

FACTORS INFLUENCING THE IMPLEMENTATION OF A NATIONAL PROGRAM TO SCALE UP HEPATITIS C POINT-OF-CARE TESTING AND TREATMENT IN AUSTRALIA

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Background: Understanding barriers and enablers for the implementation of national programs to scale-up point-of-care HCV testing is critical to enhance program effectiveness and sustainability. This study aimed to identify and evaluate barriers and enablers for the implementation of the Australian HCV Point-of-Care Testing Program.

Methods: This implementation science-informed, mixed-methods study was guided by the Consolidated Framework for Implementation Research (CFIR). To identify factors influencing Program implementation, study activities included CFIR-informed reviews of program documents (n=28), coding of minutes from program meetings (n=125), and interviews between January 10 and February 28, 2024 with program stakeholders (n=30) from three key groups across six Australian states/territories: sites/community, policy/funders, and program partners. Factor impact was evaluated by two researchers and a custom sentiment analysis system, built in Posit RStudio, independently rating each factor between -2 (strong barrier) to +2 (strong enabler). Factor evidence-strength was determined using stakeholders, industries, and states as weighted metrics. Factors identified across multiple metrics received higher evidence-strength scores.

Results: A total of 693 unique factors influencing the implementation of the program were identified. Salient implementation enablers include: 1) financial incentives for clients are effective in encouraging testing; 2) strong advocacy and enthusiastic leaders, particularly at national and federal levels, help raise awareness, secure support, and drive program implementation; and 3) peer workers build trust and bridge communication gaps, helping clients navigate stigma and access care. Salient implementation barriers include: 1) IT & connectivity issues, including challenges sharing test results; 2) inconsistent financial support, affecting funding continuity and long-term sustainability; and 3) staffing and workforce challenges, including recruitment, retention and competing priorities.

Conclusion: A range of factors influence program implementation success across clinical and community-based settings engaging in HCV-related care. The use of sentiment analysis in CFIR-based qualitative evaluations offers a data-driven approach to enhancing program scalability and informing policy decisions.

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