



EMPOWER

Peer-implemented point-of-care antibody testing for hepatitis C infection to enhance linkage to hepatitis C RNA testing and treatment

Bray P¹, Leadbeatter K¹, Drew S¹, Grant L, Doidge J, Woods G¹, Robin G², Dailey B², Chu A³, Bondezi K³, Starr M⁴, Markus C⁵, Matthews S⁵, Payne J⁶, Silk D⁶, Grebely J⁶, Cunningham EB⁶

¹ Hepatitis NSW, Sydney, Australia

² Sydney Local Health District, HIV & Related Programs, Sydney, Australia

³ Storr Liver Centre, Westmead Institute for Medical Research, Westmead Hospital, Westmead, NSW, Australia

⁴ Vincent's Centre for Applied Medical Research, St Vincent's Hospital, Sydney, Australia

⁵ Flinders University International Centre for Point-of-Care Testing, Flinders Health and Medical Research Institute, Flinders University

⁶ The Kirby Institute, University of New South Wales Sydney, Sydney, NSW, Australia



UNSW
Kirby Institute



UNSW
SYDNEY

Acknowledgement of Country and Community



Disclosure of interest statement:

The Australian Hepatitis C Point of Care Testing Program is funded by the Australian Government Department of Health, Disability and Ageing. This research was supported by the National Health and Medical Research Council, the Medical Research Futures Fund, Cepheid, Gilead Sciences, and AbbVie.

The EMPOWER Study

Background and Approach

- Key populations face unique barriers to accessing care for Hepatitis C Virus (HCV)
- Peer-implemented point-of-care HCV antibody testing with immediate reflex point-of-care RNA testing is a crucial advancement to outreach-based HCV testing in metropolitan Sydney settings
- Delivered as a sub-study of the Australian Hepatitis C Point-of-Care Program in partnership with Hepatitis NSW peer workers
- Lived experience of HCV and treatment are a key element of engaging with community members

Professional Development and the Peer Workforce

From model of care design to implementation

- Peer workers have been involved in every step of the EMPOWER implementation process
- Peer workers are employed by Hepatitis NSW on an ongoing basis and offered continuous upskilling
- All peers complete ASHM/Flinders International Centre for POC Testing Modules on HCV Antibody Testing, Quality Control, and Infection Control Procedures
- All peers have completed ICH Good Clinical Practice
- Community voice in implementation and strategy for engaging participants at outreach
- Health education and harm reduction experts using their lived experience

The Peer Perspective

“The first thing I tell people when I see them in the EMPOWER program is *‘I’m a peer worker and the reason I’ve got this gig is because I’ve had Hep C treatment myself’*. That immediately removes barriers and hopefully takes some of the stigma away from having Hep C or being at risk.

This is a very rewarding job for me because it allows me to reach out to people that are in situations I’ve been in myself and to be an example that there is a healthy life after Hep C and drug and alcohol issues.

I always feel supported by the Hep NSW team and the training has been great, particularly going back a revisiting training to fine tune and remember important safety and infection control practices.”

-Jimmi, Hepatitis NSW Peer Worker

The Peer Perspective

“As a peer worker, I bring lived experience to the testing process, I've felt the sting of stigma from health professionals, and I know how isolating that can be. By sharing my own journey through treatment and cure, I help create a safe, non-judgmental space where people feel seen and supported. I reassure them that their information is safe with me, and that the hep C cure is real and life-changing. It worked for me!

The training and support I've received through EMPOWER have been transformative. It's not just about learning the technical side of testing, it's about building confidence, deepening empathy, and feeling truly equipped to walk alongside people in their hep C journey.

Knowing I have a strong network behind me makes all the difference.

To me, EMPOWER is about real support and real voices. It gives people with lived experience the tools and space to lead in a way that actually makes a difference. It's about trust, respect, and making sure everyone can access care without being judged”

Grace – Hepatitis NSW Peer Worker

Peer-Implemented Hepatitis C Antibody Testing

Implementation of the Model and Linkage to Care

Process Overview

- Enrolment consists of informed consent, completion of a behavioural survey, eligible participants with no previous history of HCV are offered point-of-care HCV antibody testing (INSTI; 1-minute time to result) completed by the peer worker
- Participants who disclose previous history of HCV are offered immediate point-of-care HCV RNA testing (GeneXpert HCV Viral Load Fingerstick Testing; 1-hour time to result)
- Partnership with local healthcare teams means access to further workup and treatment generally available immediately or within a few days.

