

HEP C U Later

*A Year of Review of Impact
April 2022 - March 2023*

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Introduction and Executive Summary

The *Hep C U Later* project continues to grow ever closer to achieving micro-elimination hepatitis C across NHS Addiction Provider Alliance (NHS APA) services by March 2024.

This year, we re-focused on how we could develop bespoke processes and support to help services reach micro-elimination. This included refining the data we provide back to services, re-introducing the Practitioner Forum with additional focus on how to achieve micro-elimination, the development of criteria 4 processes, and scaling up the use of the Cepheid machines (Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England).

The team have continued to produce resources to support services, such as the stigma toolkit, and have put a significant amount of effort into ensuring that when the Hep C U Later project ends, it leaves services in a position to continue the work and maintain micro-elimination. In February, we launched an NHS APA-wide testing and treatment campaign called 'Love Yourself, Get Tested', which saw activity across the majority of services in and around that week.

The Hep C U Later campaign has continued to grow in its reach on social media, reaching a global audience, and the brand continues to be recognisable, strong and associated with good quality.

One of the biggest achievements the project has seen is that testing rates across our member services have nearly doubled again this year. Additionally, we have seen a significant increase in those listed as having successfully completed treatment again this year. The substantial focus on data and data integrity has driven services forward and ensured a high quality of care. We are able to say at this current time that we have three NHS APA services who have achieved micro-elimination, with many others

extremely close to also achieving this milestone.

Nationally, the Hep C U Later project continues to collaborate with multiple organisations outside of the NHS APA on a number of workstreams, bringing us closer to our shared goal of micro-elimination, increasing the quality of hepatitis C interventions and ultimately impacting positively on service users' lives. One of the collaborations we are a part of is the national Hepatitis C Drug Treatment Service Provider Forum (DTS Forum) led by Gilead Sciences, which has gone from strength to strength. The DTS Forum has built on the Hep C U Later standards, released the BBV Standards for drug services, further refined the micro-elimination criteria and in March 2023, we won the HSJ Best Healthcare Analytics Project for the NHS award as part of the collaboration.

The Hep C U Later project continues to thrive thanks to the commitment from our national partners and, of course, the enabling effect of NHS England's Hepatitis C Elimination Programme. Our Joint Working Agreement (JWA) with Gilead Sciences, and the additional resources and support provided, have assisted our team to expand - the impact of which we are clearly seeing.

The Hep C U Later project team are proud to have supported our NHS APA services over the last 4 years and to have worked with so many committed individuals in the field. I want to extend a personal thank you to everyone who has been a part of the Hep C U Later journey for the contributions they have made. They do so giving extra, on top of extra, to improve the lives of the people accessing drug and alcohol services.

- Deanne Burch, Lead for Hep C U Later

Background

Hep C U Later is an initiative of the NHS Addiction Providers Alliance (NHS APA), which is an alliance of 18 NHS Trusts, 17 of which provide drug and alcohol treatment services across England, and is currently chaired by Inclusion, part of the Midlands Partnership University NHS Foundation Trust (MPFT).

This reach currently extends to over **49,000** people who use drug and alcohol services, across 17 NHS Trusts and 35 community drug service contracts, aligning with 15 of the 23 Operational Delivery Networks (ODNs). The NHS APA members provide community drug and alcohol services to approximately 35% of all drug and alcohol services users engaged in the English treatment system. The system-wide partnership ensures providers collaborate closely, share learning and co-produce solutions to ultimately drive forward quality care. **The NHS APA member NHS Trusts are listed below:**

NHS
South London and Maudsley
NHS Foundation Trust

NHS
Rotherham Doncaster
and South Humber
NHS Foundation Trust

NHS
Cumbria, Northumberland,
Tyne and Wear
NHS Foundation Trust

NHS
Surrey and Borders
Partnership
NHS Foundation Trust

NHS
inclusion

NHS
Central and
North West London
NHS Foundation Trust

NHS
North Staffordshire
Combined Healthcare
NHS Trust

NHS
Camden and Islington
NHS Foundation Trust

NHS
Greater Manchester
Mental Health
NHS Foundation Trust

NHS
Avon and Wiltshire
Mental Health Partnership
NHS Trust

NHS
Derbyshire Healthcare
NHS Foundation Trust

NHS
Pennine Care
NHS Foundation Trust

NHS
Nottinghamshire Healthcare
NHS Foundation Trust

NHS
Sheffield Health
and Social Care
NHS Foundation Trust

GMCA GREATER
MANCHESTER
COMBINED
AUTHORITY
NHS
in Greater Manchester

NHS
Leeds and York Partnership
NHS Foundation Trust

NHS
Mersey Care
NHS Foundation Trust

NHS
Midlands Partnership University
NHS Foundation Trust

NHS
Birmingham and Solihull
Mental Health
NHS Foundation Trust

The Hep C U Later Team

The extended joint working agreement (JWA) with Gilead Sciences for years 4 and 5 allowed the Hep C U Later team to expand:

Deanne Burch: Lead for Hep C U Later

Laura Hughes: Hep C U Later (Midlands and North) Hepatitis C Elimination Coordinator

Louise Hansford: Hep C U Later (South and London) Hepatitis C Elimination Coordinator

Candie Lincoln: Hep C U Later Project Manager

Robert Fair: Hep C U Later Data Analyst

Chris Heaps: Hep C U Later Data Analyst

Tony Mullaney: Hep C U Later Training and Development Coordinator

Hep C U Later have also benefited from additional staff resources via Inclusion²:

Eddie Taylor: Marketing and Communications Officer

Grace Masinuka: Programmes and Communications Lead for Inclusion

David Cupit: Commercial and Information Lead for Inclusion

Emily Jones: Marketing and Communications Team Manager

Danny Hames: Head of Inclusion and Chair of the NHS APA



Using Data and Information to Support Micro-elimination³

Our NHS APA member Trusts share hepatitis C National Drug Treatment Monitoring Service (NDTMS) data with the Hep C U Later project in line with information governance frameworks. This unprecedented level of sharing information across Trusts has allowed us to gauge progress towards micro-elimination and support them in focusing their work to achieve it.

The Dashboard on a Page Report:

The Dashboard on a Page (DOAP) report has been further refined in the last year, adding data which supports services to check for anomalies and ensure data accuracy. The coordinators use the DOAP alongside the NHS APA members to agree areas for improvement, but also to share where achievements have been made. Vitally, the DOAP provides the service with a snapshot of how far they are from the micro-elimination criteria.

Using the Dashboard on a Page report allows the Hep C U Later project to identify:

- Issues with NHS APA member data systems where hepatitis C data is not pulled through to NDTMS effectively.
- Where training may be required for staff to ensure the correct recording of hepatitis C data.
- Anomalies within the data sets.
- Which services may require additional resources or input.
- When services are close to micro-elimination.
- The level of testing required by each recovery worker in a service to reach micro-elimination.
- Cohorts of people who may need testing, re-testing or treatment.
- Missing results.
- Progress with testing and treatment.



