



Rodger Wright Community Clinic

Bridging health care gaps for people in Ōtautahi Christchurch



New Zealand
Needle Exchange
Programme
Te Waipounamu | DISC

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Disclosures

AbbVie Pty Ltd has funded my travel and registration expenses for the 2025 Viral Hepatitis Conference. I have no further disclosures.



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Key Points For Success



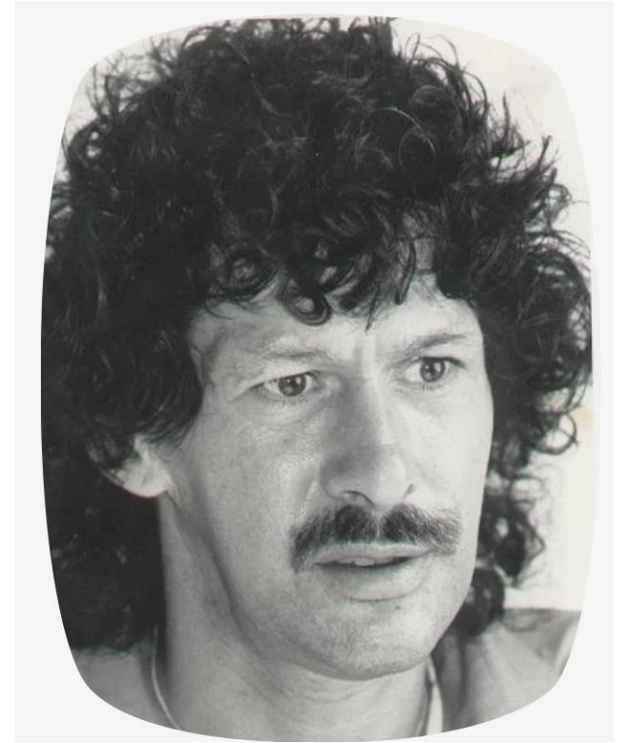
- No-one is unreachable
- Trust is essential
- Creative models of care
- Collaborative partnerships



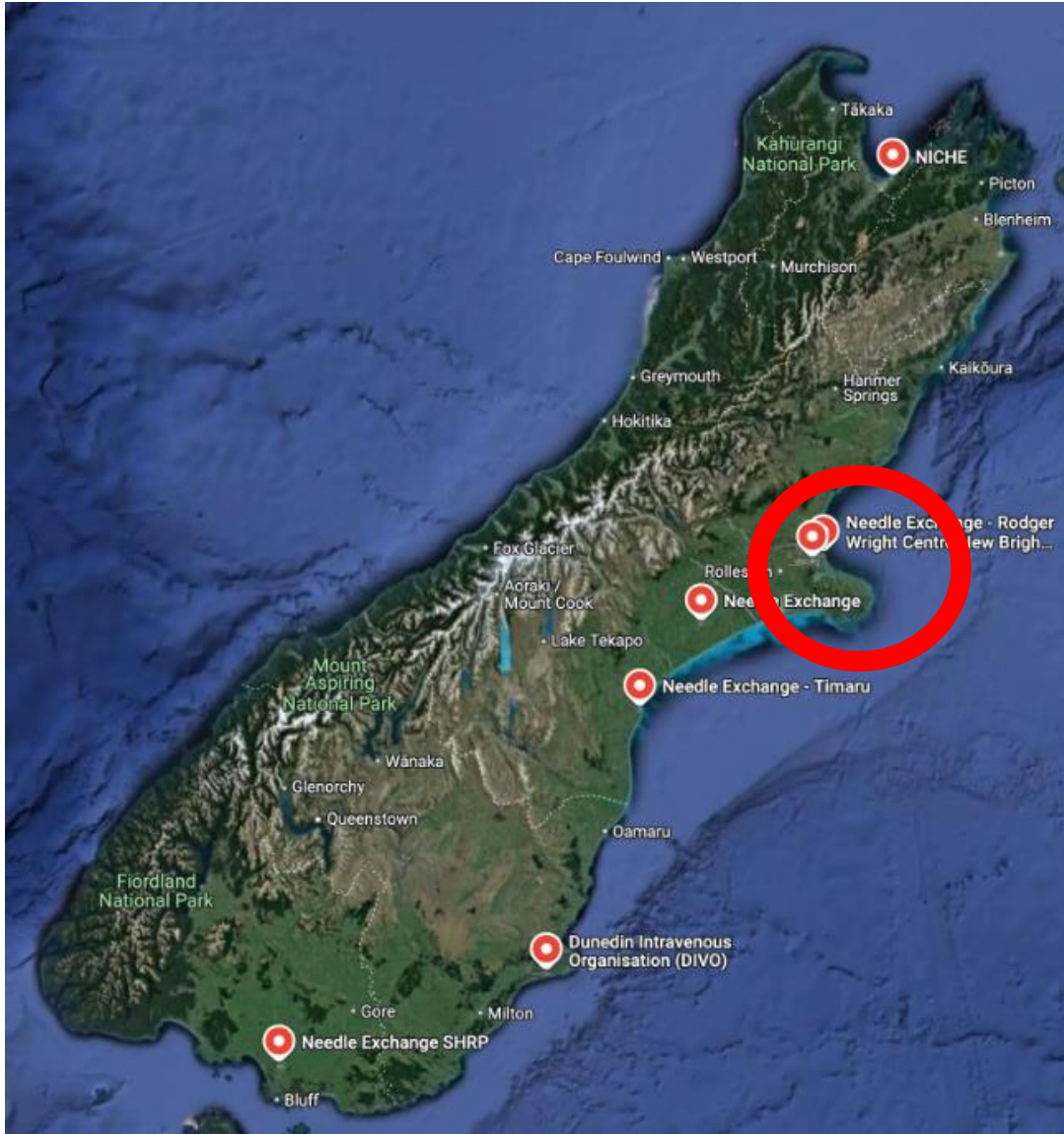
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Pioneering History

