

Partnering Hepatology Nurses and Peer Workers to Increase Treatment Among Marginalised People

Experiences from the **Live Hep C Free** Program

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The **Live Hep C Free** program

Why is this program important?

- Our program pairs peer workers and hepatology nurses to work together to improve access to hep C healthcare for people who are marginalised.
- Significant increase in engagement with and access to healthcare at OST, homelessness, drug health, community, and residential rehabilitation services.
- The Live Hep C Free program is a highly effective model for addressing the hepatitis-related healthcare needs of clients accessing a particular service.
- It's easy to set-up, is cost-effective, and can be readily scaled-up.

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Unique barriers, novel approach

- Peer-based, health information and treatment access program.
- Uses innovative approaches to address the unique barriers some people face in accessing hep C healthcare.
- Peers working in partnership with hepatology nurses key to making hep C healthcare easiest to access
- Peers provide a supportive bridge into hep C treatment
- Wherever the program goes so too does hep C testing, FibroScan and treatment.
- Meeting people where they're at with the healthcare they need.

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Why simplicity is important

Standard hep C healthcare model

1. Make appointment at GP.
2. Attend appointment. Get antibody test.
3. Go back for results.
4. If positive, get PCR blood test.
5. Come back for PCR results.
6. If positive, more bloods. Make FibroScan appointment.
7. Attend FibroScan appointment.
8. Return to GP, get 3 prescriptions.
9. Get each prescription filled.
10. Make 12 week post-treatment appointment.
11. Attend 12 week post-treatment appointment. Get bloods done.
12. Make and attend follow-up appointment to see if SVR achieved.
13. Cured.

Live Hep C Free model

1. Attend service as normal, get PCR blood test and FibroScan while there.
2. Attend service next week as normal, get prescriptions for treatment or get the all-clear.
3. Get each prescription filled.
4. Attend service as normal for 12 week post-treatment bloods.
5. Attend service as normal following week to see if SVR achieved.
6. Cured.

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3 models of delivery

The Live Hep C Free program is split into 3 different models

- **4 week facilitated group model**
- **Liver blitz model**
- **Regular outreach model**

- Opioid Substitution Therapy (OST) settings
- Homelessness services
- Residential rehabilitation services
- Drug health services
- Community centres
- Youth services
- Supervised Injecting Centres
- Any service people with hep C are accessing

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3 models of delivery

- A **liver 'blitz'** model where we offer a one-off, one-stop shop for hepatitis healthcare over 3-4 hours. **Often at homelessness services.**
- A **regular outreach model** where peers are paired with hepatitis healthcare workers to regularly attend a particular service and encourage access to on-site hep C healthcare. **Often at OST clinics.**
- A **4 week facilitated group model** where we work with people to deliver information on hep C, empower participants, and bring hepatitis healthcare on-site. **Often at residential rehabs.**

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The numbers

Hepatitis Awareness Week:

- **7** sites across NSW during the week
- **186** people engaged with about hep C
- **80** people saw a hepatology nurse about hep C
- **39** people were tested for hep C
- **54** people had their liver checked with a FibroScan
- **~12** people started treatment (but awaiting final numbers in follow-up)



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Hepatology nurses

Hepatology nurses are central to Live Hep C Free's success.

- Many nurses already doing clinical outreach across NSW.
- Peers enhance the reach, engagement, and effectiveness of this work.
- Strong, respectful working relationship between peer and hepatology nurse is important to success.
- Peers focus on engagement, nurses focus on clinical evaluation.
- Peers can assist in following-up with clients, reminding clients, and answering questions/ allaying concerns.

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Our peer workers

The experts on living with hep C are the people with lived experience.

- Our peers defined as people with lived experience of hep C
- 11 trained peers
- Diverse experience
- Paid for their time and their expertise
- Given autonomy to work out an effective engagement strategy at each service with the hepatology nurse
- Engagement, spreading the word about cure, and assisting people is paramount.



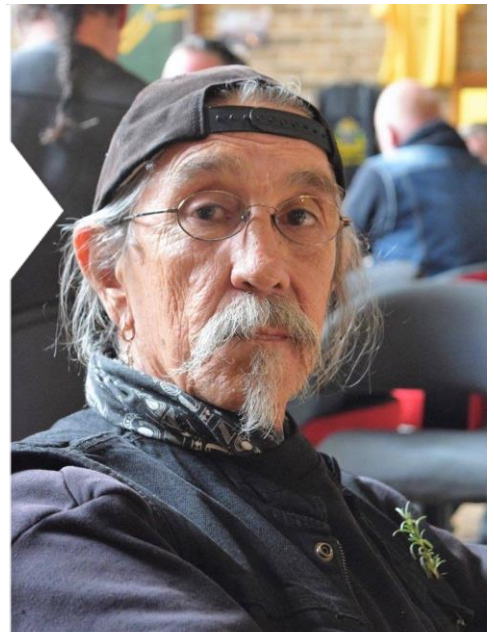
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Live Hep C Free at Clinic 36

A case study on the effectiveness of peer workers

- Private methadone clinic
- Fortnightly visits since January 2018 with hepatology nurse
- Reaching service-based elimination of hep C.
- Avg. 28 engagements with service users about hep C per visit



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Why is this model important for achieving elimination goals?

- Hepatology nurses report doubling of patient numbers as a result of peer engagement.
- Simple and cost-effective model.
- Enhances the work done in outreach settings by hepatology nurses.
- Bridges the barriers that prevent marginalised people accessing healthcare to enable them to live hep C free.
- The interest in applying the program has been overwhelming including local health districts across NSW as well as in Tasmania.

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Key elements of success

- Dedicated and passionate peers.
- Strong relationships with hepatology nurses.
- Person-centred approach,
- Peer-led approaches to deliver the model.
- Removes barriers to hep C testing and treatment.
- Flexible models of delivery depending on the service – liver blitz, outreach, or 4 week course.

Meeting people where they're at with the healthcare they need

Thank you

For more information about the

The **Live Hep C Free** program

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