

Quantifying nurses contribution to HCV care milestones:

Findings from an integrated primary healthcare setting for
marginalised people

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Disclosures of interest

Dr Phillip Read has received research funding from Gilead Sciences, as well as institutional and individual honoraria from Gilead Sciences, Abbvie and MSD.

I would like to acknowledge the Gadigal of the Eora Nation on whose land this work was done and pay my respects to Elders past, present and emerging.

I want to begin by acknowledging and thanking the people who inject drugs who have generously participated in this research.

Our fight against viral hepatitis elimination is indebted to people living with viral hepatitis both past and present.

Introduction

- A question was posed at the 2019 Australasian Viral Hepatitis Elimination conference, how can the substantial contribution of nurses to HCV elimination be better measured?
- Nurses have an essential role in the testing, diagnosis and management of people with HCV but their inclusion in datasets, and visibility in contributing to milestones in the HCV care cascade has not been measured.
- We aimed to remove the invisibility cloak, and quantify the contribution of nurses to six HCV care milestones.

Kirketon Road Centre (KRC)

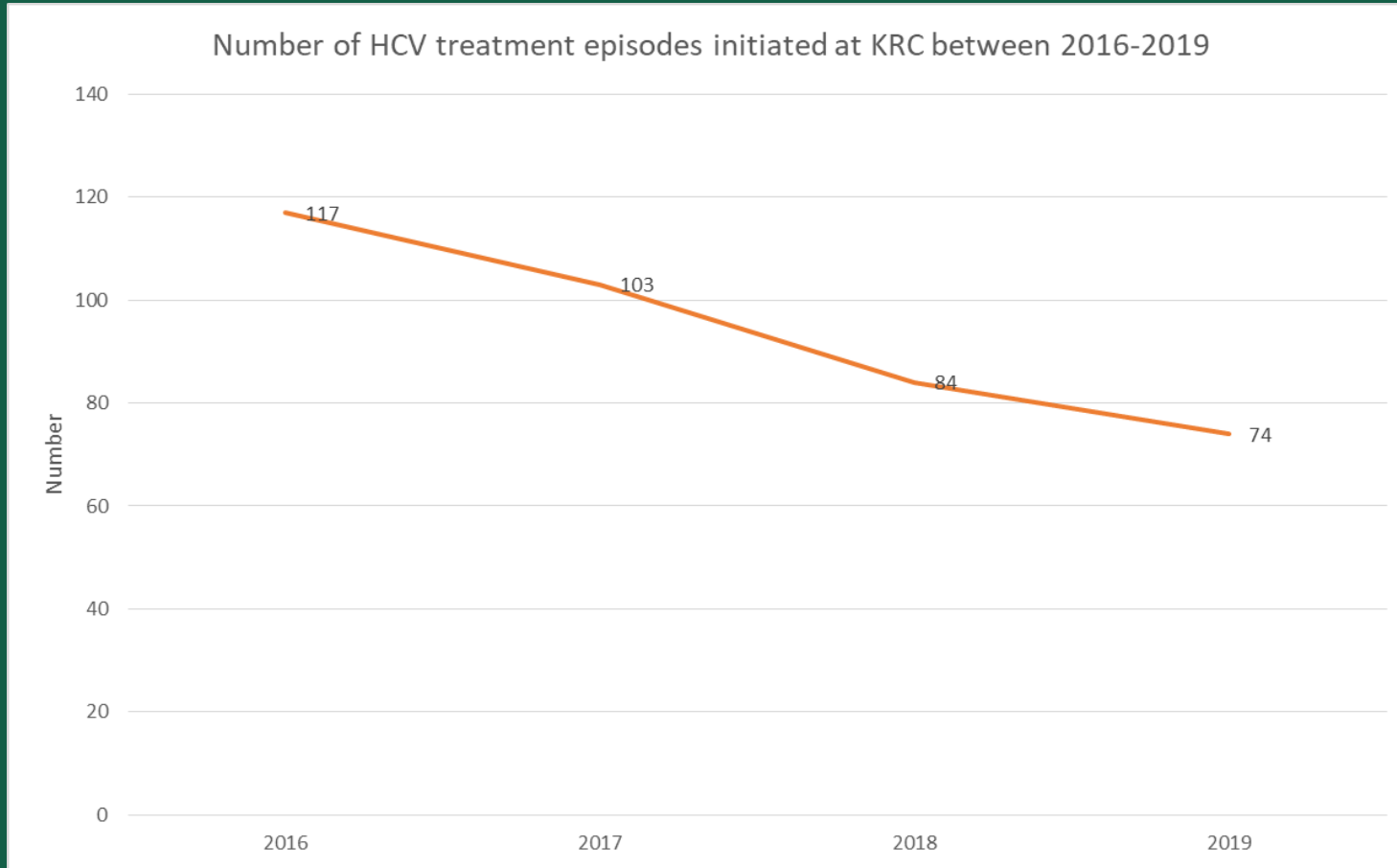
- A primary health care service with NSW Health, in Kings Cross.
- Free, anonymous and no need for a Medicare card.
- Multidisciplinary team of Nurses, Counsellors, Doctors and Health Education Officers.
- Client focus; vulnerable and marginalised populations, including those with:
 - AOD issues, including those who inject drugs
 - Mental health issues
 - Aboriginal, Torres Strait Islander and LBGQTQIA+ communities
 - Rough sleepers and people living with chronic homelessness
 - Employment in sex-work
 - At-risk young people
 - Living with HIV/Hep C