Using Data and Information to Support Micro-elimination

The Dashboard on a Page Guide:

The Hep C U Later team have been working on a Dashboard on a Page Guide to enable the NHS APA Trusts to understand the data and how it is calculated. The guide has been delayed due to the addition of a number of fields, and will be released shortly. It has been written for data and BBV leads and service managers. It is hoped that in producing this guide, member Trusts can replicate the dashboard in their services if they wish, enabling them to continue monitoring their data in this way once the Hep C U Later project finishes. Some member Trusts have already adapted our reports to produce internal reports.

Micro-elimination - Criteria 4:

The Hep C U Later team, in collaboration with its members, have come up with a definition which can indicate a service is close to achieving micro-elimination criteria number 4 through the use of NDTMS data. This calculation looks at those who have been cleared by treatment, and we start this process when the service reaches 80%, it indicates the need for the coordinator to work with the service to look at the current status of people with an RNA positive result in more detail (as those who have recently commenced treatment will not be captured under 'cleared by treatment'). The coordinator, service, Gilead Sciences Patient Access to Care team, and the ODN collectively record when a person started treatment and this is added to the 'cleared by treatment' data to give a percentage. This is the most effective way of calculating criteria 4 amongst the multiple systems in use by all of our member Trusts. To give additional assurance and transparency when declaring micro-elimination, we have developed a spreadsheet where the exact details and breakdown can be viewed.

“The support that we have received from the Hep C U later team has been excellent. The team have supported our data analysis and have enabled us to have a definitive list of people who would still benefit from testing – this has enabled us to target our efforts where they are most effective.

Rob has managed our data analysis brilliantly and has managed to talk us through the complexities of it in a manageable way.

The team have also supported our testing events and scheme, both in person and by the provision of resources. The events have been both popular and effective.”

- Liz McCoy, Stockport Drug and Alcohol Service

Using Data and Information to Support Micro-elimination

“Just wanted to say a huge thank you back to Hep C U Later for all your support in helping us strive to achieve elimination of Hep C - we have benefited from the practitioner meetings, support with staff training, connecting us into the wider forum and shared goals and learning and a good boost of enthusiasm to do better!! The data work has been invaluable in helping us understand where we are on the elimination journey and ensure we target those most at need to evidence this - it's fabulous. We also have the delight of 'Candie' the Cepheid machine at present which is giving us that final push to elimination.”

*- Sue Doherty, Nurse Consultant,
Pennine Care NHS Foundation Trust*

NDTMS Data Work:

Hep C U Later have continued to refine how data is fed back to NHS APA Trusts in the form of NDTMS data returns.

These spreadsheets present a number of ways to assess or action the data, allowing the coordinators to support the services to approach the work in a structured manner.

The NDTMS returns can present information on numbers of people who fall outside of meeting the micro-elimination criteria, data anomalies, areas for audit, and missing or inaccurate results. One important area the NDTMS return indicates is individuals who may require a test in the next 3 months, allowing services to plan ahead and also maintain their micro-elimination status.

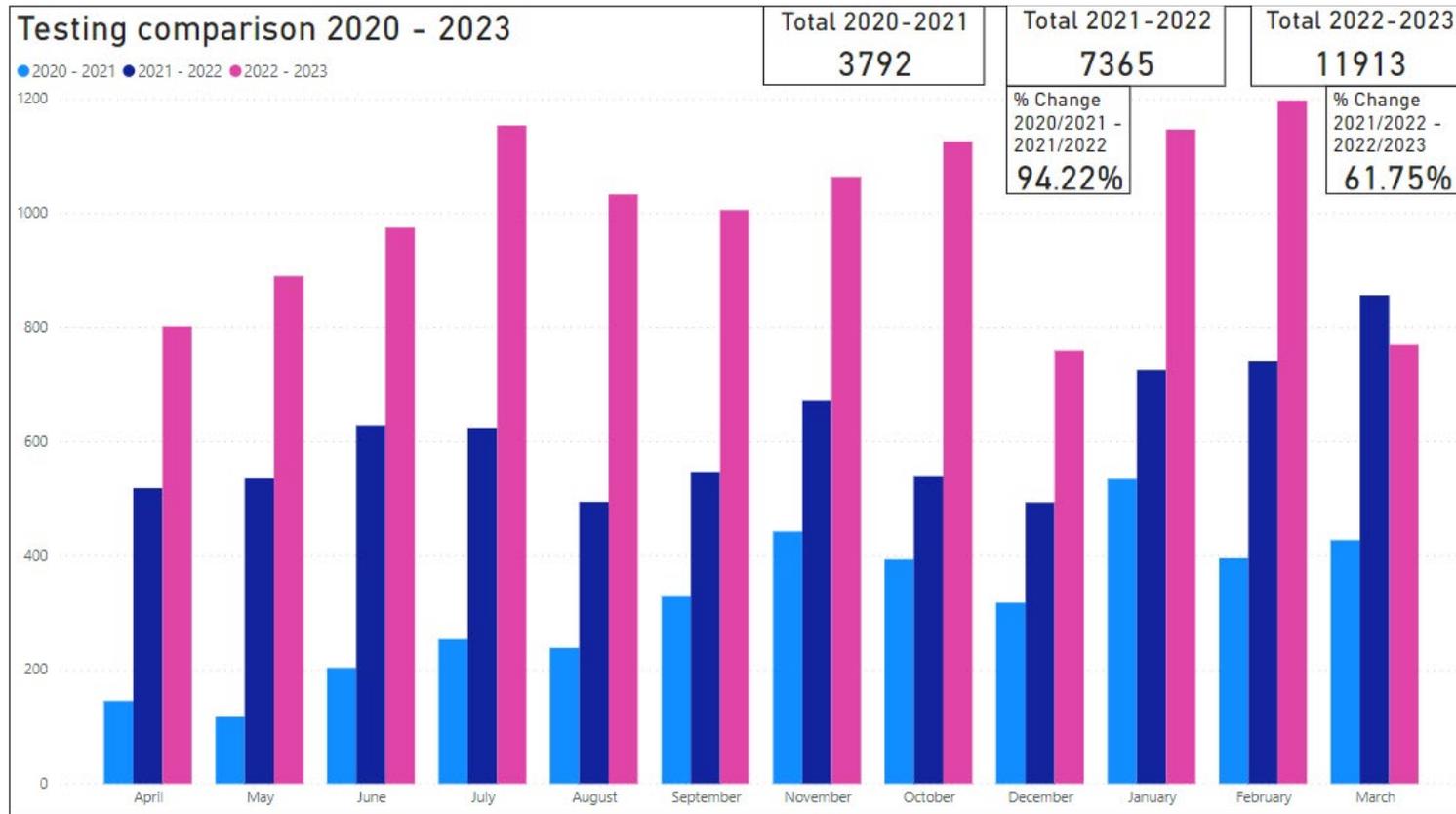
In late 2022, Hep C U Later drew together a number of services from across the drug and alcohol treatment sector, as well as NHS APA members, to discuss what data might be helpful in the future and set this out in a proposal to NDTMS for a future data set. This proposal is now going through consultation. It is hoped that the changes proposed can assist services in the future to better capture testing and treatment need.