- **1987** - First country to implement a government supported Needle Exchange Program
 - **Rodger Wright** – Pioneer in NZ harm reduction
- **1995** – Drug Injecting Services Canterbury (DISC Trust)
- **2009** – NZ's one-of-a-kind nurse led **hepatitis C Community Clinic**



Location

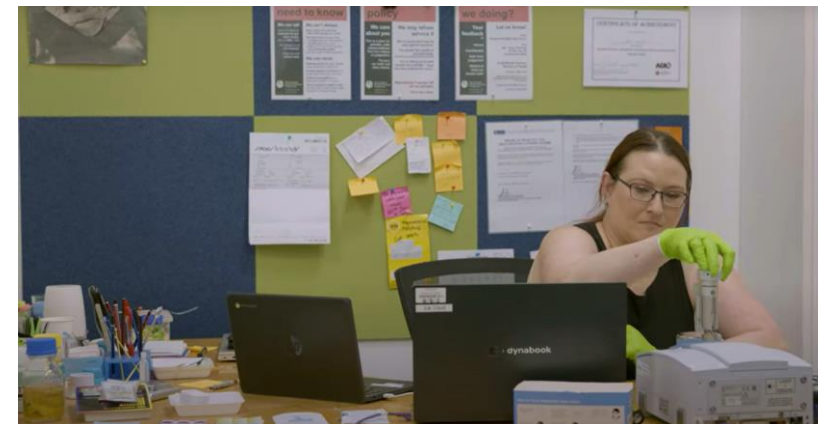


What's available at Rodger Wright Centre?

- Needle Exchange / Electronic Dispenser
- Drug checking
- Community Clinic



<https://www.disctrust.co.nz/>



What we offer

Trust within community – **person-centered**

Eligibility: people who use/inject drugs, living with/risk of hepatitis C, experiencing homelessness

Purpose: To ensure no-one falls through the health system gaps

- Drop in / outreach foot & van / home visits
- STBBI testing and treatment
- Hep C POC
- GeneXpert testing & \$20 voucher
- Hep B vaccination
- Wound care / drug injecting related injuries
- Harm reduction info / own bloods / naloxone
- FibroScan
- Outreach education
- Peer support
- Free Nurse Practitioner (4hrs/week)
- Collaboration – AOD, mental health, Gastro, Infectious Diseases



Initiatives

- Mobile medication partnership
- Kaewa Project – Housing First Ōtautahi
- Referrals from Christchurch ED STBBI testing pilot
- Hep C treatment without prescription: pharmacist-nurse model of care

<https://nursingcouncil.org.nz/NCNZ/nursing-section/Hepatitis-C-Medication-Supply.aspx>



