


A United Approach to Hepatitis C Elimination in NSW

Viral Hepatitis
Conference

Christopher Bourne
Annabelle Stevens
Rochelle Aylmer
Steven Drew
Alex Wade

1st August 2024



We acknowledge the Traditional Owners of the land on which we meet and work, and pay our respects to Elders past, present and emerging.

Urapun Muy NAIDOC 2024 poster winner by artist Deb Belyea.

'Urapun Muy' from the Kalaw Kawaw Ya dialect of the Top Western Islands of the Torres Strait, means 'One Fire'. The title of this work pays homage to Torres Strait Islanders and Aboriginal people everywhere, as we all have that one fire: our passion for our culture.

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Introductions

Annabelle Stevens & Dr Christopher Bourne

Session Introduction

Session Overview

A united approach to hepatitis C elimination in NSW: leveraging strong partnerships and the peer network to increase engagement in care.

Speakers



Alex Wade
Clinical Nurse
Consultant

Mid North Coast
Local Health District



Steven Drew
Chief Executive
Officer

Hepatitis NSW



Rochelle Aylmer
Harm Reduction
Services Manager


NSW Users and
AIDS Association

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NSW Ministry of Health - Guiding the sector

Annabelle Stevens

NSW Hepatitis C Strategy 2022 – 2025






NSW
Hepatitis C
Strategy
 2022-2025

NSW Health

Aim: Eliminate hepatitis C in NSW as a public health concern by 2028.

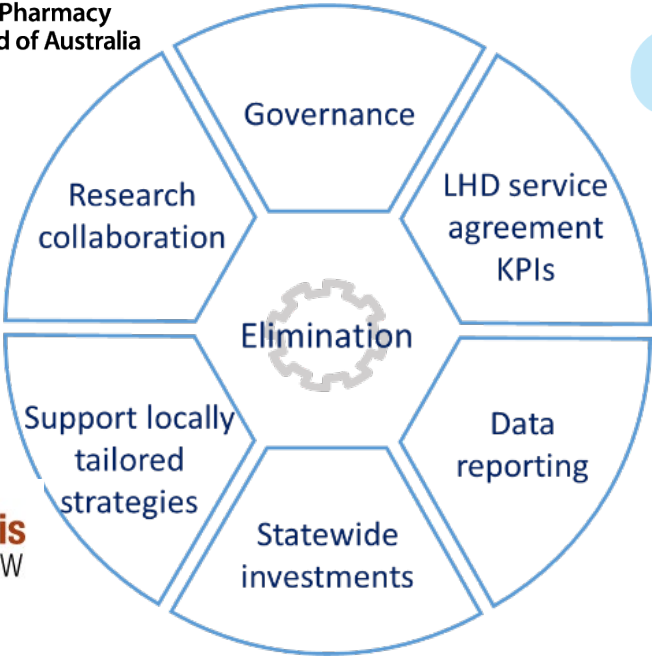
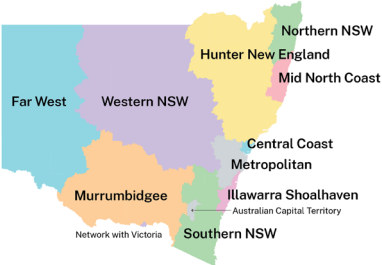
Vision: A NSW where hepatitis C transmission is prevented and people with hepatitis C receive regular testing and treatment without barriers.

Goals:	1. Prevent	2. Test	3. Treat	4. Stigma and Discrimination
	Prevent new infections through harm reduction, education and health promotion.	Increase access and testing for people at risk of infection.	Link newly acquired and existing infections into treatment and care.	Reduce stigma and discrimination as a barrier to prevention, testing and treatment.
Targets: 	<ul style="list-style-type: none"> i) 60% reduction in the number of new hepatitis C infections ii) 20% or lower reported receptive syringe sharing among people who inject drugs iii) 10% increase in the distribution of sterile needles and syringes for people who inject drugs 	<ul style="list-style-type: none"> i) 10% increase in the number of hepatitis C antibody tests ii) 20% increase in the number of hepatitis C RNA tests <p>With a focus on services within:</p> <ul style="list-style-type: none"> - Alcohol and Other Drug Health - Justice Health - Mental Health 	<ul style="list-style-type: none"> i) 65% cumulative proportion of people living with chronic hepatitis C who have initiated direct-acting antiviral treatment ii) 50% reduction in hepatitis C attributable mortality 	<ul style="list-style-type: none"> i) 75% reduction in the reported experience of stigma and discrimination among people affected by hepatitis C ii) 75% reduction in the reported experience of stigma and discrimination among people who inject drugs iii) 75% reduction in the reported incidence of stigma and discrimination towards people who inject drugs by healthcare workers
Action Areas: 	<ul style="list-style-type: none"> 1.1 Needle and Syringe Program 1.2 Partnership with Aboriginal communities 1.3 Peer workforce 1.4 Custodial settings 	<ul style="list-style-type: none"> 2.1 Alcohol and Other Drug services 2.2 Innovative technologies and strategies 2.3 Embed testing in key settings 2.4 Primary Care 2.5 Communication and education 	<ul style="list-style-type: none"> 3.1 Models of Care 3.2 Public Health Unit notification follow up 3.3 Post-cure management 3.4 Data, research and surveillance 	<ul style="list-style-type: none"> 4.1 Barriers to accessing care 4.2 Data, research and surveillance 4.3 Communication and education

