setting (without HCV treatment capacity)	◆	◆	◆	◆	◆
COE H: Perinatal and non perinatal drug treatment programs	◆	◆	N/A	N/A	◆
COE I: Community based intensive outpatient drug treatment program	◆	◆	N/A	N/A	◆

◆ Existing infrastructure
 ◆ Implemented by C Change
 ◆ Enhanced by C Change
 ◆ In process
 N/A Not applicable to site needs

Trooskin 139

The What

- Education
 - Training Peers in the HEP-CARE multi-national HEP-friend program # Byrne 155
- Prevention
- Test
- Treat
- Postcare



The What

Is it a contradiction in terms?

Make it simple – for HCV

- Bin it
- Shift it
- Move it

Examples

- The Test and Treat - Grail
- The Fast Track clinics
- Peer Led Hepatitis Testing
- Mobile van one stop shop

Make it comprehensive for the person

- Drug use
- "Harm reduction"
- Psychiatric
- Financial
- Social
- Other transmittable diseases (HIV/HBV/STD/TB)
- Lifestyle
- Other medical conditions

Effectiveness

The WHY

Treatment completion rate

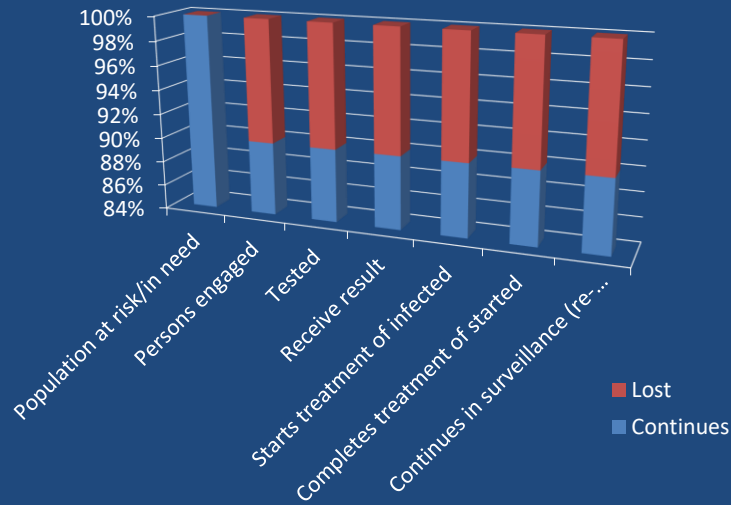
	Overall (n=79)	PWID (n=49)	Non-PWID (n=30)	p-value
Completed	71 (90%)	43 (88%)	28 (93%)	0.43
Incomplete	8 (10%)	6 (12%)	2 (7%)	
Ongoing	1	0	1	
Did not start	1	1	0	
Ceased early	1	1	0	
Unknown	5	4	1	

*SVR12 rate**

	Overall (n=79)	PWID (n=49)	Non-PWID (n=30)	p-value
SVR12	54 (76%)	36 (78%)	18 (72%)	0.56
No SVR	17	10	7	
Missing SVR result	15	9	6	
Failed SVR	2	1	1	

INHSU 2018 poster 132 - Ryder

90-90-90-90-90-90



A thought for next year

- The last bar
 - Keeping people in care
 - Surveillance
 - How do we tailor post cure follow-up to suit