Using Data and Information to Support Micro-elimination

Testing Data

The bar chart below shows the NDTMS testing data for the NHS APA for active service users for each year. (April to March, 2020-2021, 2021-2022 and 2022-2023).

A total of **23,070** hepatitis C tests have been taken over the last three years, and in the last year (April 2022 - March 2023) **11,913** tests have been taken.



**It is important to note that this data shows structured and active clients only, not those who have been discharged, and therefore testing overall will be a higher number. Also of note is that due to a delay in the more recently taken results being received, a lag can occur in the last 3 months the data captures. This means when each subsequent monthly report is compiled, there is an increase seen in these months. For example, the number of tests completed in the month of March is predicted to be higher than shown.*

Using Data and Information to Support Micro-elimination

April 2020–March 2021

3,792

Hepatitis C tests were taken across the NHS APA

April 2021–March 2022

7,365

Hepatitis C tests were taken across the NHS APA

April 2022–March 2023

11,913

Hepatitis C tests were taken across the NHS APA

23,070

Total of hepatitis C tests taken across the NHS APA between April 2020-March 2023



We have nearly *doubled* our testing every year of the Hep C U Later project



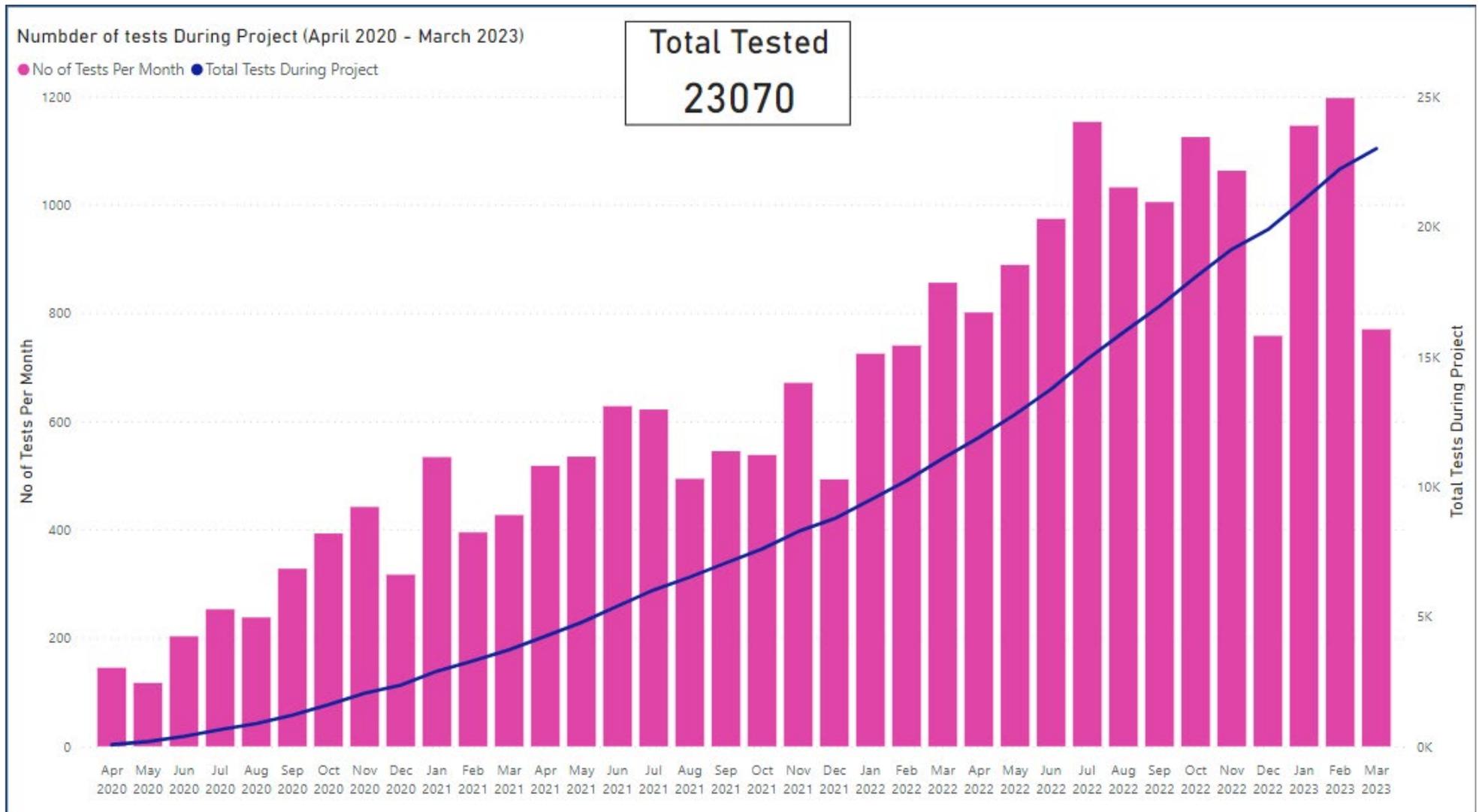
94.22% increase in testing over April 2020-March 2021 and April 2021-March 2022