Methods

- From 2016-2019
- Clinical database records of episodes of care examined for:
 - HCV antibody testing
 - HCV RNA testing
 - Assessment for treatment
 - Treatment commencement
 - Fibroscan
 - SVR-12 confirmation
- By consult type (doctor/nurse)
- Reported proportion of consults attributable to doctors and nurses overall and per year
- Linear trend was investigated

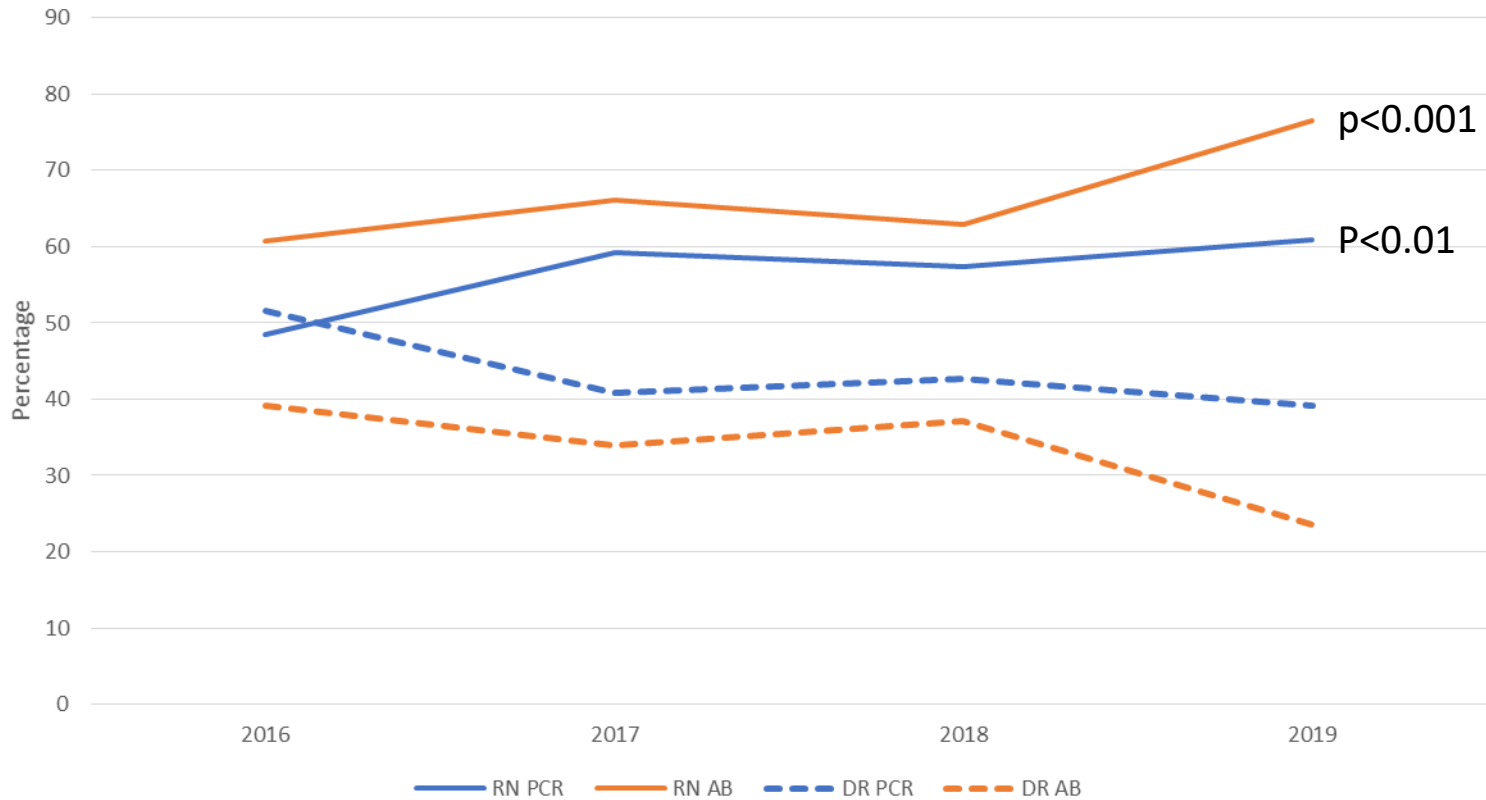
Results



