















The Eliminate Hepatitis C Partnership

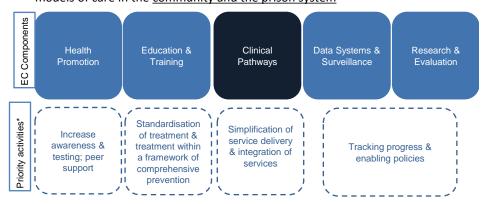
Models of care to enhance hepatitis C treatment

Authors: Wong E, Pedrana A, Draper BL, Gold J, Richmond J, Stoove M, Doyle JS, Thompson AJ, Hellard ME

EC Partnership

Aim of EC Partnership:

Expanding <u>community-based treatment program</u> to increase HCV **treatment uptake in people who inject drugs** (PWID) using nurse-led models of care in the <u>community and the prison system</u>



^{*} Ref: Ford et al, Ten priorities for expanding access to HCV treatment for people who inject drugs in low- and middle-income countries, 2016





Aim of site scoping

- Identify high case load clinics for PWID
- Document models of hepatitis C care in community clinics
- Identify barriers and enablers to increasing hepatitis C treatment uptake
- Inform EC intervention package

23 sites approached (Metropolitan Melbourne)

- Community clinics with alcohol and other drug service (AoD) or needle syringe programs (NSP)
- Opioid substitution therapy (OST) providers



16 sites responded and visited

- 9 community health clinics with NSPs and AOD services
- 2 AOD services attached to hospitals
- 1 community medical clinic
- 4 private OST GP clinics



Semi-structured interview

- Case-load
- Workforce/staff
- HCV testing process
- HCV treatment process
- · Barriers and enablers
- Support needed to increase testing and treatment







Models of Care

Community prescribing

- · Clinic nurses or GPs arrange HCV tests.
- Liver assessments (scans) referred to radiology services or to hepatitis nurses*
- · GPs independently prescribe treatment
- · Complex clients with cirrhosis referred to specialists

Nurse* led hepatitis C clinic

- Hepatitis nurse* visits outreach clinic and arranges HCV tests and liver scans
- · Hepatitis nurse* arranges for treatment scripts to be written by a specialist
- Hepatitis nurse* may have mentored GP and clinic nurse on hepatitis C management

Comprehensive community care

- Hepatitis nurse* visits an outreach clinic with a specialist
- · Hepatitis nurse* or clinic staff arranged HCV tests
- · All care including for clients with cirrhosis remains at community clinics

^{*} Integrated hepatitis nurses are funded by the Victorian Department of Health to deliver hepatitis care in community settings







Key opportunities to increase testing and treatment uptake

- Partner with hepatitis nurses to support clinic's capacity to offer opportunistic testing
- Trial rapid point-of-care testing to increase opportunistic testing and treatment
- Support hepatitis nurses in mentoring GPs or nurse practitioners to independently prescribe treatment
- Develop standardised data collection tools to address current ad hoc data collection to facilitate monitoring of program



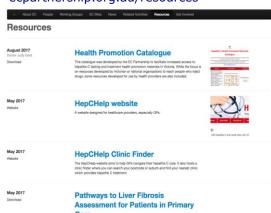




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