

Diagnosing and Treating Blood Borne Viruses (BBV) in 47 English Prisons Through Reception-Based testing

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Disclaimer

- The regional blood-borne virus (BBV) nurse team within Practice Plus Group (PPG) and National Prison Partnership HITT Manager within the Hepatitis C Trust are fully funded by Gilead.
- Gilead plays an active role in the design and execution of the activities that form this Prison HCV Elimination Program.
- Selection of DAA treatment regimen is determined by the treating clinician following the national rate card and with patient input; Gilead staff have no influence over regimen selection.
- The presenter is employed by Gilead Sciences Ltd.

Background

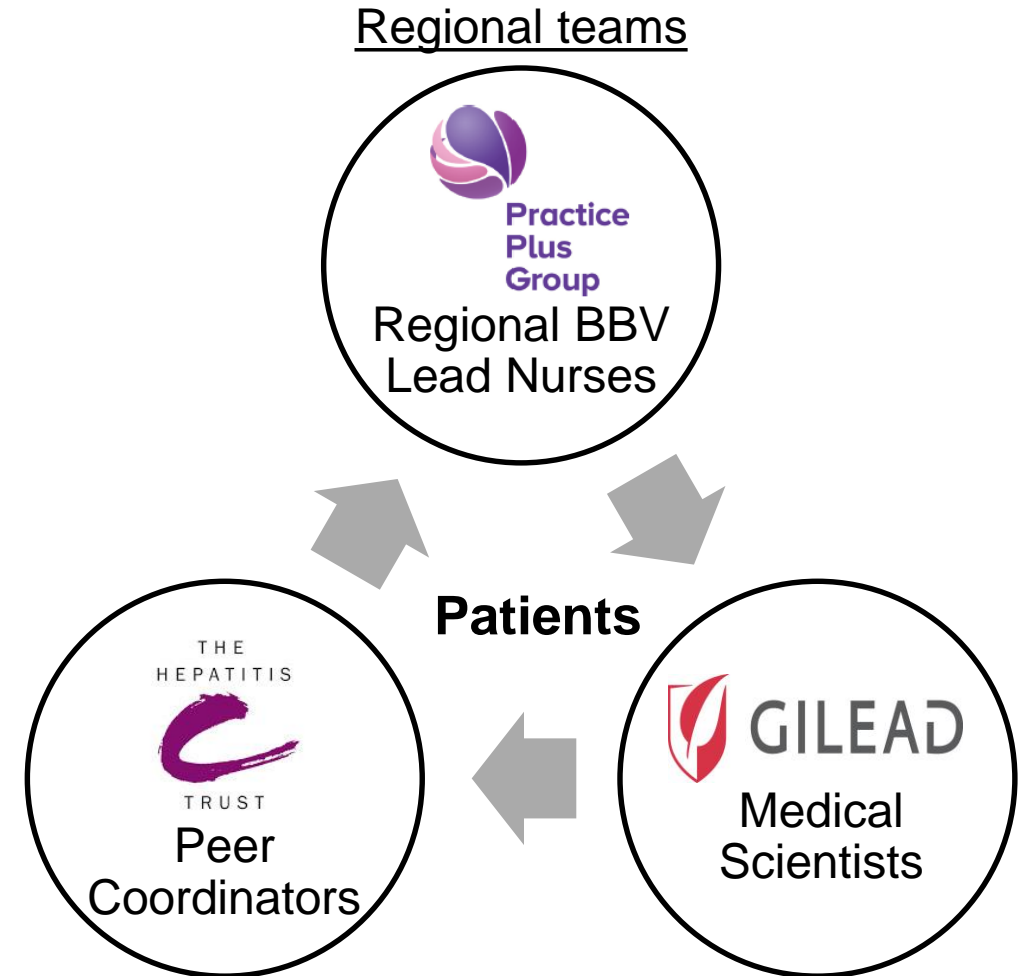
- National Health Service England (NHSE) plans to eliminate Hepatitis C in England by 2025¹.
- Opt-out BBV testing was introduced to English prisons in 2013 and fully implemented by 2018
 - Despite this HCV testing of new admissions remained low:
 - Only 23% for the prison network covered by this project Jan 2019
- In May 2019 Gilead Sciences, Practice Plus Group (PPG) and the Hepatitis C Trust (HCT) formed a partnership to improve HCV patient care for this marginalised group:
 - Increasing HCV testing in all prisons in the network
 - Optimising pathways to ensure >90% of RNA+ residents are initiated on treatment
 - Achieving HCV micro-elimination across the whole prison estate by April 2024
 - >95% all residents tested within previous 12 months and >95% RNA+ residents initiated on treatment²