- In total, 378 HCV treatment episodes initiated at KRC between 2016-2019

	2016-2019		
	Episodes of care	% RN	% DR
HCV PCR test	1284	56	44
HCV antibody test	2315	70	30
Assessment for HCV treatment	477	71	29
Treatment commencement	307	66	34
Fibroscan	1014	78	22
SVR-12	164	63	37
Total	5561		

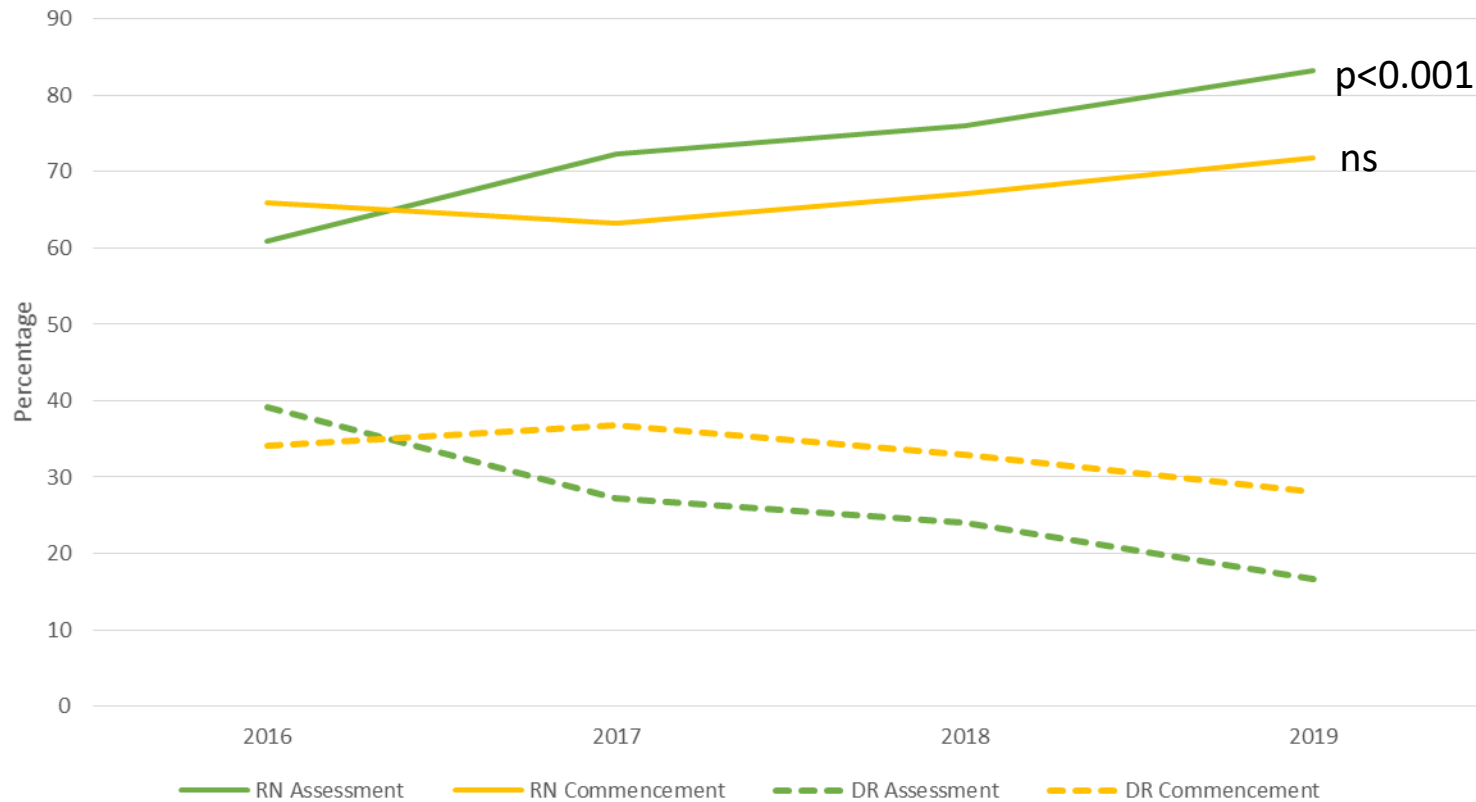
Contribution of nurses and doctors to **HCV PCR tests** & **HCV antibody tests** between 2016-2019



