

# A Swift Response Utilizing Point of Care Hepatitis C RNA testing in a multi-agency effort to address a potential Public Health Risk in a NSW Prison

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Network

# Acknowledgement of Country



I would like to acknowledge the traditional owners of the land that we meet on today

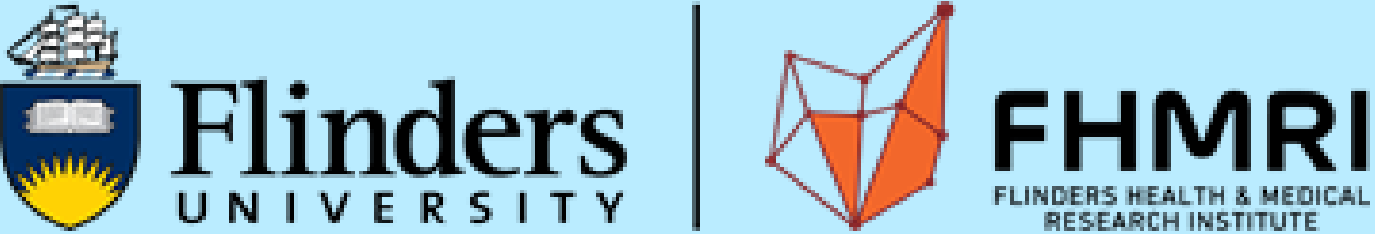
The traditional lands of the Gadigal People. I pay my respects to Elders past, present and emerging.

# Disclosures



- No Disclosures

# Acknowledgements



# Swift Response



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# HCV in Incarcerated Populations

- More than 50% of people who inject drugs have been exposed to hepatitis C worldwide [1]
- Over 80,000 people are incarcerated in Australia prisons annually [2]
- 92% of the Australian population in custody are male [2]
- Ratio of Aboriginal people to non Aboriginal people in custody:
  - Males 15 Aboriginal : 2 Non aboriginal
  - Females 22 Aboriginal : 8 Non aboriginal [2]
- Incidence of hepatitis C infection in prisons in NSW:
  - 11.4 % for the overall population
  - 6.3 % for the continuously imprisoned population [2]






# HCV in Incarcerated Populations

- Among the continuously imprisoned population sharing injecting equipment was independently associated with time to seroconversion [3]
- To date despite these statistics no Australian jurisdiction has implemented a prison-based Needle and Syringe program although it is available in the community

**USING?**

**BE STRONG WITH FINCOL!**  
CLEAN FITS IN 3 STEPS

- 1** Flush with fresh cold tap water 3 times
- 2** Soak fit in activated FINCOL for 5 minutes
- 3** Flush with fresh cold tap water 3 times AGAIN



**HEP C, HEP B & HIV LIVE IN BLOOD...**  
...DON'T LET THEM LIVE IN YOU!

**FINCOL FACTS!**

- FINCOL can kill HIV, hep B and hep C.
- FINCOL can be used to clean injecting, tattooing and body piercing equipment.
- FINCOL does not work undiluted (straight).
- FINCOL from the dispenser is ACTIVATED (already mixed with water) and ready to use.
- FINCOL works for 8 hours once it has been poured from the dispenser.
- All prisons in NSW provide FINCOL.

This poster printed July 2019. Obtaining and using drugs in a Correctional Centre is an offence.

**Hepatitis NSW** FOR INFO, SUPPORT OR REFERRAL CALL THE CONFIDENTIAL

**HEPATITIS INFOLINE** FREE CALL FROM PRISON  
 ■ ENTER MN ■ ENTER PIN  
 ■ PRESS 2 FOR COMMON CALLS LIST  
 ■ PRESS 3 FOR HEPATITIS INFOLINE

# Junee Correctional Centre





- September 2022 a small number of patients with acute symptoms of hepatitis presented and were subsequently confirmed as acute hepatitis C
- The health services team at GEO Australia reviewed patients at risk and commenced 23 people on HCV treatment
- GEO Australia in consultation with NSW Health and Justice Health and Forensic Mental Health Network (Justice Health NSW), decided a more comprehensive response was warranted