61.75% increase in testing over April 2021-March 2022 and April 2022-March 2023

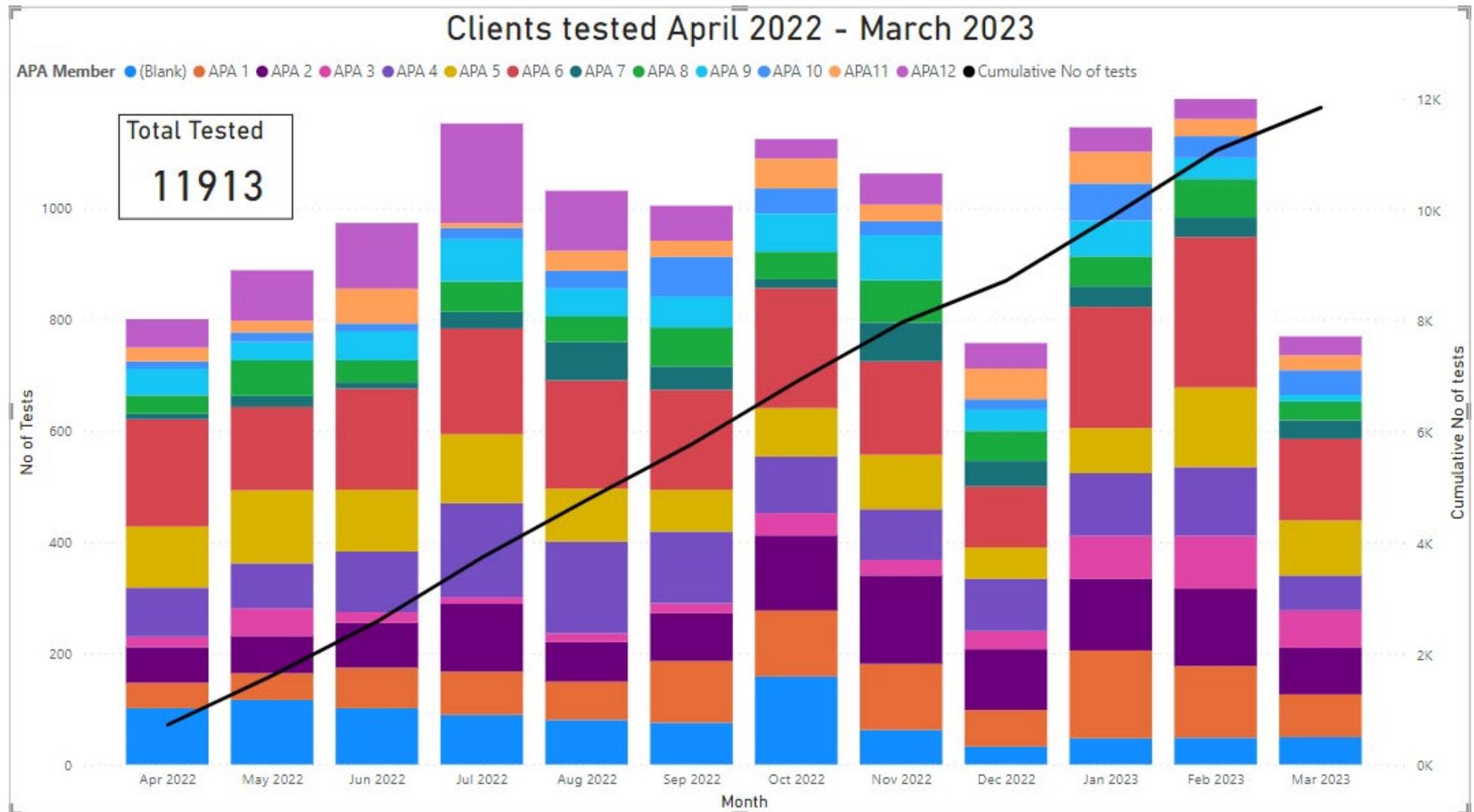
Using Data and Information to Support Micro-elimination

The bar chart below shows the hepatitis C testing numbers per month from April 2020 to March 2023, indicating a total of 23,070 tests taken over this three year period.



Using Data and Information to Support Micro-elimination

The stacked bar chart below shows the testing numbers per month for each NHS APA service, from April 2022 to March 2023. The black line is the cumulative number of tests over time.

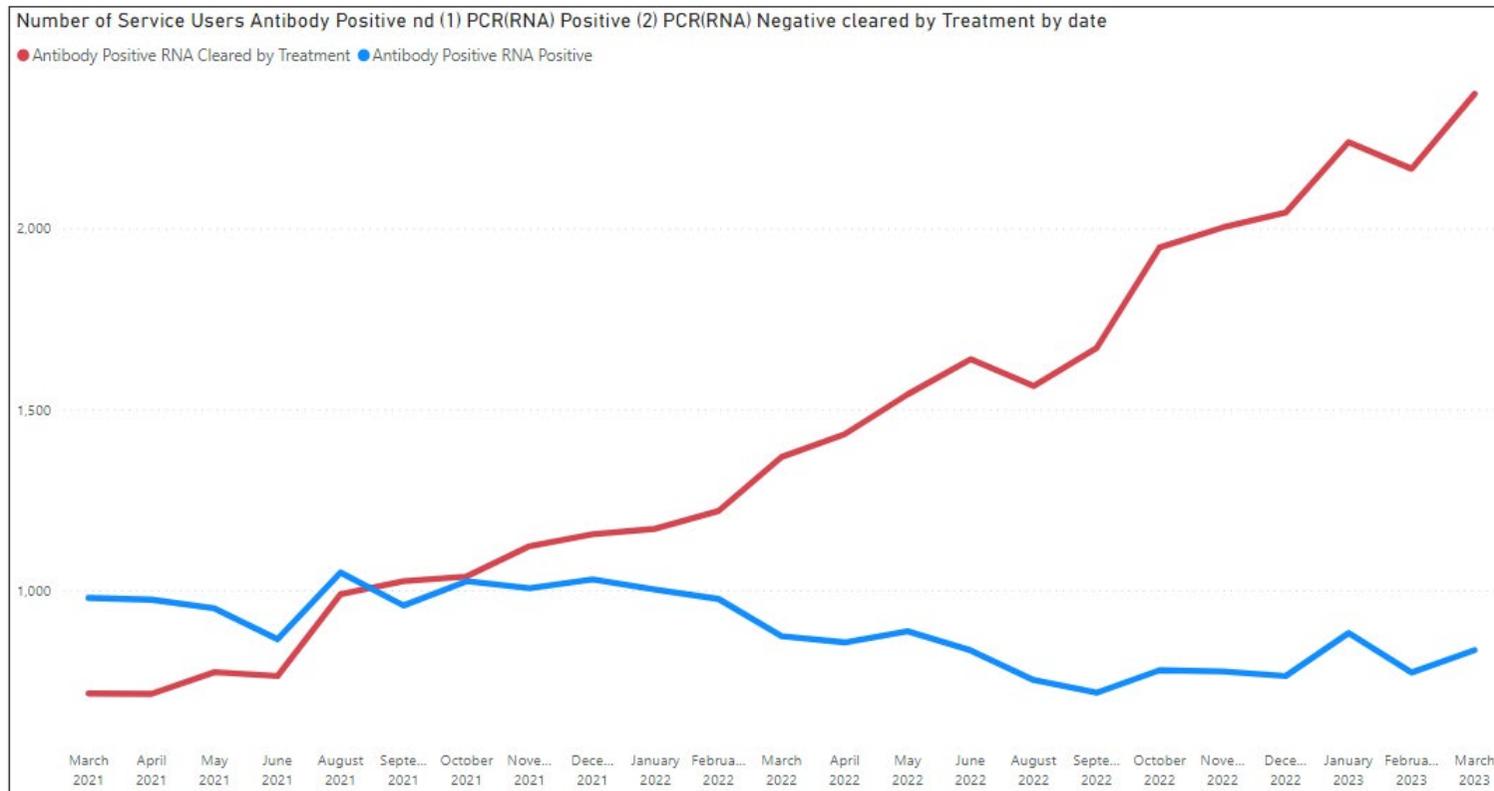


Using Data and Information to Support Micro-elimination

Treatment Data

The line graph below shows the number of people who have a status of hepatitis C antibody positive and RNA cleared by treatment (red line), and the number of people who have a status of hepatitis C antibody positive and RNA positive (blue line) within the period of March 2021-March 2023.

