

CONTINUING THE DISCUSSION ABOUT PEER-NURSE PARTNERSHIPS IN HEPATITIS C ELIMINATION EFFORTS

Authors:

Richmond J¹, Dicka J², Watkinson S³, Wade A⁴, Rock J^{5,6}, Surey J⁵, Emily Adamson¹

1 Disease Elimination, Burnet Institute, Melbourne, Australia

2 Harm Reduction Victoria, Melbourne, Australia.

3 Victorian Infectious Diseases Service, Royal Melbourne Hospital, Melbourne, Australia.

4 Mid North Coast Liver Clinics, North Coast HARP, Australia

5 University College London Hospitals, NHS Foundation Trust, United Kingdom.

6 The Hepatitis C Trust, United Kingdom.

Background

Our team facilitated a workshop at the 2024 INHSU conference exploring the role of peer-nurse partnerships in hepatitis C elimination. Nurses rely on peers to engage and support people at risk, while peers depend on nurses for holistic clinical care. The evolving partnership is critical as the goal of elimination approaches.

Description of model of care/intervention:

The workshop featured presentations on two peer-nurse partnership models from Australia and the UK. Small groups discussed building a trusted peer/nurse relationship, defining scope of practice, considerations for interagency partnerships, and data collection methods to measure impact.

Effectiveness:

Thirty-five participants were involved in the workshop discussion which focused on building a trusted peer-nurse partnership that goes beyond token inclusion of peers, with a focus on addressing barriers created by professional hierarchies. The need for role delineation was underpinned by appropriate training to ensure peers and nurses are well equipped to achieve the shared purpose of delivering person-centred, stigma free care. Role delineation also leads to mutual respect and accountability. Interagency peer-nurse partnership models are characterised by clear boundaries, appropriate professional supervision, and psychosocial support for both peers and nurses. Additionally, a framework for peer career progression combined with the willingness of nurses to learn from lived experience are key to overcoming gatekeeping barriers. There was a desire to demonstrate the effectiveness of the peer-nurse partnership through appropriate data collection, with nurses and peers identifying a need for training on how and why data was being collected. A challenge highlighted was the risk of double-counting shared outcomes.

Conclusions and next steps:

There is need to continue the discussion about strengthening the peer-nurse partnership and learning from each other's experiences. The INHSU conference is a unique setting that allows peers and nurses to come together and discuss best practice for the partnership.