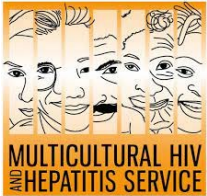
Hepatitis C Elimination Framework



The Pharmacy Guild of Australia

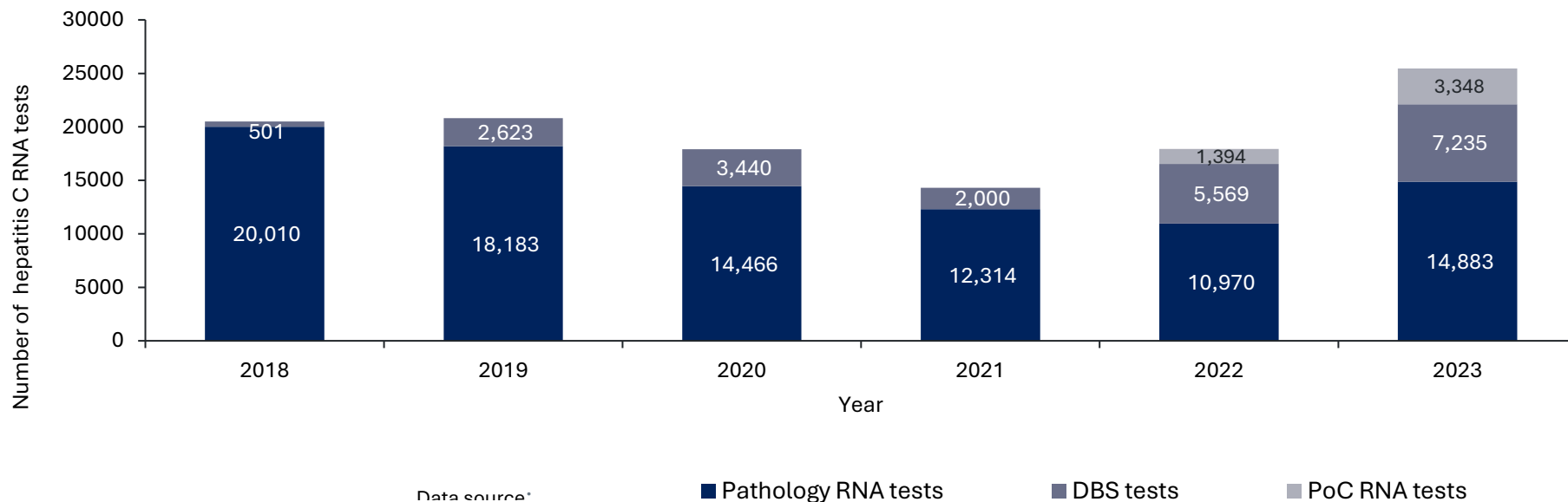


Specialty Networks
 Sydney Children's Hospitals Network (Randwick and Westmead)
 Justice and Forensic Mental Health Network
 St Vincent's Health Network



Hepatitis C RNA Testing Data

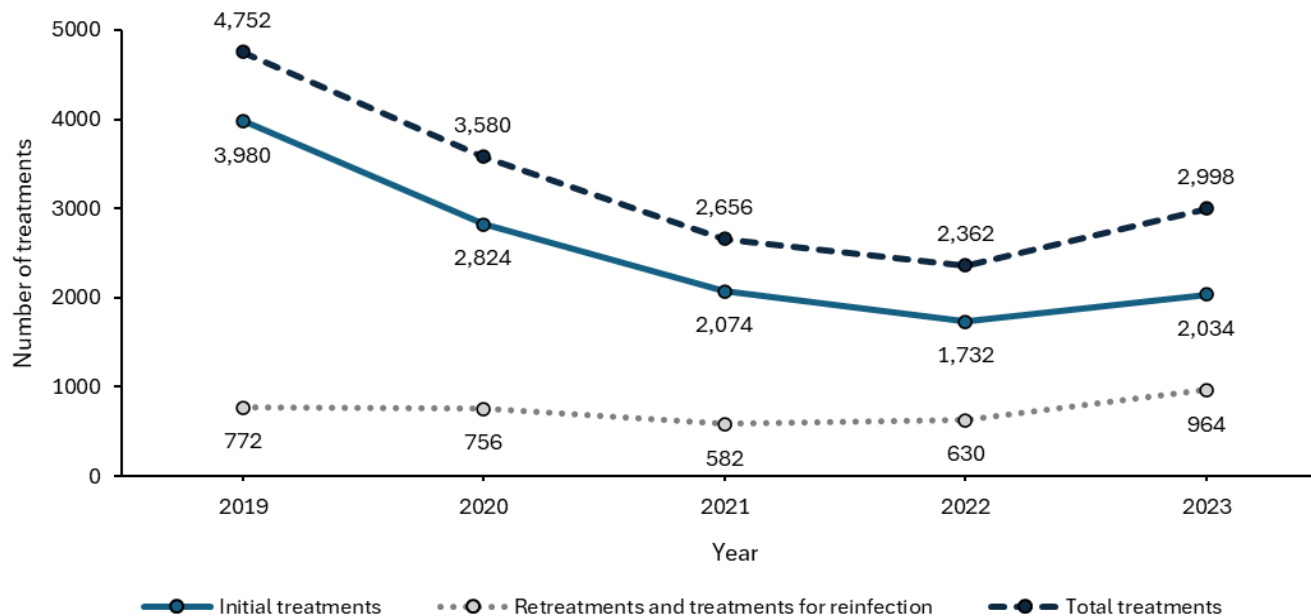
Figure 1: Number of hepatitis C RNA tests completed by NSW Health Pathology, DBS and POC testing in NSW, 2018 – 2023



Data source: NSW Health Pathology, National Australian hepatitis C POC Testing Program and the NSW HIV and hepatitis C DBS testing pilot. Note: Excludes General Practice and other private settings. NSW DBS testing pilot commenced in October 2016 and the NSW POC testing program commenced in January 2022.