The total number of people listed as RNA positive across the APA on the 31st March 2023 was 851. This line graph shows that the number of people receiving hepatitis C treatment continues to increase significantly.



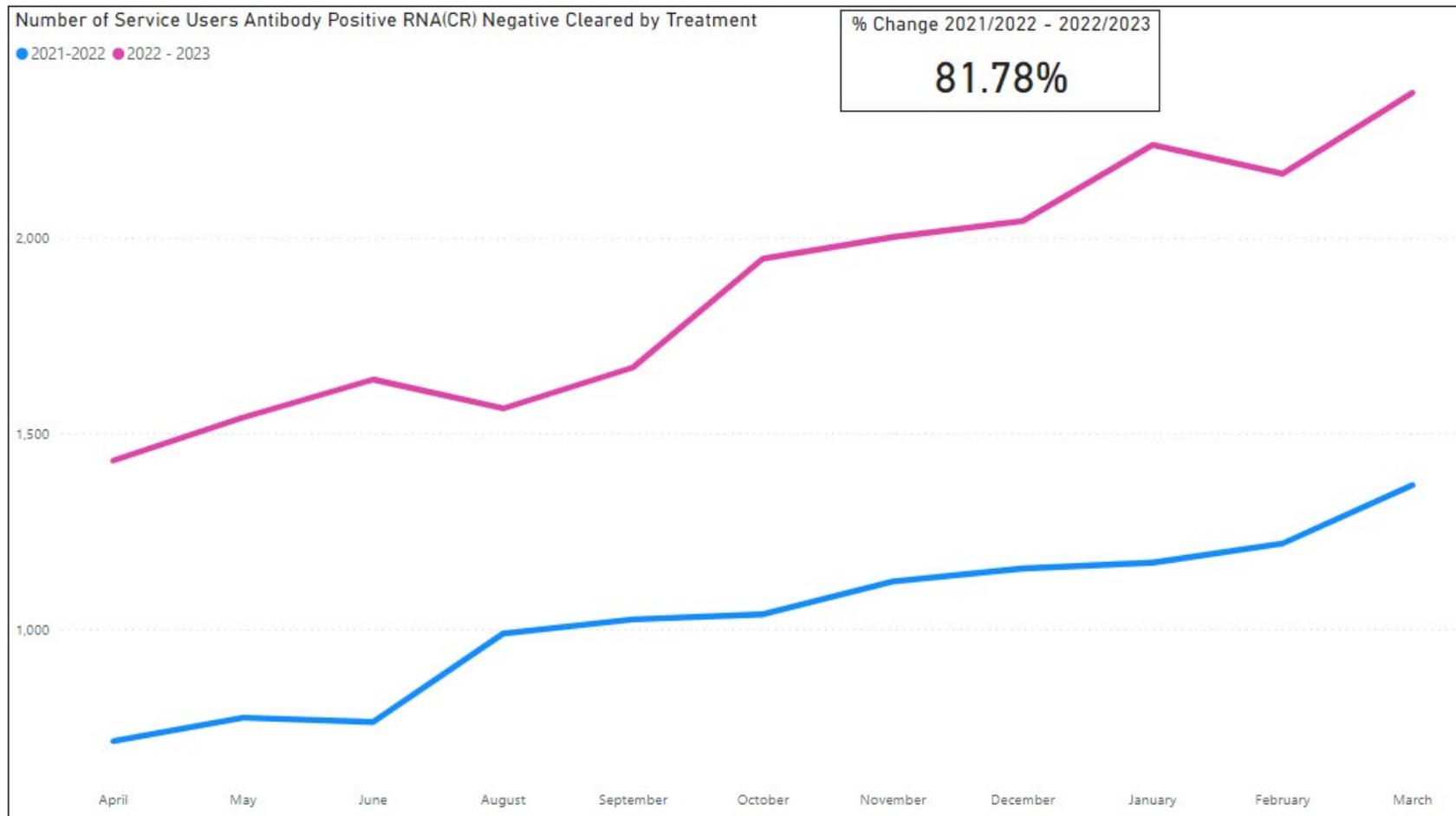
**It is worth noting that the number displayed on the graph will not include those who have treatment planned or have had treatment and are awaiting a sustained viral response test and therefore this has not yet been changed on the clinical systems. Therefore, the number of service users left to treat is lower than shown.*

Using Data and Information to Support Micro-elimination

The line graph below shows the number of service users with a status of 'RNA negative - cleared by treatment' across the NHS APA for the last two years as a month by month comparison (April 2021/March 2022 - blue line, April 2022/March 2023 - pink line).

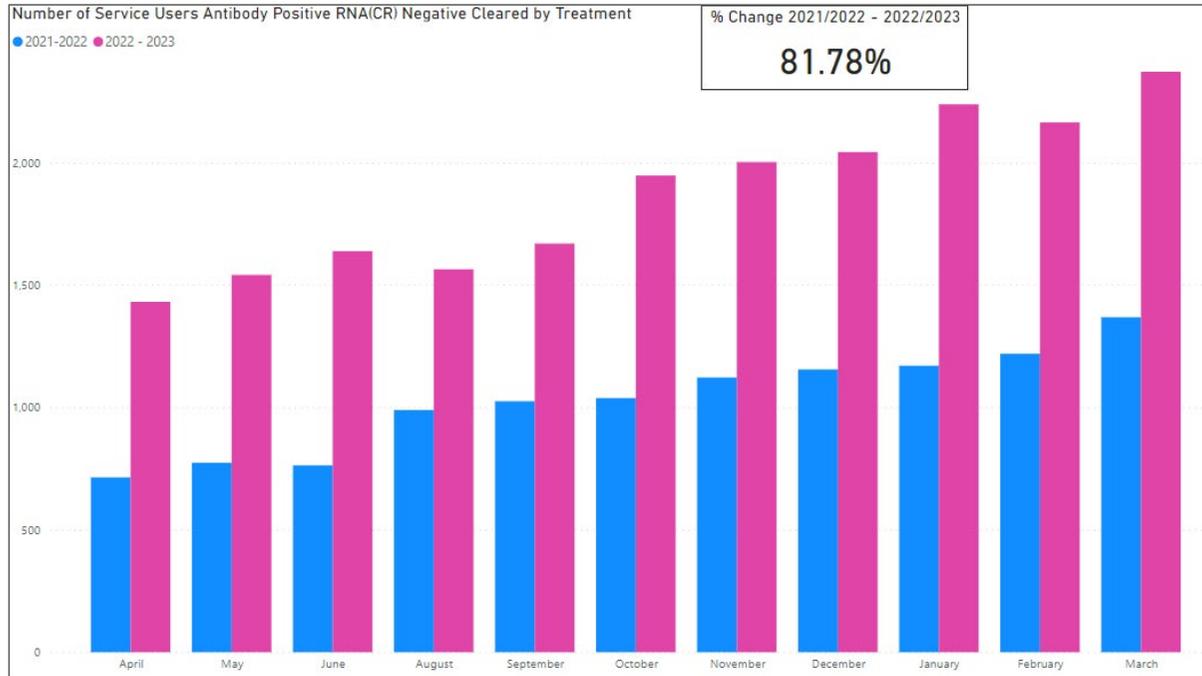
The percentage change for the total two years is 81.78%.