Clinical Partnerships and Wrap Around Care

Link to treatment and beyond

- Clinical partnerships are key to ensuring linkage to care and strong treatment pathways.
- Additional tests for treatment work up such as FibroScan, APRI, FIB-4, LFT, HBV, HIV can be attended on-site either by POC or venepuncture.
- Scripting available via telehealth or in person as soon as possible pending site processes.
- Collaboration with site coordinators at in-reach crucial to ensure patient follow-up as many don't have phones or stable contact.
- Treatment uptake fast and aiming for barrier-free.

Patient Journey

Case study – Pt1

- 31-year-old woman from an Aboriginal Background met on outreach 18 March
- Met with a peer worker and enrolled into study, disclosed risk factors include unstable housing, injecting drug use 2-3 times daily and not on OAT
- No prior history of HCV disclosed to peer worker– INSTI Ab test attended by peer worker, reactive (+ve) result
- Reflex RNA via GeneXpert HCV Viral Load, HBV, HIV and APRI provided immediately via venepuncture.
- Reimbursement of \$20 Coles/Myer gift card given
- Patient did not have a phone, however, through liaising with outreach location site, found to be a semi-regular visitor for drop in lunch – positive result delivered in person at outreach site.
- Nurse from site team met patient back at service on non-outreach day to provide filled script
- Patient commenced treatment on 15 April
- SVR pending next time patient presents to clinic or outreach

2023-2025 Snapshot

Sites n=11 Campaigns n=53 Participants n=721

Homelessness Hubs (n= 5 sites, 456 pts)

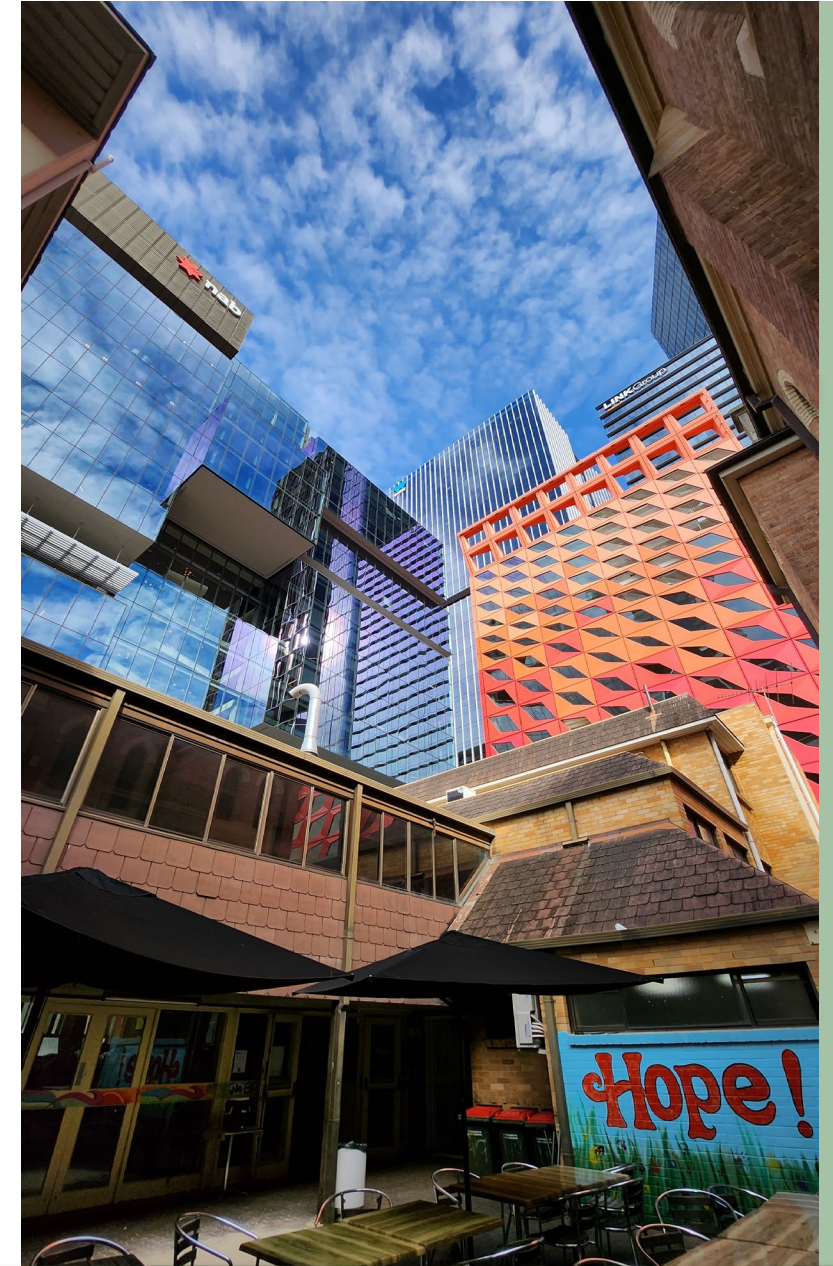
PARRAMATTA MISSION (pts n=258)
REV. BILL CREWS FOUNDATION (pts n=130)
NEWTOWN NEIGHBOURHOOD CENTRE (pts n= 25)
OZANAM LEARNING CENTRE (pts n= 24)
WAYSIDE CHAPEL (pts n=19)

