

Point of Care Testing for Hepatitis C in Adult Correctional Centres in New South Wales

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Background: The high prevalence of hepatitis C virus (HCV) among incarcerated people in New South Wales (NSW) had led to people on custody being identified as a priority setting for HCV elimination. Barriers to testing include stigmatisation, patient access, frequent movements, poor venous access, low health literacy, and complex clinical pathways. Point-of-care HCV testing is patient focused and mobile, providing an opportunity to overcome barriers to testing. We evaluated a model of care to facilitate education, point-of-care HCV testing, and treatment at fixed sites and through a mobile roaming team at Correctional Centres in NSW.

Description of model of care/intervention: Point-of-care HCV testing was conducted across 23 Correctional Centres in NSW through an observational study. The project was developed in partnership with Justice Health, NSW, and the Kirby Institute. The program included accredited training for health staff. Participants in custody received fingerstick point-of-care HCV testing (antibody and/or RNA) in accommodation areas, work areas, and onsite health centres at fixed sites or through a roaming nursing team. HCV testing, treatment uptake and high-intensity testing campaigns were evaluated.

Effectiveness: From January to December 2023, 24 sites provided testing, with 2,105 point-of-care HCV tests performed (antibody, n=980; RNA, n=1,488), with 2,468 people tested. Patients tested during high-intensity testing campaigns was 1,069 of the total patients tested. Among those receiving testing, 295 have current HCV infection (11.9%). Overall, 184 (62%) initiated HCV treatment. Onsite point-of-care testing (antibody and RNA) is a fast and efficient method for identifying people in custody with HCV and facilitates faster linkage to treatment. Educational opportunities increased participant engagement.

Conclusion and next steps: Onsite and mobile point-of-care testing combined with education can lead to improved identification and a higher HCV treatment uptake. This novel model of care is an effective way to overcome barriers for a marginalised population who may not otherwise engage in healthcare.

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