In total, between 2016-2019, there were:

- 1284 episodes of care for HCV PCR test
- 2315 episodes of care for HCV antibody test

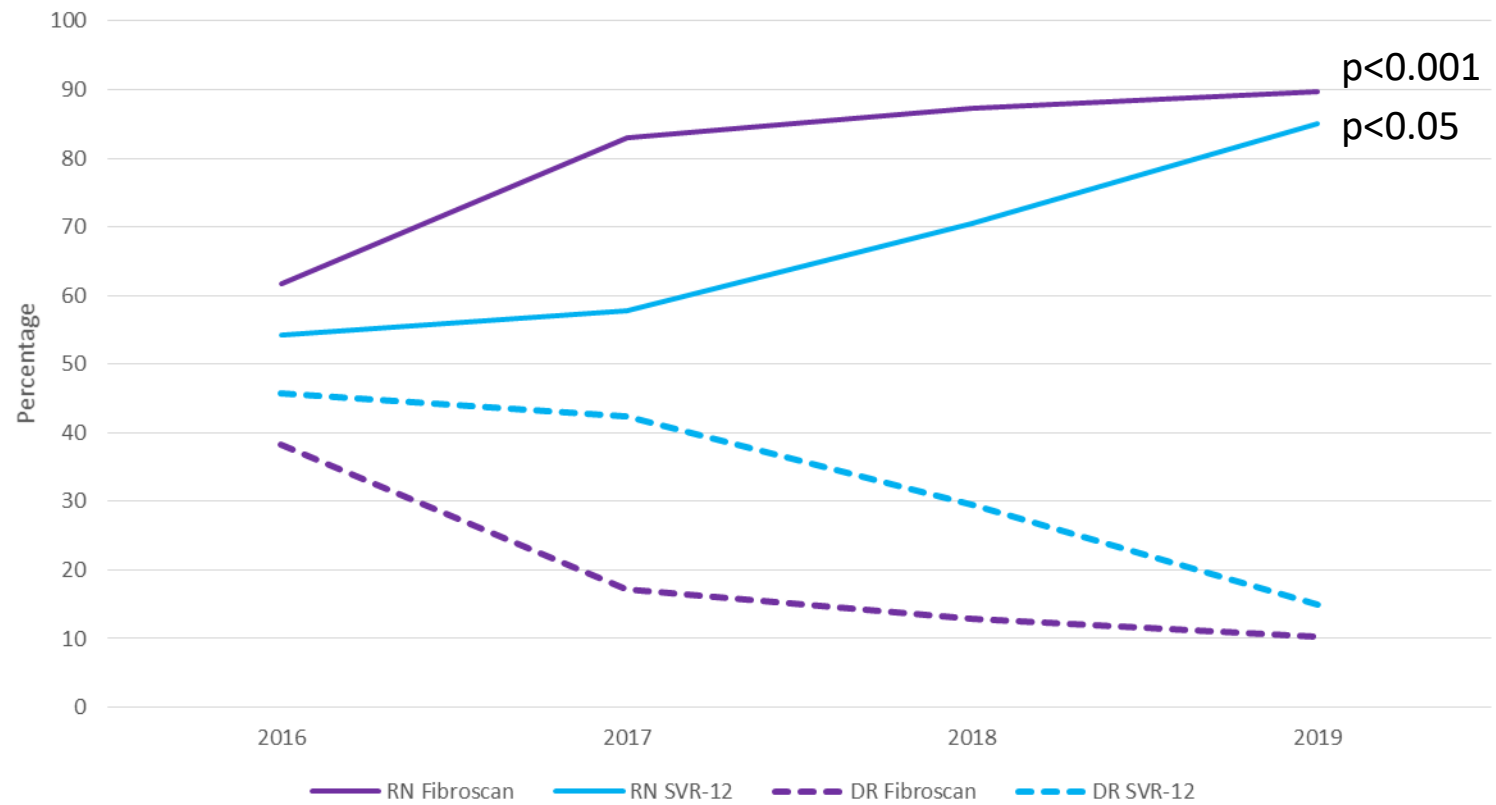
Contribution of nurses and doctors to **assessment for HCV treatment** and **treatment commencement** between 2016-2019