Hepatitis C Treatment Data

Figure 1: Number of hepatitis C treatments, 2019 – 2023



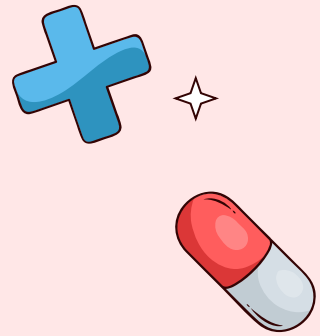
3

Embracing peer-led approaches in the hepatitis C care cascade

Rochelle Aylmer, NSW Users and AIDS Association

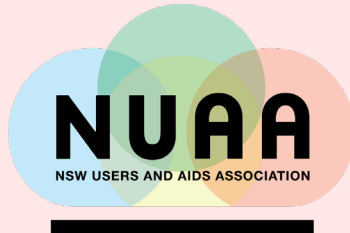
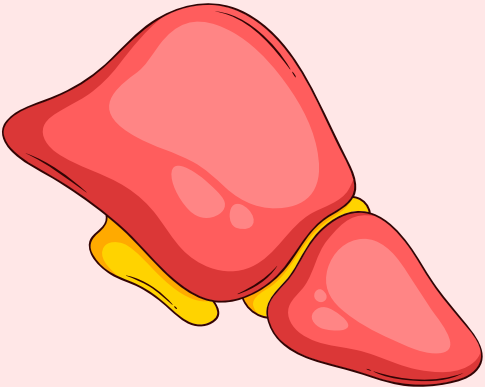


A United Approach to Hepatitis C Elimination in NSW





EMBRACING PEERED APPROACHES IN THE HEPATITIS C CARE CASCADE

Rochelle Aylmer | NSW Users and AIDS Association





ACKNOWLEDGEMENT OF COUNTRY



NUAA would like to acknowledge the Traditional Owners, Knowledge-holders and Custodians of the land and pay respects to Elders past, and present.

We recognise First Nations Peoples' unique cultural and spiritual relationships to place and the rich contribution made to society.





ACKNOWLEDGEMENT OF COMMUNITY

NUAA is a peer based, community-controlled drug user organisation. We represent the voices and needs of drug-using communities in NSW.

NUAA and the community of people who inject drugs were instrumental in averting the HIV epidemic and we remain central to improving the health and human rights of all People Who Use Drugs in NSW.

We would like to take this opportunity to acknowledge the legacy of the peers who went before us and reaffirm our commitment to fighting the effects of stigma and criminalisation in all their manifestations.






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NAAA's peer-led programs and services

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PARTNERSHIPS

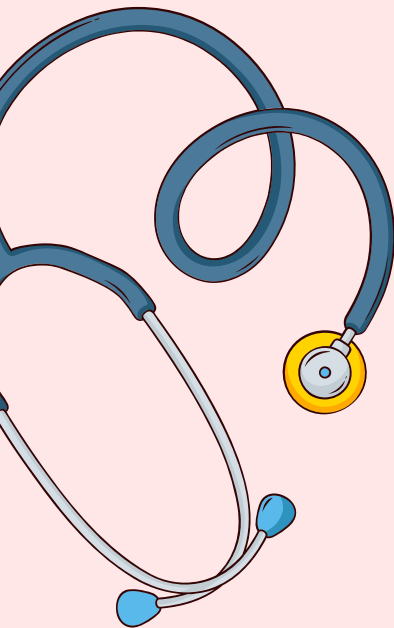
NAAA partnerships and collaborations



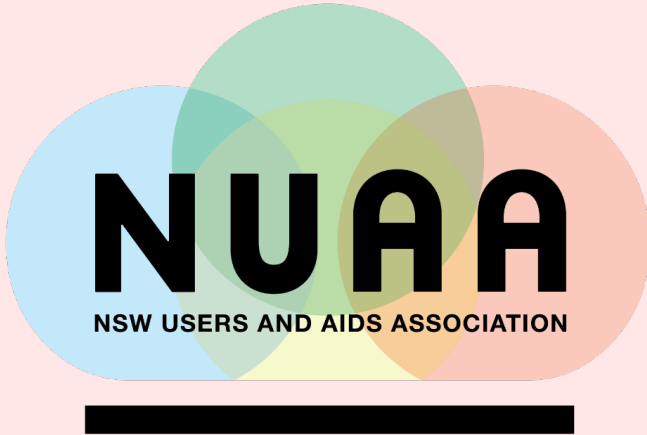
01

INTRODUCTION

Background and history of NUAA



ABOUT NUAA



The NSW Users and AIDS Association (NUAA) is a peer-based drug user organisation.

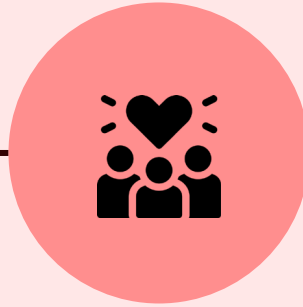
NUAA strives to improve our advocacy for, and services supporting, the diversity of people impacted by stigma and discrimination caused by the criminalisation of drug use across NSW through working with a broad range of stakeholders and partners to support system change.