¹ Public Health England 2020 report

² <http://www.hepctrust.org.uk/services/prison-services>

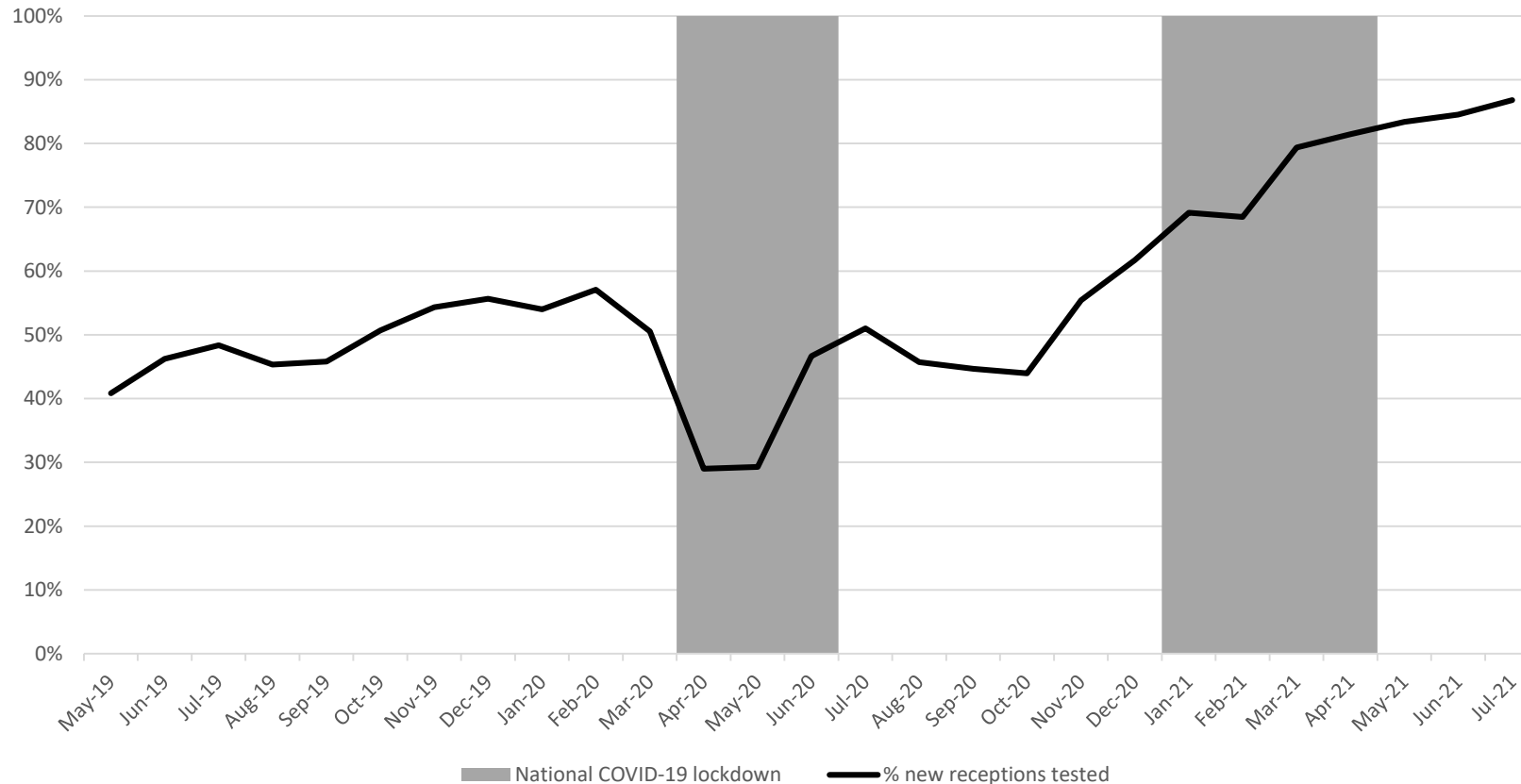
Method

- Individual prisons need individual solutions due to the variety of complex challenges
- Regional teams were set-up to optimise local pathways:
 - Hepatitis C Trust staff (with a personal experience of HCV) educated, and reduced stigma amongst, prison officers and residents.
 - Regional BBV Lead Nurses, and Gilead Medical Scientists led **multi-stakeholder** pathway optimisation groups to drive local improvements.
 - Pathway improvement is a continual process, dealing with emerging challenges.



Results

HCV reception screening in 47 PPG prisons



54,806 residents tested within 7 days of arrival across the 47 prisons from 1st May 2019 through 31st July 2021.

Reception testing rates doubled from 41% at the start to **87%** in July 2021.

A **COVID-19** national lockdown significantly affected testing in 2020 but the regional teams **adapted resilient pathways** with little impact by a larger lockdown at the start of 2021.

Overall **1,695 residents** were **initiated on DAA therapy** while resident in these 47 prisons.

17 out of 47 prisons have already achieved NHSE micro-elimination status

Conclusions

Individualised care pathways developed for each prison



Effective and resilient test and treat pathways

Hepatitis C Trust peers



Reduce stigma through education and provide key insights into pathway optimization

Dedicated PPG Regional BBV Lead Nurses



Effective at driving continual improvements on the ground

- This model of multi-organisation partnership and individualised solutions has proven to be successful in doubling the testing of new receptions for HCV and ensuring patients can access treated.
- If testing rates continue to rise and treatment is maintained then it is entirely possible for the 47 prison network to achieve the NHSE HCV micro-elimination target of $\geq 95\%$ testing and $\geq 90\%$ of diagnosed patients commenced on treatment before 2025.