Accommodation Services (n= 3 sites, 43 pts)

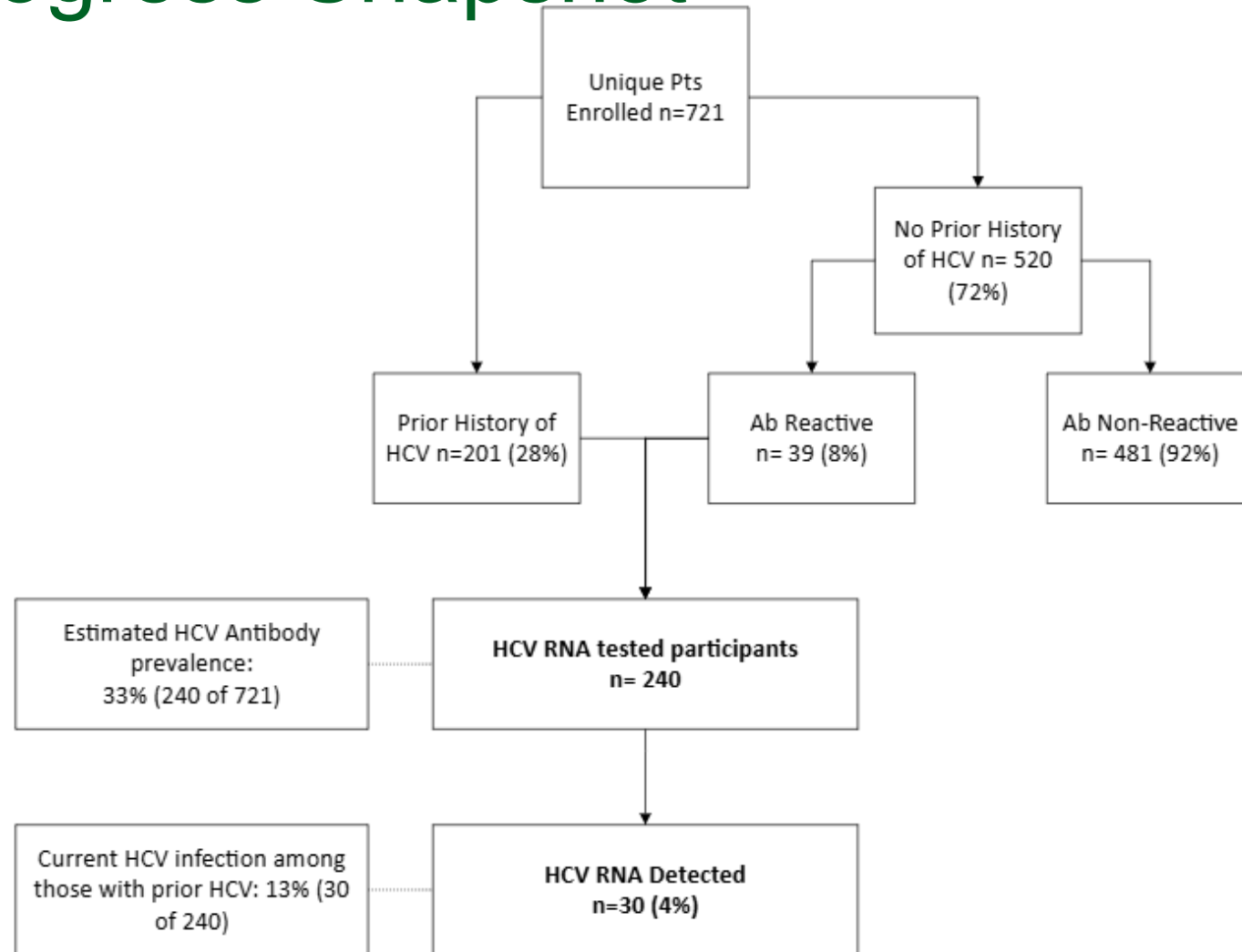
VINCENTIAN HOUSE (pts n=11)
NORTHCOTT TOWERS (pts n=8)
WESLEY EDWARD EAGAR CENTRE (pts n=24)