OUR HISTORY



ESTABLISHED 1989

- Formed in the face of a growing HIV epidemic
- Established by group of drug users, their friends, families and supporters
- Formerly AIDS Drug Information Collective (ADIC)



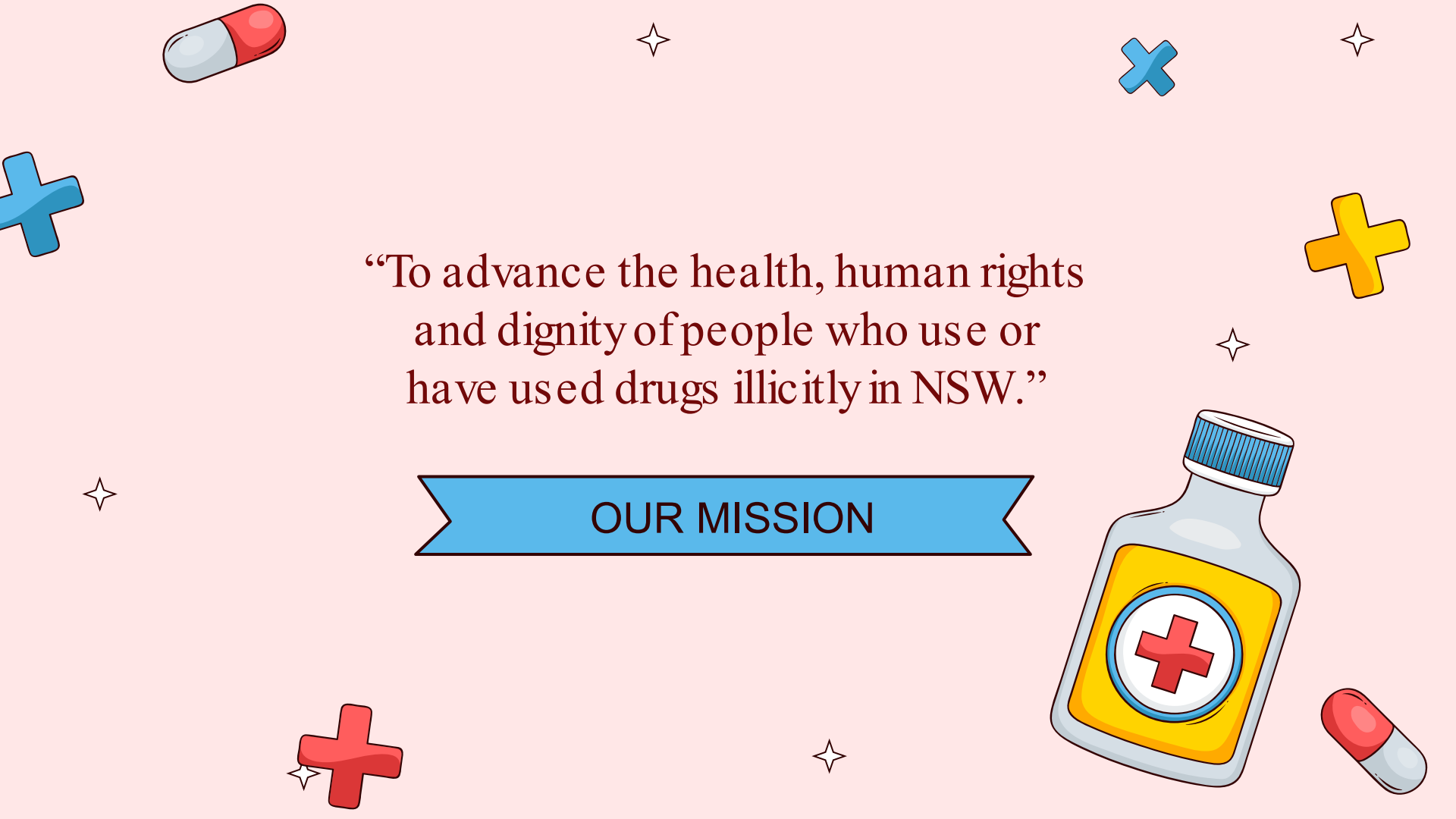
COMMUNITY LED

- Independent, user-driven community-based organization
- Governed, staffed and led by people with lived and living experience of drug use



GOVERNMENT FUNDED

- Funded primarily by NSW Ministry of Health
- Continuously funded for over 30 years
- Not-for-profit, ACNC registered charity



“To advance the health, human rights
and dignity of people who use or
have used drugs illicitly in NSW.”

OUR MISSION

The background is a light pink color decorated with various medical icons: two stethoscopes (one blue and one yellow), several red and white capsules, and red and yellow crosses. There are also small white stars scattered throughout.

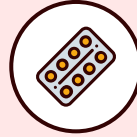
NUAA PROGRAMS

EMBRACING PEER-LED MODELS OF CARE

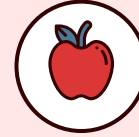
PEERLED PROGRAMS



NEEDLE SYRINGE
PROGRAM



OUTREACH AND
PEER SUPPORT



PEERLINE



OPEN CLINIC
ON CROWN



PEER WORKFORCE
DEVELOPMENT



DANCEWIZE
NSW



VOLUNTEER PROGRAMS

KEY PEER EDUCATORS

DANCEWIZE



- Volunteers providing harm reduction at music festivals and licenced venues
- Includes care space, education outpost and roving teams
- Harm reduction training provided to security and event/venue staff

- Volunteer NSP workers deployed at NUAA's fixed site NSP
- Extensive training including workforce basics and soft skills and NSP service delivery
- Work & Development Orders



PEER PARTICIPATION PROGRAM

NUAANSF

PEER DISTRIBUTION PROGRAM

OUTREACH



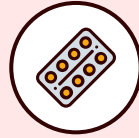
- Volunteers distribute equipment within their local communities
- Now offering DBS testing to people accessing equipment
- Trained and credentialed to distribute naloxone in NSW



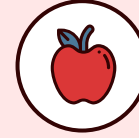
OTHER PROGRAMS AND SERVICES



PROFESSIONAL
DEVELOPMENT



ADVOCACY AND
REPRESENTATION



PUBLICATIONS
AND RESOURCES



PEERS AND
CONSUMERS
FORUM



TRAINING AND
EDUCATION



RESEARCH
CAPACITY
BUILDING



The background is a light pink color with various medical-themed illustrations. On the left, there is a large white syringe with a blue plunger and needle. Below it is a red and white capsule. At the bottom left is a yellow cross. On the right, there is a red and white capsule and a large red, fleshy organ-like shape. Scattered throughout are several white four-pointed stars and a blue cross at the top right.