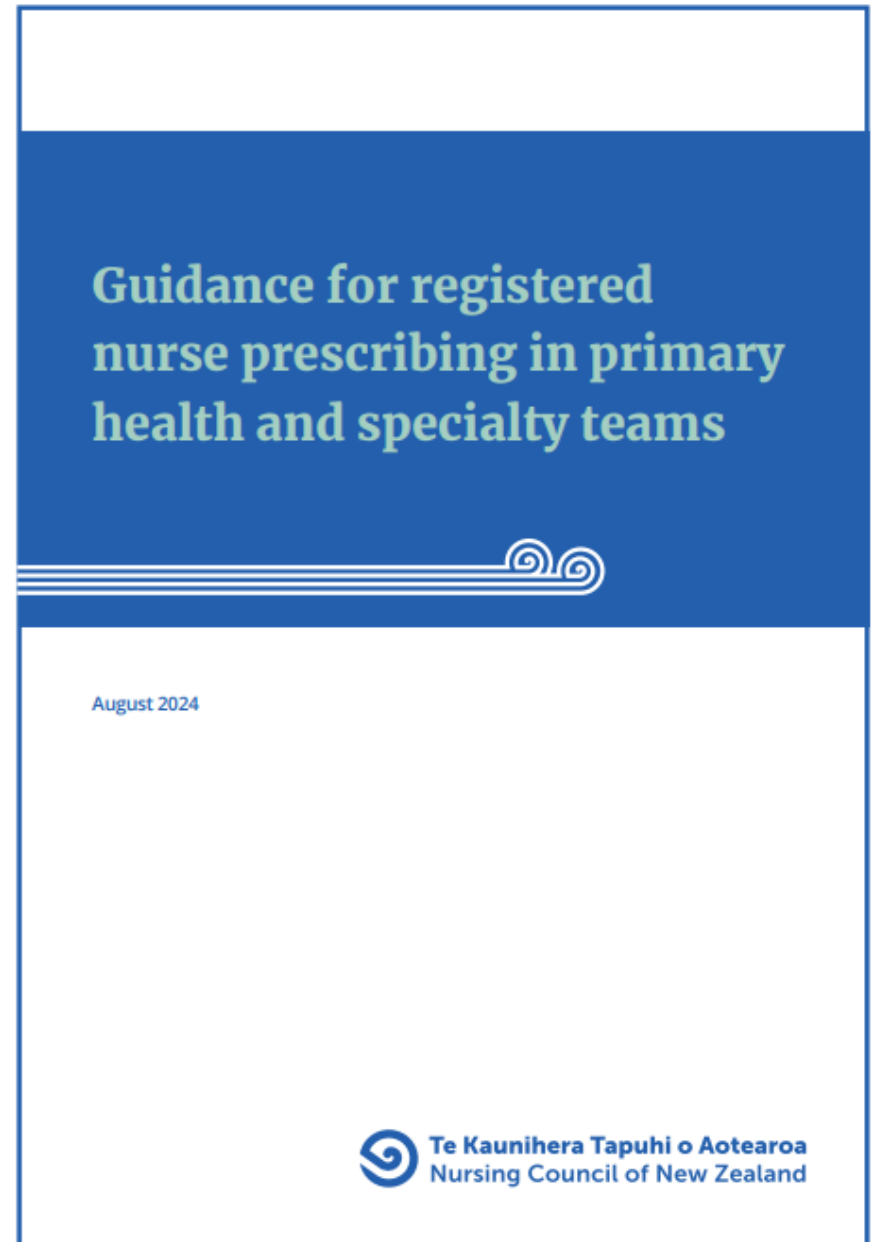
Results

- 425 people treated **Maviret** (2019-present)
 - Canterbury highest treatment rates in NZ per capita
 - >10% retreatment
-
- Acute and chronic health conditions diagnosed for people disengaged from primary & secondary care i.e. rectal cancer, diabetes, COPD, cirrhosis
 - Reconnection with mainstream services



Designated Nurse Prescriber

- DNP in primary health and specialty teams can prescribe from list of medicines for common and long-term conditions – 2016
- PGDip prescriber pathway
- Collaborative supervision
- DNP Pathway can be credited towards a Nurse Practitioner Master's program



NO ONE IS UNREACHABLE: A Harm Reduction Nurse-led Model for Hepatitis C Reinfection and Treatment Completion