# Partnership Plan

## Stakeholders and Roles



A public and private partnership approach between

- Justice Health NSW
- GEO Australia
- Flinders University
- University of NSW, the Kirby Institute

# Health Promotion and Prevention

- Onsite visit
- Harm reduction prison specific promotion material was used
- Goal of health promotion is to reduce stigma and encourage patients to come forward for testing to normalize the experience
- Assessment of the availability of fincol and relevant education posters in the pods was conducted
- Introduction to NUAA and Hepatitis NSW was also provided for ongoing health promotion support

# Testing Approach

- At risk patients were identified using:
  - Population Health waiting lists
  - Recent pathology results
  - Condition alerts:
    - Opioid dependent
    - Patients currently on opioid agonist therapy
    - Amphetamine type substance use
    - HCV positive
    - Pts identified as aboriginal
    - Advanced liver disease
    - Known cirrhotic
- All other patients were given the opportunity to test for HCV





# Testing Approach

- Testing occurred in individual pods and the cartridges were labelled and sent to the onsite testing facility.
- A small data set was completed on each patient in order to provide information on this outbreak.



- The onsite testing facility was coordinated by a Flinders University Research Officer and a member of Justice Health NSW
- 5 Cepheid POCT machines were used each with the ability to test 4 tests per machine
- Results were printed off as they were completed, and entered into a data base



# Patient Assessments

- Work up for treatment occurred generally the day after the point of care test
- Week 1: Justice Health NSW Hepatitis Nurse Practitioner conducted Nurse Led Model of Care (NLMC) assessments and scripted treatment
- Week 2: Justice Health NSW CNC conducted NLMC assessments
- Week 2 Scripts were written off site by the Justice Health NSW Clinical Director of Population Health
- Patients with comorbidities or HCV retreatments were also scripted by the Clinical Director



## Comparison of Aboriginal/Non Aboriginal HCV Rates

- 195 people tested identified as Aboriginal
- 10% (22/195) had a detectable HCV viral load
- 376 people tested identified as non Aboriginal
- 6% (24/376) had a detectable HCV viral load

## Intravenous Drug Use in Custody

- 93% (41/44) people who tested positive for HCV reported IVDU at some point in time while in custody. This varied from recent use to years ago

## HCV Retreatments

- 38% (17/44) people reported to have had previous HCV treatment



- Between 11<sup>th</sup> – 21<sup>st</sup> October 2022 (2 weeks)
  - 833 people were in the correctional centre
  - 604 people received point of care testing
  - 95% of those tested received a valid test result
  - 44 of 571 (8%) had a detectable HCV RNA result
- Scripting commenced 14<sup>th</sup> October 2022 and completed 7<sup>th</sup> November 2022
- 40 scripts were written



# Outcomes

- No significant outbreak was identified
- 8% of the population tested had a detectable HCV RNA and all patients were linked to care
- 7-8% HCV RNA positivity rate is consistent with other NSW prisons



- With a high prevalence of HCV in prisons it is only sensible that people are tested, treated and harm reduction strategies are factored in.
- Early case detection and treatment in prisons will certainly assist in reducing the burden of disease in the community and in future health care costs.
- This project is inline with the prevention action areas for custodial settings outlined in the NSW Hepatitis C strategy 2022-2025 [5]
- Point of care testing is one of many tools which can assist in identifying people in prisons with HCV quickly and accurately.



1. Australian Institute of Health and Welfare. *The Health of Australia's Prisoners 2018*; Cat. no. PHE 246; AIHW: Canberra, Australia, 2019. Available online: <https://www.aihw.gov.au/reports/prisoners/health-australia-prisoners-2018/> (accessed on 24 February 2022)
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5. NSW Ministry of Health. NSW Hepatitis C Strategy 2022-2025. Available from: <https://www.health.nsw.gov.au/hepatitis/Pages/hepatitiscstrategy.aspx>

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6. The Kirby Institute UNSW. Progress towards hepatitis C elimination among Aboriginal and Torres Strait Islander people in Australia, 2021.

**<https://kirby.unsw.edu.au/report/progress-towards-hepatitis-c-elimination-among-aboriginal-and-torres-strait-islander-people>**