TOWARDS ELIMINATION

EMBRACING PEER-LED MODELS OF CARE

OPEN CLINIC ON CROWN

NUAAFIXED SITE NSP



PREVENTION



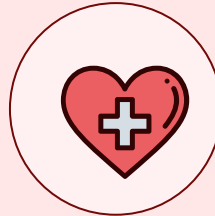
Sterile injecting equipment and ancillary items. State-wide postal NSP service.

TESTING & TREATMENT



Point-of-Care (POC) and Dried Blood Spot (DBS) testing facilitated by HCV Peer Worker

PEER SUPPORT



Peer-assisted treatment and care via nurse-based Open Clinic On Crown

PEERS ON WHEELS

PEER OUTREACH



PREVENTION

Delivering sterile injecting equipment and harm reduction resources across NSW



TESTING & TREATMENT

Mobile, point-of-care (POC) testing clinic operated by peers in collaboration with NSW Health



PEER SUPPORT

Linking people with local peer networks and peer distributors to access sterile equipment, peer education and support





PEER DISTRIBUTION



PEER OUTREACH



PREVENTION

NAAA volunteers distributing sterile injecting equipment and modeling of safer using



TESTING & TREATMENT

Peer Distributors facilitating Dried Blood Spot (DBS) testing within their local communities



PEER SUPPORT

Peer-assisted treatment referral and follow-up to local care provider





HIGH INTENSITY TESTING

IN NSW CORRECTIONAL CENTRES

PEER OUTREACH (IN PARTNERSHIP WITH JUSTICE HEALTH)



PREVENTION

HCV peer education, harm reduction resources, strategies for safer using



TESTING & TREATMENT

Work with Justice Health NSW to support High Intensity (HCV) Testing in NSW correctional centres



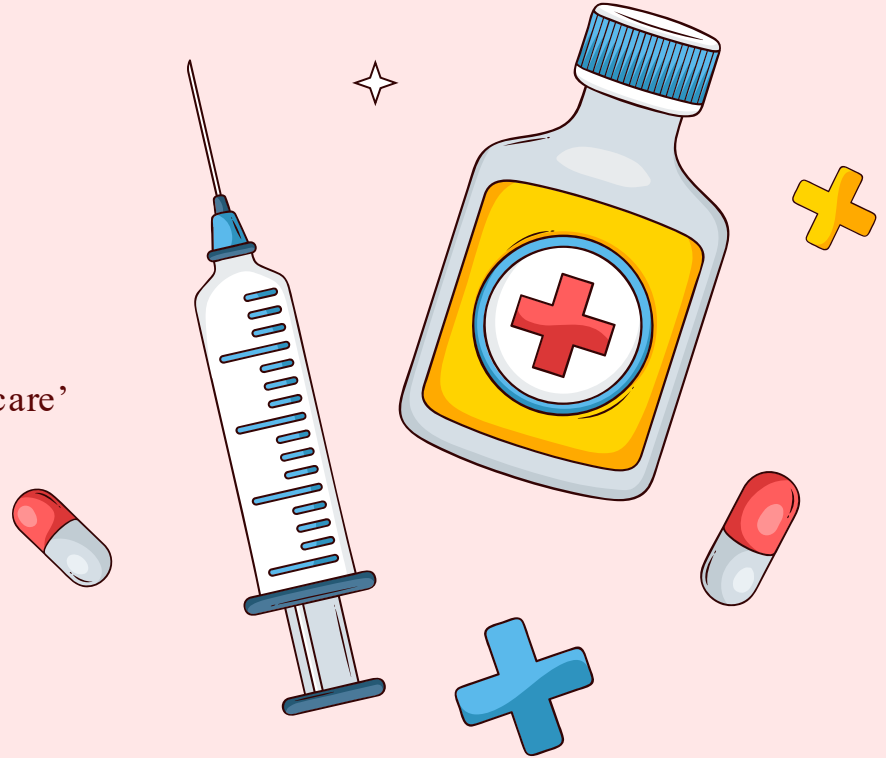
PEER SUPPORT

Insiders News is a harm reduction resource produced by NUAA and distributed through NSW correctional centres



A CASE FOR PEER-BASED APPROACHES

- Awareness-raising and myth-busting
- Addressing stigma
- Extended reach
- Tackling misinformation
- Influencing the care pathway
- Encouraging a greater emphasis on ‘quality of care’
- Perceived as “experts”
- Prosocial behaviour
- Emotional support
- Experiences are normalized



PARTNERSHIPS AND COLLABORATION

MINISTRY OF HEALTH

CENTRE FOR POPULATION HEALTH

- Hepatitis Strategies Advisory Committee
- NSP Leadership Group

CENTRE FOR ALCOHOL AND OTHER DRUGS

- Consumer Reference Committee
- Consumer-Informed AOD Research and Analysis

- HCV high-intensity testing
- Insiders News
- Harm reduction workshops, publications and resources in custody
- Stigma and discrimination training

JUSTICE HEALTH

LOCAL HEALTH DISTRICTS

Peer and Consumer Workers in:

- Nepean Blue Mountains LHD
- Mid North Coast LHD
- Hunter New England LHD
- Western NSW LHD
- Far West LHD

MOUs in place with several other LHDs

PARTNERSHIPS AND COLLABORATION

RESEARCH INSTITUTES

- Australian Injecting and Illicit Drug Users League (AIDL)
- The National Alcohol and Drug Agencies (NADA)

KIRBY INSTITUTE
National Point Of Care Testing Program,
ETHOS, TEMPO, Peers On Wheels

CENTRE FOR SOCIAL RESEARCH IN HEALTH
Deadly Liver Mob, Stigma Research Stream

PEAK ORGANISATIONS

BURNET INSTITUTE | EC AUSTRALIA
"It's Your Right"

NATIONAL CENTRE FOR CLINICAL RESEARCH ON EMERGING DRUGS
NATIONAL DRUG AND ALCOHOL RESEARCH CENTRE

NOT-FOR-PROFIT & COMMUNITY ORGS

- Housing
- Homelessness
- Drug & Alcohol
- Community Health
- Local Drug Action Teams

NON-GOVERNMENT



THANKS!