The number of those listed as 'RNA negative - cleared by treatment' has continued to increase steadily indicating that more people are having hepatitis C treatment.



Using Data and Information to Support Micro-elimination

The chart below is the same information as the previous listed page, but shown in a bar chart format for ease of comparison by year.



We have **significantly increased the number of those listed as 'cleared by treatment'** compared to the previous year.

Data Summary

Despite the challenges NHS APA member Trusts face in their day-to-day work, there has been a significant and encouraging increase in the number of tests carried out and the number of people undergoing treatment in comparison to the previous year. Our NHS APA members continue to demonstrate their commitment to hepatitis C micro-elimination through working with us to achieve data completeness.

Partnership Working

At Hep C U Later, we pride ourselves on our ability to work collaboratively with multiple organisations across the country. Some of our key work in the last year has included:

- **The Hepatitis C Trust** - Continuing to work in collaboration with The Hepatitis C Trust across NHS APA services to ensure service users have the best level of support possible, ensuring pathways are effective and collaboration can be undertaken to proactively outreach to service users in the community.
- **The Hep C National Drug Treatment Provider Forum⁴** - Working collaboratively with third-sector providers of drug and alcohol services across the country, not only when they have joint contracts with the NHS APA, but also on a wider scale through the Gilead Sciences led national Hepatitis C Drug Treatment Service Provider Forum, to make a positive impact on hepatitis C related interventions across the country.
- **Gilead Sciences** - Continual close working with Patient Access to Care managers at Gilead Sciences to ensure momentum, effective pathways, linkage to treatment, identify gaps in testing/treatment and ensure stakeholders are working together effectively.

“I can’t imagine how we would now be on the cusp of eliminating HCV without the amazing team from Hep C U Later. Their “on the ground” expertise has given us access to and support with treating some of the hardest to reach individuals.”

*- Mark Wright,
Consultant Hepatologist,
Wessex ODN*



Partnership Working

Some of our key work in the last year (continued):

- **The NHS England Hepatitis C Elimination Programme Team** – Collaborating on NHS England Hepatitis C Elimination Programme streams of work, and supporting the national Needs Assessment Project in 2022.
- **Operational Delivery Networks (ODNs)** - Continuing regular work alongside ODNs to ensure treatment pathways are streamlined, stakeholders are working collaboratively and data is shared effectively.
- **MSD & Cepheid⁵** - Ongoing collaboration with MSD and Cepheid using the Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England to accelerate testing and treatment across the country.
- **UKHSA** - Supporting services across the country to take part in the UKHSA's Unlinked Anonymous Monitoring Survey of People Who Inject Drugs. The benefits of this are to feed into the national picture of prevalence, but also to provide drug services with a localised picture of injecting related risk which can lead to local service delivery improvement.



“The hepatitis C elimination work across drug and alcohol services within the NHS Addictions Provider Alliance has been critical to ensuring we meet people’s needs wherever they are, minimising barriers to care and reducing health inequalities.

Utilising our partnerships has been central to this and together, we share resources which allow all of our organisations to improve upon what we deliver. This work can have a positive and lasting impact on people who access drug and alcohol services – their health and their wellbeing.

The Hep C U Later project continues to deliver on its objectives of reducing the barriers that exist in testing and treatment pathways across multiple systems, and continues to tackle stigma through its campaign.”

- Danny Hames, Head of Inclusion and Chair of the NHS Addictions Provider Alliance (NHS APA)



Hep C U Later Project Review

Laura Hughes oversees the majority of the Midlands and the North NHS APA services. Below is a breakdown of the progress over the last year.

Greater Manchester Mental Health NHS Foundation Trust – Achieve Services: Bolton, Bury, Salford & Trafford

- Bespoke training packages offered for all four sites, which has resulted in a huge increase in testing.
- GMMH currently have one of the Cepheid GeneXpert machines, with the aim of quickly identifying service users who are hepatitis C positive.
- The pathway into treatment continues to be developed, ensuring no one is left behind across the varied geographical locations.
- A staff member has been employed to help with admin and data inputting of test results. This ensures continued data efficiency and integrity from the data provided by the Hep C U Later team.



“The support offered by Hep C U Later, and specifically Laura, has been overwhelming positive and productive. Laura and the team are always available and have been both flexible and creative in driving this agenda forward.

Regular steering groups to monitor progress, explain data, delivering training packages and away days, on-site support for test and treat events, all contributing to real progress in achieving our shared aspirations in the fight against Hep C across Bolton Bury Salford and Trafford.

Laura’s energy is inspiring, and this has “infected” all the staff team to focus on this life changing project.”

- Tonya Nettleton, GMMH

Hep C U Later Project Review

Mersey Care NHS Foundation Trust – Brook Place

- Hep C U Later have seen incredible engagement from both the service and the ODN.
- Data work has been undertaken where there were anomalies identified and these were rectified immediately.
- The service embraced ‘Love Yourself, Get Tested’ week and there were ‘Love Yourself’ self-care packs given out to those that attended for testing.
- Testing, referral, and treatment is now business as usual for the whole team.
- The service have utilised the Cepheid GeneXpert machines. This has enabled the team to complete rapid testing and SVR testing for service users during outreach or test and treat events with the ODN.
- The BBV lead for the service has supported the Hep C U Later Practitioner Forum with a best practice example.
- Micro-elimination at Mersey Care is imminent.



“The collaborative work Mersey Care and the Hep C U Later team have done together has been vital in the drive to us achieving micro-elimination. We have had regular meetings, offering support and brainstorming different ways of approaching clients into engaging with testing, which has proven successful.”