Residential Rehab/ Detox Services (n=3, 222 pts)

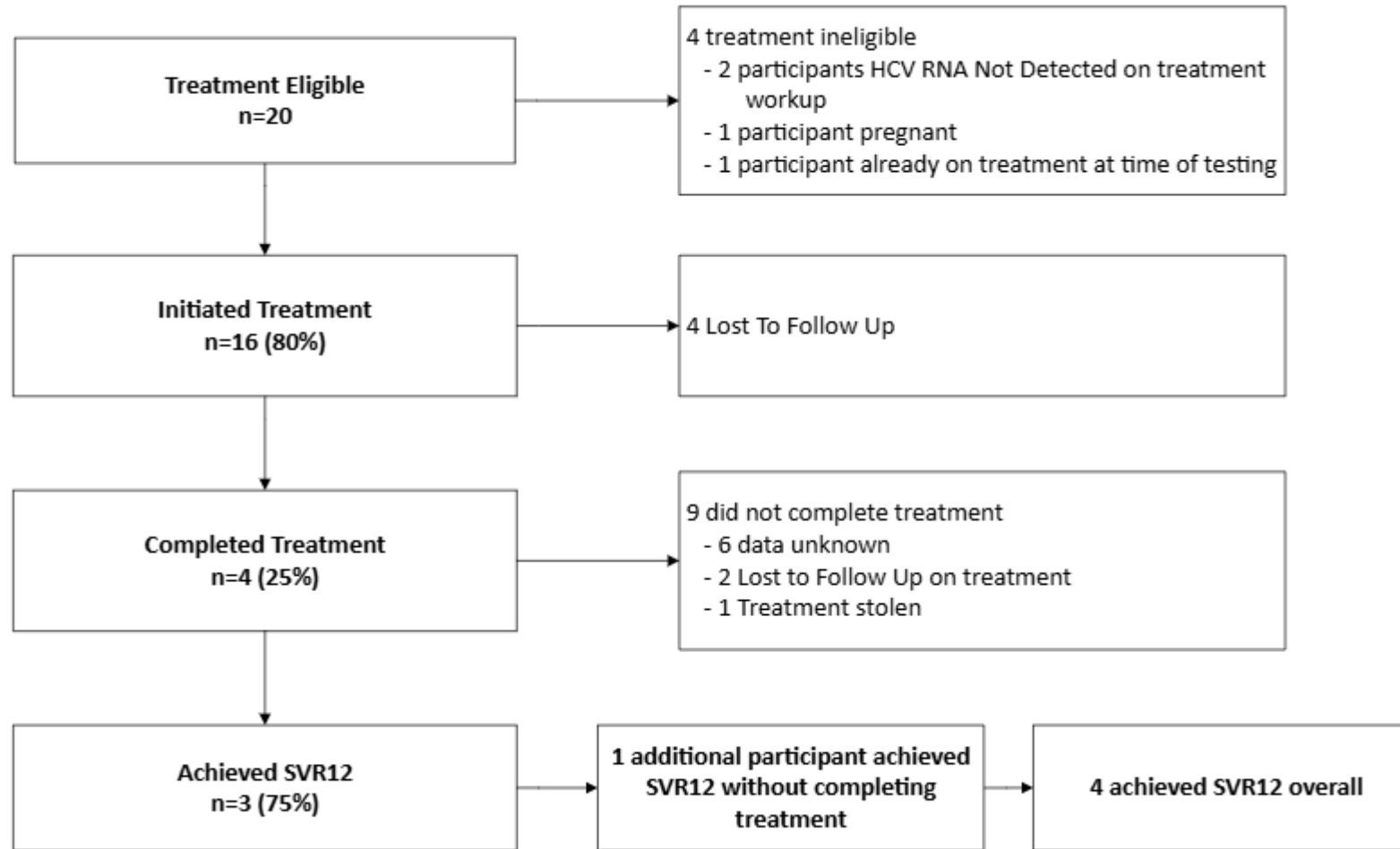
WHOS LILYFIELD (pts n=94)
JARRAH HOUSE (pts n=42)
WILLIAM BOOTH HOUSE (pts n=86)