DO YOU HAVE ANY QUESTIONS?

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The power of peers, partnerships and place

Steven Drew, Hepatitis NSW

The power of peers, partnerships and place

ACKNOWLEDGING COUNTRY

I acknowledge the traditional custodians of the land on which we are meeting on. I pay my respects to elders, past and present, and extend that respect to all Aboriginal and Islander people present.

Artwork by Jasmine Sarin: award-winning,
Dharawal artist and graphic designer.



The power of **PEERS**



The power of peers ...

drawing on life as inspiration for action

- Diverse lived experience to engage and support others
- Bridge and navigate health care system/services
- Improving health care delivery, services and policy
- Advocacy and representation
- Challenging stigma and discrimination

Peer-facilitated treatment access for hepatitis C: the Live Hep C Free project (Silano et al 2022)

<https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-022-00619-3>

The power of peers ... in all their guises

- Peer engagement and support workers
 - cultural support
 - lived experience
 - navigators
- EMPOWER peers
- Speakers
 - educational
 - media

The power of **PARTNERSHIPS**



The power of partnerships ... through collective action

- Playing to strengths
- Maximising resources
- Broadening reach
- Increasing engagement, access treatment and cure
- Keeping it real, challenging systems and promoting change

The power of PLACE



The power of place ... beyond clinic walls

- Public health and health promotion – expanding settings and services
- Outreach
- Innovation – self testing and referral
- Personal agency

“MY LIFE, MY CHOICE”

The power of ... powering **PERFORMANCE**



Performance ...

HEP CURED (*July-August 2023*)

# of NSW activations	# HNSW Peers	# people/ interactions	# saw nurse	# HCV tests [DBS POC V]
24 events	33	892	454	408 [226 151 31]

Campbelltown | Dubbo | Forbes | Glebe | Gosford | Goulburn |
Grafton | Kogarah | Lismore [x2] | Maroubra | Miller | Mt Druitt |
Newtown | Redfern [x2] | St Leonards | Surry Hills | Sutherland |
Tregear | Tweed Heads | Unanderra | Wagga Wagga | Wollongong

Performance ...

EMPOWER *(since 23 August 2023)*

25

EVENTS

378

ENROLMENTS

30

Ab DETECTED



EMPOWER



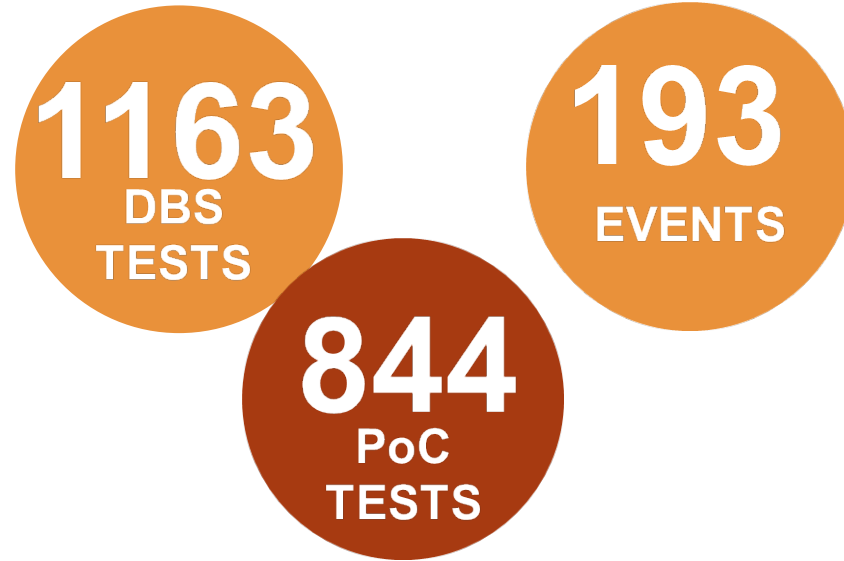
Hepatitis
NSW



UNSW
Kirby Institute

Performance...

Peer engagements *(since 1 July 2023)*



THANK YOU



5

A week in the life of a liver clinic - Mid North Coast exposed

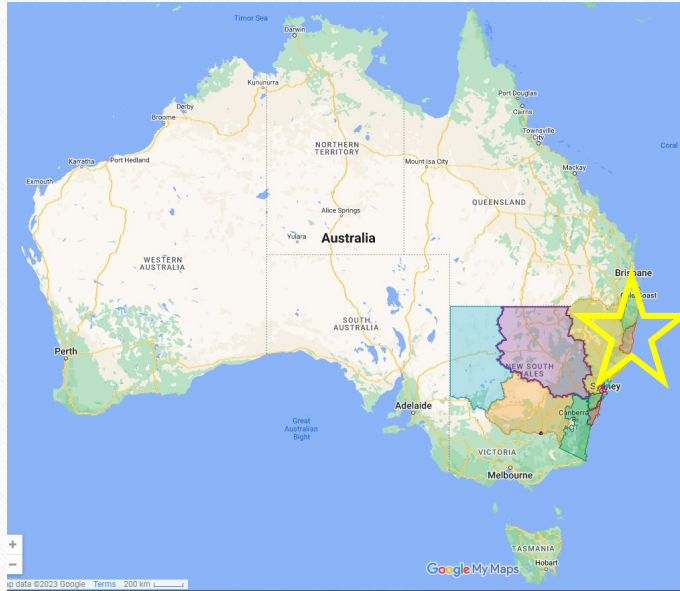
Alex Wade, Mid North Coast Local Health District