- Hayley Curran, Mersey Care
NHS Foundation Trust

Hep C U Later Project Review

Pennine Care NHS Foundation Trust - Stockport

- A huge amount of data work has been undertaken to identify and correct any historic data anomalies.
- Hep C U Later have provided the team with training on dry blood spot testing and the micro-elimination criteria. The team were extremely engaged.
- The service engaged in the 'Love Yourself, Get Tested' events with two 'Afternoon C' hepatitis C testing events. They were very successful in engaging service users and the surrounding community.
- The service are planning to use the Cepheid GeneXpert machines imminently, which will support them in reaching micro-elimination, which they are moving closer to every month.



Sheffield Health & Social Care NHS Foundation Trust - START

- Dry blood spot testing training and hepatitis C awareness training has been provided and the service has a testing pathway in place that ensures both routine and opportunistic testing.
- Data has been submitted which has helped identify a number of data anomalies related to system issues that were able to be rectified and additional work is ongoing to further improve data quality, so that the work which is being completed can be reflected back in the data.
- There is ongoing communication with the ODN with regards those who require testing and treatment.
- The BBV lead for the service has supported the Hep C U Later Practitioner Forum with a best practice example.

Hep C U Later Project Review

Rotherham, Doncaster & South Humber NHS Foundation Trust – Aspire

- RDaSH have seen an increase in testing rates and the service continue to remain committed to reaching micro-elimination.
- A great deal of work has been carried out to improve the processes for data inputting. This work has helped to identify and minimise data anomalies.
- Hep C U Later have two upcoming training events planned for staff on dry blood spot testing, hepatitis C and the micro-elimination criteria.
- Hep C U Later attended The Recovery Games and plan to attend and support this again in the coming year.

North Staffordshire Combined Healthcare NHS Trust – Stoke CDAS

- Sadly, Nigel Lee, a vital and highly regarded member of the Stoke CDAS team passed away in 2022. Nigel was a fierce advocate for the hepatitis C elimination work. Despite their major loss, the Stoke team are continuing to engage service users into testing.
- Training on dry blood spot testing and the micro-elimination criteria has been delivered with over 30 staff in attendance, all of whom were incredibly engaged with the drive to eliminate hepatitis C.
- The team are continuing to engage with the Hepatitis C Trust to see where peers are able to support those who are starting treatment.
- A significant piece of data work has been undertaken to identify any historic data anomalies.

Hep C U Later Project Review

Nottinghamshire Healthcare NHS Foundation Trust - Nottingham Health Shop - Nottingham Recovery Network, Clean Slate & Shared Care

- The service were awarded funding for a homelessness project in order to continue to engage those with unmet needs who sit outside of services and who are potentially at risk of hepatitis C.
- The service has shown a very responsive level of engagement with Hep C U Later and the continual data work to ensure that the work on the ground is accurately reflected within data submissions.
- The service have completed extensive outreach to engage all service users. They have used an integrated approach to GP surgery work to ensure that service users are tested regularly and ensuring all those who have a diagnosis of hepatitis C are referred and followed up. There has also been increased engagement with the Hepatitis C Trust peers.
- Hep C U Later have delivered a presentation on the service's progress towards micro-elimination to the operational managers.

The Nottinghamshire Clean Slate service achieved micro-elimination in March 2023.



“As the team leader of The Health Shop, I can't really put into words the amount of support that our coordinator, Laura Hughes has given to the service, the team and to me personally. There is no way we would be as far along with the project as we are, without her help and support and because of this, we have seen the impact it has made on our service users...

...Our service is small and quite unique. It can sometimes be hard to feel our service is understood. Laura has increased the confidence of the staff team, especially with respect to our levels of innovation and creativity. She's raised our profile nationally and our experience with Hep C U Later has been so positive.”

- Louise Wilkins, The Health Shop, Nottingham

Hep C U Later Project Review

Birmingham & Solihull Mental Health NHS Foundation Trust – Wolverhampton (RNY) & Solihull (SIAS)

Solihull:

- Solihull have demonstrated a fantastic level of engagement and a real progression towards micro-elimination.
- Hep C U later have provided Solihull with training on dry blood spot testing, hepatitis C and micro-elimination.
- Data-specific work has been undertaken that has enabled the service to identify service users who may have otherwise been missed.
- The service embraced ‘Love yourself, Get Tested’ week with decor all around the building. Significant numbers of tests were taken on the day of their event, which resulted in a testing number 4 times higher than their average.
- Further testing events were held following this event which additionally encouraged people to engage into structured treatment at the service.
- The Cepheid GeneXpert machine was fully embedded and the service plans to have the machine again in the near future.



“SIAS are so very grateful of the support the Hep C U Later project have given us here in Solihull. We have always considered our community to be of lower risk in comparison to our immediate neighbouring boroughs however having the dedicated time and support from the project and team has been amazing.”

- Sarah Keeling, SIAS

Hep C U Later Project Review

Birmingham & Solihull Mental Health NHS Foundation Trust – Wolverhampton (RNY) & Solihull (SIAS)

Wolverhampton:

- Work has been undertaken by the service around data anomalies as well as looking at which targeted interventions are required.
- The service has delivered hepatitis C awareness training to alcohol teams in the hospital, highlighting the importance of testing those who may not have been offered testing otherwise. This has resulted in a hepatitis C infection being identified, thereby showing the importance of testing everyone, even if there are no significant risk factors initially identified.
- The team have demonstrated tremendous engagement in terms of testing, with testing doubling following the introduction of a Cepheid GeneXpert machine which helped to identify further diagnoses.
- Hep C U Later are working with service and the Hepatitis C Trust to identify where further support can be given to service users.

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

(The CNTW service has been overseen by Louise Hansford)

- Across CNTW, bite-size (mostly virtual) hepatitis C training has been delivered.
- Power BI maps have recently been developed and deep data dives have been undertaken.
- Hep C U Later have continued to engage with senior stakeholders around the elimination initiative.
- Hep C U Later have encouraged the testing of service users who may be at a higher risk of infection, with the use of the Hep C U Later incentive vouchers.*
- Hep C U Later have shared the service data and provided interpretation of that data to individual services to support in service delivery planning.

Hep C U Later Project Review

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

Northumberland & North Tyneside:

- Hep C U Later have conducted face to face training for key workers across the services in these areas.

Northumberland:

- Cepheid Training has been provided to nominated clinical staff. The Cepheid GeneXpert machines have recently been placed in the service. Hep C U Later have offered to assist with future high-intensity testing events to support their drive towards elimination. Deep dive data work has identified changes to the business process for BBV recording.

“Louise and her team have been a fantastic support to NRP. She has come to our team now on several occasions and shared so much information with us. They have been so enthusiastic and a fabulous source of motivation for the team.

We have learnt such a lot and have made some really strong plans for helping to eradicate Hep C in Northumberland.”