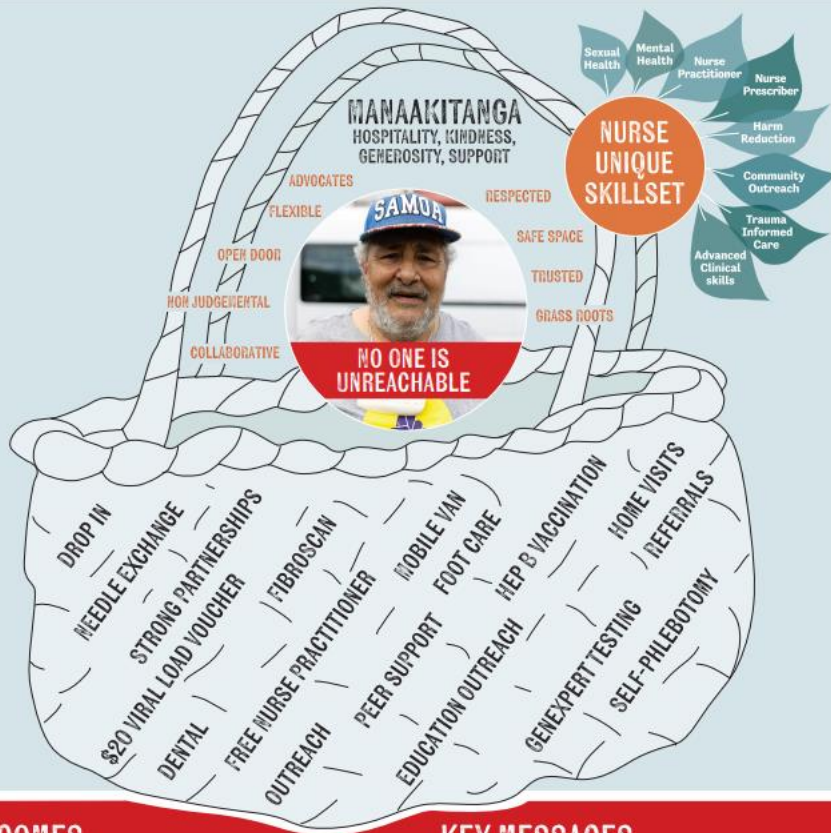


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BACKGROUND

- The nurse-led **Rodger Wright Community Clinic** co-located with the peer-led Needle Exchange improves access to hepatitis C testing and treatment for people who currently or previously use drugs.
- Innovative approaches** remain essential to reach priority populations.
- Our nurse and peer model proactively meets people where they are, ensuring **easy access to treatment and retreatment**.



OUTCOMES

- 423 treated Maviret (2019-2025)
- Canterbury highest treatment rates in New Zealand
- >10% retreated
- Reach those missed by mainstream services

KEY MESSAGES

- Open door for retesting
- Retreatment reduces Hep C prevalence
- Flexible models of care needed

NOT JUST HEP C: THE KAEWA PILOT PROJECT Implementing Broader Health Care To People Experiencing Homelessness



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1 BACKGROUND

The nurse-led Rodger Wright Community Clinic and peer-led Needle Exchange, run by The DISC Trust, provides outreach hepatitis C point-of-care (POC) testing and treatment. Recognising the need to go beyond POC testing, the clinic aimed to address wider health needs of people experiencing homelessness and/or drug use. In response, the **KAEWA PILOT PROJECT** was launched in partnership with Housing First Ōtautahi, a service for kaewa (to wander, roam) experiencing chronic homelessness in Ōtautahi Christchurch.

2 WHY THE PILOT?

To demonstrate that **combining general health care with hepatitis C POC testing** can reduce barriers and improve health outcomes for people experiencing homelessness and/or drug use who are disproportionately affected by:

- Inequitable access to health care
- Mistrust of health services
- Increased morbidity and mortality rates

3 HOW IT BEGAN

FREE DROP-IN CLINIC,
FIBROSCAN, GENEXPERT,
OUTREACH, HEP C TREATMENT
NEEDLE EXCHANGE + RODGER
WRIGHT COMMUNITY CLINIC
Harm reduction

VAN
Hep C POC +
Harm reduction equipment

OUTREACH TO
HOUSING FIRST
ŌTAUTAHĪ
Community outreach



"WE NEED TO
OFFER MORE
THAN HEP C POC"

KAEWA
PILOT
PROJECT
LAUNCHED
FEB 2024

4 RESULTS AFTER 5 MONTHS

47 KAEWA SEEN
43 YEARS AVERAGE 62% MALE
72% MĀORI OR MĀORI/NZ EUROPEAN
94% PAST OR CURRENT INJECTING DRUG USE

22 POC TESTS POC POSITIVE 50%
VIRAL LOAD DETECTED 9%



RESULTS AFTER 16 MONTHS

102 KAEWA SEEN
43 YEARS AVERAGE 69% MALE
66% MĀORI OR MĀORI/NZ EUROPEAN
42% PAST OR CURRENT INJECTING DRUG USE

69 POC TESTS POC POSITIVE 37.6%
VIRAL LOAD DETECTED 10.1%

5 SUCCESSFUL HEALTH OUTCOME EXAMPLES:

Diagnosed cirrhosis, rectal cancer, diabetes, COPD & other health conditions.
Re-referrals to secondary care missed appointments, mental health & AOD referrals, unmanaged Hep B, contraception & sexual health.

6 OUTCOMES

- New Hep C diagnoses and quick access to treatment
- Chronic health conditions diagnosed (otherwise missed)
- Linkage to primary and secondary care
- Re-engagement with health care
- >55% kaewa engage on regular basis

7 KEY MESSAGES

- Offer Hep C POC + general health care
- Flexible models of care with peer support
- Outreach into the community
- Develop trust & return regularly
- Collaborative partnerships

Key Points For Success



- No-one is unreachable
 - Trust is essential
 - Creative & flexible models of care
 - Collaborative partnerships
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- Providing health care beyond hep C testing & treatment



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Ngā mihi, thank you



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DISC Trust: <https://www.disctrust.co.nz/>

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