A week in the life of a liver clinic

A Mid North Coast experience

Alexandra Wade CNC / Team Leader

MNC Liver Clinic (11,335 KM2)

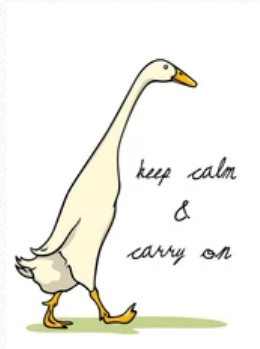


A week in the life ...

	Monday	Tuesday	Wednesday	Thursday	Friday
0800-0900	<u>Tool-box Meeting</u>	Tool-box Meeting	Tool-box Meeting	Tool-box Meeting <u>TEMPO – GRAFTON NSP</u>	Alex Working NH1 Admin and Research
0900-1000	<u>HAW Port Macquarie</u>	HAW Kempsey	Drs Clinic PMQ	PALM Scheme meeting	<u>Pete's Place Homelessness outreach – Flu Clinic</u>
1000-1100	<u>Drs Clinics</u> RN clinic Coffs Harbour	<u>AM -Dr's Clinic Coffs Harbour</u> <u>Adele House – Rehab</u>	<u>TEAMS meeting to discuss WDO</u>	P&PHD Managers meeting	Directors report due – send some stats
1100-1200	Drs Clinics Coffs Harbour RN clinic Coffs Harbour	Site Visit for DBS – Coffs Harbour AOD	Site Visit for DBS – Lismore AOD	<u>Site Visit for DBS – Tweed AOD</u>	HARP TL meeting
1200-1300	<u>HCC CNC - Clinic</u>		<u>Regional DBS Blitz (Wk3)</u>	Nambucca Health One ALD / HCC clinic	Health Roster
1300-1400	Drs Clinics Coffs Harbour RN clinic Coffs Harbour	Drs Clinic Kempsey	Positive PoCT Comp panel - Coffs	Positive PoCT Comp panel - PMQ	Meeting with Kate – NNSW NUM
1400-1500	Drs Clinics Coffs Harbour RN clinic Coffs Harbour	Drs Clinics Coffs Harbour		Positive PoCT Comp panel - Grafton	DBS Results follow up
1500-1600					<u>BREATHE & RELEASE</u>
1730-2100			<u>AOD DBS dinner</u>	<u>Pick up son from ED</u>	

Tool Box Meeting

- Every morning at 8:30 wherever we are – discuss clinical cases, outreach for the day, staff whereabouts, clinic issues, data entry ... and Alex's farm updates.
- Coffs Harbour
- Grafton
- Kempsey
- Port Macquarie
- Nambucca
- On the road ...



Hepatitis Awareness Week



- Training MNC AOD staff to do DBS in AOD in alignment with NSW MoH Guidance document
- Practical Clinical training
- Data entry training
- Wrap up report back to both teams



Monday 22nd July 2024

	CH Clinic 1: RN1	CH Clinic 2: RN2	Kempsey	Port Macquarie	Grafton
0900	Initial HCV assessment + F/s	ALD database and surveillance	NP clinic	Hepatitis Awareness Week	Not attended today
1000	Initial HCV assessment + F/s	ALD database and surveillance	P1: ALD + ETOH	Activities in AOD	
1100	HBV assess (interpreter needed)	ALD database and surveillance	P2: HCC – Decomp LD P3: DNA	Mural + HNSW Peer Workers	
1200	LUNCH – not taken today !!	LUNCH	LUNCH	LUNCH – on the run between sites!!	
1300	HBV r/v – F/s (interpreter needed) Review – ALD	ALD database and surveillance	ASHM Remote Prescriber - blocked out time	Training AOD workers to do DBS testing!!	
1400	HCV RNA +ve – Assess – needs transport arranged or home visit	HCV PoCT –SELECT new patient (maybe CMP)	#4 Scripts – Coffs, Kempsey, Lismore and Wagga	REDCap Data Entry – eMR – DBS Registratoins	
1500	Notes	Notes	Notes		



Integrated HCC CNC clinic

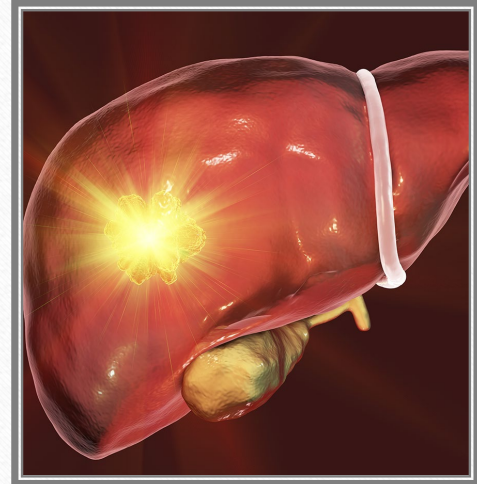
Role is INTEGRATED with Mid North Coast Cancer Institute

1 FTE CNC across district

All HCC aetiologies

Working closely with

- Gastroenterologists
- Interventional radiologists
- Oncologists
- tertiary hospital MDT



