#### Point of Care Testing High Intensity Test and Treat Project at Cwm Taf Community Drug and Alcohol Testing Centres Iechyd Cyhoeddus **vmru**

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### **BACKGROUND:**

To contribute to the elimination targets set by the World Health Organization (WHO) for viral Hepatitis, Community Drug and Alcohol Treatment centres (CDAT'S) were identified as a location which

Public Health



|   | Bridgend                                    | Pontypridd                               | Rhondda  | Merthyr    | Cynon                               |
|---|---|--|--|------------|-------------------------------------|
| Testing Start Date  | 24/07/2023                                  | 11/09/2023                               | 10/10/2023   | 22/11/2023 |                                     |
| Amount of Testing Days  | 8   | 6  | 9  | 5          | 4                                   |
| Patients booked in per hour                                       | 12  | 10                                       | 10   | 8          | 8                                   |
| Total people on patient list                                      | 390   | 278                                      | 346  | 187        | 187                                 |
| Total people tested   | 112   | 110                                      | 164  | 88         | 77                                  |
| Percentage of people who<br>attended due to having<br>appointment | 90.20%                                      | 89.10%                                   | 90%  | 98%        | 97%                                 |
| POCT Oral Swab Tests  | 98  | 96                                       | 140  | 85         | 56                                  |
| POCT PCR Tests  | 14  | 14                                       | 31   | 15         | 19                                  |
| DBST Tests  | 107   | 110                                      | 164  | 88         | 77                                  |
| Active Infections found   | 2   | 1  | 5  | o          | 2                                   |
| Treatment Status  | Completed<br>Treatment<br>from<br>community | Completed<br>Treatment at<br>HMP Swansea | 1 – Completed<br>Treatment, SVR<br>outstanding<br>1 – Treatment started<br>3 – DNA Hospital<br>appointment | -          | On Treatmen<br>Hospital<br>referral |

have clients most at risk for blood borne viruses (BBV) (including Hepatitis C virus (HCV)). HCV has a high prevalence in this patient group and although venepuncture BBV testing is available, refusal rates are high. Point of care testing (POCT) has become more readily available and been identified as a more acceptable testing method for service users. POCT provides rapid results which is highly suited to the turnaround time of clients' care duration to CDAT.

# **METHODS:**

**Figure 1** – Image of geographical locations of each CDAT site that the POCT project was performed at.

## **RESULTS**:

In 32 days at 5 CDAT clinics, 557 clients were screened (Table 1). 1104 tests were performed in total (465 POCT swabs, 93 HCV PCR's and 546 DBST's) (Figure 3 and Table 2). 83.11%

### **Table 1** – Statistics showing the results of projects at each CDAT site.

| Test Tune   |                           |          |  |  |  |  |
|---|---------------------------|----------|--|--|--|--|
| Test Type   | Total No. tests performed |          |  |  |  |  |
| Oral Swab   | 465                       |          |  |  |  |  |
| DBST  | 546                       |          |  |  |  |  |
| Cepheid   | 93                        |          |  |  |  |  |
| Total   | 1104*                     |          |  |  |  |  |
| *For 553 patients   |                           |          |  |  |  |  |
| HCV Ab Results  | POCT                      | DBST     |  |  |  |  |
| Reactive  | 13                        | 71       |  |  |  |  |
| Non-Reactive  | 449                       | 474      |  |  |  |  |
| Invalid   | 3                         | 1        |  |  |  |  |
| 75 patients were positive for HCV antibodies (~13.5%)<br>~58 patients received FastTrack testing due to 'Look back' |                           |          |  |  |  |  |
| PCR Results   | Cepheid                   | DBST PCR |  |  |  |  |
| Detected  | 8                         | 10       |  |  |  |  |
| Not Detected  | 85                        | 59       |  |  |  |  |
| Invalid   | 0                         | ~        |  |  |  |  |

**Table 2** – Total tests and results obtained after project completion.

A team of POCT practitioners set up clinics at 5 CDAT centres (Figure 1) offering a two-tiered POCT strategy along with Dried Blood Spot Testing to screen for all BBVs. The strategy utilised Orasure, OraQuick POCT swabs to test for Hepatitis C exposure with a follow up PCR test being performed on the Cepheid GeneXpert to detect active HCV infection. A BBV history 'look back exercise' (Figure 2) was performed to identify past BBV exposure and to select the appropriate POCT. All clients were allocated a BBV screening appointment to offer

attendance was linked to the appointment system (Table 3). 10 active HCV infections were identified. The BBV 'look back exercise' revealed that 17.13% of clients had previously been exposure to HCV.



| Total Attending Patient<br>Stats                                  | Total         |
|---|---------------|
| Total Tested  | 553 (~39.56%) |
| Attended for Appointment  | 462           |
| Early/Late  | 73            |
| Walk in/ New  | 18            |
| Did not attend Clinic   | _             |
| Percentage of patient attendance linked<br>to Appointment letters | 83.54%        |

**Table 3** – Number of patients tested and the response to the letter system.

### **CONCLUSION:**

The use of appointment systems and advertising a rapid, minimally invasive POCTs proved to be highly effective. High intensity screening sessions are efficient at screening many patients over a short period of time. BBV look back exercises improve patient care and ensures the

highly efficient testing to all clients

accessing service.

**Figure 3** – Graph showing each test type completed at each CDAT site.

**Acknowledgements:** 

correct test is selected. BBV screening at CDAT's is fundamental to achieving the WHO elimination targets.

| NHS No.    | Hospital No. | Surname       | First Name | Date of birth | Gender | Last test date | Full Screen | Prev Test result                          | Where tested? |
|------------|--------------|---------------|------------|---------------|--------|----------------|-------------|---|---------------|
| 606060666  | M1000000     | <u>Bloggs</u> | Joe        | 01/10/2001    | М      | 12/06/2023     | Y           | 3X N/R                                    | YCC CDAT      |
| 7070707070 | M2000000     | <u>Doe</u>    | Jane       | 19/05/1999    | F      | 22/05/2023     | Y           | ACTIVE HCV INFECTION WITH NO NEGATIVE PCR | YCC CDAT      |
| 8080880808 | M3000000     | <u>Bloggs</u> | Erin       | 05/07/1959    | F      | Not on System  | -           |   | -             |
| 1010111010 | M5000000     | <u>Doe</u>    | Eric       | 30/09/1964    | М      | 04/05/2023     | Y           | 3X N/R                                    | OPD YCC       |
| 2020202020 | M6000000     | <u>Bloggs</u> | James      | 21/09/1969    | М      | 06/04/2023     | Y           | PREV HCV REACTIVE WITH NEGATIVE PCR       | YCC CDAT      |

**Figure 2** – Example of look back exercise spreadsheet.

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