NSW Progress Snapshot



NSW Treatment Uptake



Acceptability Through Multiple Visits

Participants with Multiple Visits

Total additional visit tests n=136

Total additional Ab tests n= 87

Total additional RNA tests n= 49

Ab+ve/Reflex RNA n= 2

Previous History of HCV n= 29

Total HCV RNA Detectable n= 7

Pts Eligible for Treatment n= 7

Pts linked to care n= 7

Case Study Pt2 – Initial EMPOWER visit 10/10/2023
51-year-old male, Aboriginal, disclosed history of incarceration and injecting drug use to peer. No previous history of HCV, INSTI Ab-ve.

Additional visit to EMPOWER 21/5/24, INSTI Ab+ve.
GeneXpert HCV Viral load reflex, positive, FibroScan performed 21/5/24, treatment commenced 6/6/24, SVR achieved 24/3/25.

Case Study Pt3 – Initial EMPOWER visit 23/4/24, 50-year-old female, CALD, no disclosed history of incarceration, injecting drug use, or HCV. INSTI Ab-ve.

Additional visit to EMPOWER 17/6/25, INSTI Ab+ve.
GeneXpert HCV load reflex, positive. Follow-up for FIB-4 and HBV/HIV 19/6/25, treatment commenced 20/6/25.
SVR pending.

Key Actions and Takeaways

Back Your Peers, Build Skills, Build Trust

Peers are skilled healthcare partners and a crucial link to eliminating hepatitis C. Embed them into every part of your work and continuously invest in upskilling and support

Find Your Allies, Forge Powerful Partnerships

Time with our clients is fleeting and precious. Keep your care in the moment to build trust and EMPOWER your community.

Let Data Lead, Stay Responsive, Stay Sharp

Track your outcomes, assess the acceptability of your methods, be flexible.



With thanks to:



Sydney
Local Health District



Rev
Bill Crews
Foundation



ST VINCENT'S
CENTRE FOR APPLIED
MEDICAL RESEARCH



Prince of Wales Hospital



Health
Western Sydney
Local Health District



WAYSIDE
CHAPEL



St Vincent de Paul Society
NSW
good works



Surry Hills
Neighbourhood Centre



Flinders
University | International Centre for
Point-of-Care Testing



Health
South Eastern Sydney
Local Health District



FHMRI
FLINDERS HEALTH & MEDICAL
RESEARCH INSTITUTE



UNSW
Kirby Institute



UNSW
SYDNEY