Tuesday 23rd July 2024

	CH Clinic 1	CH Clinic 2	Kempsey	Port Macquarie	Grafton
0900	AM -Dr's Clinic Coffs Harbour	HCC surveillance follow up - Send forms - Update REDCap	HAW activities within AOD - OAT	Prep clinic for Wednesday	N/A today
1000	ALD – HCC surveillance HBV review + yearly fibroscan	HCC and Decomp LD – CNC review (discuss ongoing lactulose and rifaximin)	HAW activities within AOD - OAT	Prep clinic for Wednesday	
1100	HCC phx - management	Adele House clinic – Same day Test and Treat	Preparation for Dr Clinic - HBV in Indonesia - HCC treatment options	P.A Soup Kitchen in-reach DBS or PoCT (staffing)	
1200	LUNCH	LUNCH	LUNCH Drs Clinic Kempsey	LUNCH	
1300	Notes from clinic	Site Visit for DBS – Coffs Harbour AOD	HBV assessment – for treatment (interpreter needed) + contact tracing discussion – BOOK Family	P.A Soup Kitchen in-reach DBS or PoCT (staffing)	
1400	Drs Clinics Coffs Harbour P1: HBV review P2: HCV + ALD for treatment P3: New HBV – Kurdish interpreter booking #530974	Travel to Lismore for NNSW DBS site visits (3hrs) Dinner with NSP team – discuss DBS errors 😊	ALD – for scope forms ALD – HCC surveillance r/v HCC – discussion re diagnosis and treatment plan	DBS results and error management	
1500	Notes	Notes			😊



Interpreter

Hepatitis B assessment

- 28 yr old Indonesian woman
- New diagnosis
- Very limited English
- Referred after attending ED for STI symptoms
- Father died of HBV
- Rogue translator !!

HEPATITIS B
Can cause liver cancer
but has no symptoms

NSW
GOVERNMENT

**ARE YOU LIVING
WITH HEPATITIS B?**
FIND OUT. GET TESTED.

TALK TO YOUR DOCTOR
www.mhahs.org.au/index.php/en/hepatitis/hepatitis-b-testing

HEPATITIS B
GET TESTED

Adele House Rehabilitation Centre

- Drug Court funded
- Farm like environment
- Monthly clinic
- Linked to MNC AOD
- 40 mins from Coffs Harbour



People who test HCV positive are prescribed Direct-Acting-Antiviral medications by the outreach Nurse Practitioner or General Practitioner.



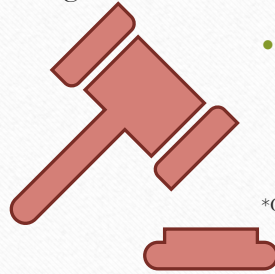
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Work Development Orders – WDO's

WDO's are voluntary and enable eligible people to work off their NSW fines by undertaking activities instead of paying the debt off with money.

Reduces fines by **\$1000/month** and can improve engagement of clients from testing to treatment to SVR.



Unpaid fines = Enforcement action

- Suspend a persons drivers license;
 - Cancel Car Registration;
 - Stop people being able to deal with the RMS;
 - Take money from people's bank accounts;
 - Seize and sell property;
 - Make a Community Service Order
-
- **Once a person is signed up on a WDO, Revenue NSW should stop taking enforcement action against that person to get the money owed.**
 - If a person has had their driver's license suspended due to unpaid fines, this suspension should lift overnight* (in most cases).

*Clients must check with the RMS that their suspension has been lifted BEFORE they drive.

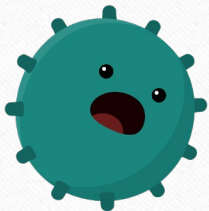
Regional DBS Blitz

BBV and Syphilis Screening:
a reactive outreach activity



Hmmm, 'crickets...'





MNC AOD HCV dinner

LOCATION: Supply Coffee & Co, 15 Orlando St, Coffs Harbour

DATE: Wed. 24 July **TIME:** 5.45pm - 9.00pm

Speakers

Dr Anthony Martinez (recorded):
A/Prof. at Jacobs School of Medicine, University of Buffalo
Medical Director, Hepatology, Erie County Medical Centre

Dr Tony Gill:
Clinical Director of Alcohol and Other Drugs in the at Mid North Coast LHD

Alex Wade:
Clinical Nurse Consultant at Mid North Coast Liver Clinic





TEMPO Grafton

Needle Syringe Program staff
Liver Clinic Support
And research governance (P.I)

Screened: 131

Positive: 12

Treated: 10 (and still trying)





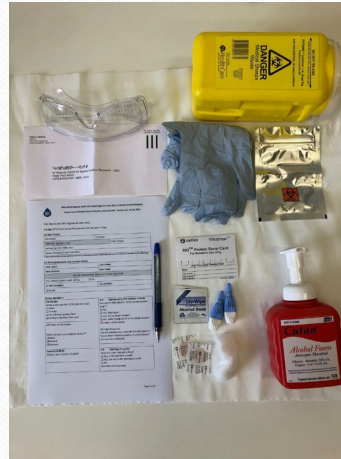
Site visits

MoH Project Coordinator


LCNNSW - Principal Investigator

- Site coordinator

- Coffs Harbour - AOD
- Lismore - AOD
- Tweed - AOD



NEW Record ID 425

 Data Collection Instrument	Status
DBS Test	<input type="radio"/>
DBS Result	<input type="radio"/>
DBS Follow-up	<input type="radio"/>

Pick up son in ED

Remember our Humanity

We are mothers, fathers, brothers, sisters,
sons, daughters, neighbors, partners, wives,
husbands, granddaughters, grandsons,
friends, colleagues, pet owners...





- NSP services
- HCV testing – DBS
 - Confirmatory – PoCT / Venepuncture
 - Treatment and follow up
- Flu Clinics
- Covid vaccinations (2021)
- General nursing care when able
- Engagement and rapport building





Breath and Release

It's the weekend

6

Panel Q&A