In total, between 2016-2019, there were:

- 477 episodes of assessment for HCV treatment
- 307 episodes of care for HCV treatment commencement

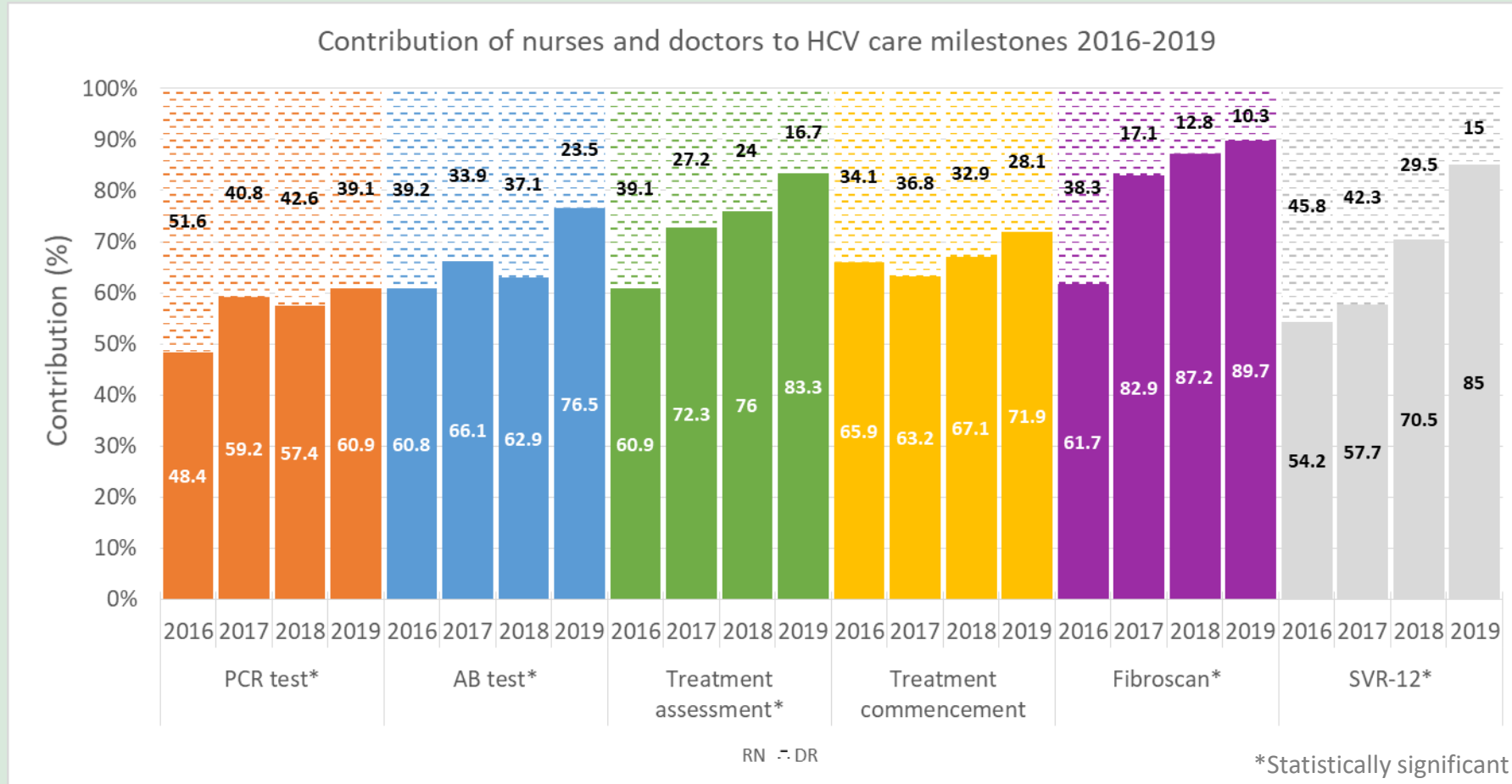
Contribution of nurses and doctors to **Fibroscan** and **SVR-12** between 2016-2019



In total, between 2016-2019, there were:

- 1014 episodes of care for Fibroscan
- 164 episodes of care for SVR-12

Summary



Conclusion

These findings shine a light on the substantial contribution of nurses to HCV care milestones and on their increasing role over time, whilst acknowledging this work reflects KRC's model of care and is also influenced by external factors, such as policy and population changes.

In striving for HCV elimination, nurses are well placed to identify and treat hidden populations, especially in an outreach setting, where people may feel most comfortable to access healthcare.

This study supports the broadening scope of practice for nurses.

Contact

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