- Sue Macfarlane, Physical Health Nurse, Northumberland Recovery Partnership

“The Hep C U Later Programme has provided amazing support to Cumbria, Northumberland, Tyne and Wear’s (CNTW) Addiction Services over the last year and has had a significant impact in supporting our goals around improving staff and service user awareness as we strive towards micro-elimination of hepatitis C.”

- Dr. Margaret Orange (DProf), Associate Director (Addictions Governance)

Hep C U Later Project Review

The NHS APA services in the South and London are overseen by Louise Hansford. Below is a breakdown of the progress over the last year.

Inclusion (Part of Midlands Partnership University NHS Foundation Trust) - Hampshire, Isle of Wight, Wessex ODN Clinical Van, Buckinghamshire, Telford and Thurrock

- A bespoke hepatitis C report has been developed and implemented across Inclusion, allowing for a real-time snapshot to enable targeted work.
- Liver models* and resources* have been purchased for all sites to improve education and awareness.

Thurrock:

- Through closely monitoring data and working with the Hep C U Later coordinator to plan ahead for testing, they have maintained their micro-elimination status since then. The team have been committed to sustaining micro-elimination.
- The service are extremely responsive each month in ensuring service users' yearly blood borne virus reviews are carried out. They have also contributed to the Unlinked Anonymised Monitoring Survey of People Who Inject Drugs.

Inclusion Thurrock achieved micro-elimination in June 2022, which they declared in July 2022.

Telford:

- Hep C U Later have hosted events with the ODN and van team, and carried out deep data work. This has resulted in them moving ever closer to micro-elimination. The team are committed to increasing testing, and vouchers* have been given to service users. They are also engaged with the Hepatitis C Trust.

“Hep C U later have proven to be an innovative and determined organisation that have supported us to screen increased numbers of clients for Hep C. Thank you and well done!”

- Lauren Cooper, Community Practitioner, Telford STaRS

Hep C U Later Project Review

Inclusion (Part of Midlands Partnership University NHS Foundation Trust) – Hampshire, Isle of Wight, Wessex ODN Clinical Van, Buckinghamshire, Telford and Thurrock

Buckinghamshire:

- Inclusion's Buckinghamshire service, One Recovery Bucks, are working really closely with the ODN, have clinics on site, and have used the Cepheid GeneXpert machines.
- Vouchers have been used as incentives* and they have also contributed to the Unlinked Anonymised Monitoring Survey of People Who Inject Drugs.
- They are currently very close to achieving micro-elimination, which they will likely hit in April/May 2023.



“The support received from One Recovery Bucks and in particular Jade has been invaluable within Buckinghamshire. They have not only facilitated the diagnosis of hepatitis C through their continued testing programme in a place familiar to them, but also treatment by onward referral to hospital services and supporting individuals through the treatment. Together we have achieved micro elimination and it is the partnerships and collaboration that makes it successful.”

- James Maggs, Hepatology Consultant

“As we all work towards Hep C elimination our ODN has found the Hep C U later dashboards a vital tool in helping us target our clinics and outreach. Louise's willingness to share her wealth of knowledge at our ODN meetings continues to develop our partnership working across the region.”

- Lizi Sims, Community Hepatology Nurse Manager, Oxford University Hospitals NHS Foundation Trust

South and London

Hep C U Later Project Review

Inclusion (Part of Midlands Partnership University NHS Foundation Trust) – Hampshire, Isle of Wight, Wessex ODN Clinical Van, Buckinghamshire, Telford and Thurrock

Portsmouth:

- Inclusion's Portsmouth service were a new service to Inclusion from June 2022. They have hosted three testing events and Hep C U Later have been working with them to complete deep data dives. They also undertook a high-intensity testing event for 'Love yourself, Get Tested' week.

Hampshire (excluding the Aldershot service):

- NHSE funding was secured alongside Two Saints to run a Homeless Programme with a Hepatitis C Assertive Engagement Worker for Gosport, Havant and Fareham.
- Hep C U Later have worked closely with the Hampshire team to carry out targeted work. They have used vouchers*, received training, and bespoke reports.
- Hep C Hants continues to work tirelessly to engage service users into testing and treatment.
- They have also contributed to the UAM and Ethos study (Pharmacy UAM).
- They have presented their work at South East Public Health Conference.
- All of the individual services (or hubs) within Inclusion Hampshire are close to micro-elimination, and several hubs will declare micro-elimination by April/May.



“Our staff teams across Hampshire have worked collaboratively and effectively with Hep CU Later throughout the year. Our experience of the service has been invaluable to us that created a shared vision and aspirations to educate people, offer hope and to ultimately give lifesaving treatment to the people.”

- James McDermott, Service Manager, Inclusion Recovery Hampshire

South and London

Hep C U Later Project Review

Inclusion (Part of Midlands Partnership University NHS Foundation Trust) – Hampshire, Isle of Wight, Wessex ODN Clinical Van, Buckinghamshire, Telford and Thurrock

Aldershot:

- The ODN carry out regular screening events on their van. A liver cirrhosis pilot is currently underway at Aldershot. Hep C U Later have supported with deep dive data work which has now been completed, and all service users who were hepatitis C positive have now been treated.
- The Aldershot service is very close to micro-elimination.

Isle of Wight:

- Several high-intensity test and treat events have been delivered with regular testing clinics also in place at the service.
- Due to low attendance at hospital appointments for hepatitis C treatment and limited capacity at the local hospital the Wessex ODN Clinical Lead, Dr Mark Wright, agreed to release his senior nurse Liz Burge and ODN pharmacist Yun Kim to run a treatment clinic at the Inclusion IOW service. The clinics were planned for directly after a testing and engagement event to maximise attendance. New infections, reinfections and instances where some may not have taken the full course of treatment, which may otherwise have been missed, have been picked up through this process. This model has been very successful and a high number of people have now started treatment.
- The service have also contributed to the Unlinked Anonymised Monitoring Survey of People Who Inject Drugs.
- The IOW service is getting closer to micro-elimination.



Hep C U Later Project Review

Inclusion (Part of Midlands Partnership University NHS Foundation Trust) – Hampshire, Isle of Wight, Wessex ODN Clinical Van, Buckinghamshire, Telford and Thurrock

Wessex Clinical Van

- The Wessex Clinical Van is a Wessex ODN initiative which supports outreach hepatitis C testing and treatment across third sector organisations and services within Inclusion (part of Midlands Partnership University NHS Foundation Trust). The staff team operating the van are managed by Inclusion, therefore, it has been included in this report.
- Hep C U Later have continued to provide operational support to the Wessex Clinical Van, supporting the strategic approach and programme planning of the work carried out on the van.
- The Wessex Clinical Van has continued to grow in its reach across the region, taking testing and treatment to individuals who are both open to drug and alcohol services, and those who are not.
- The Wessex Clinical Van continues to meet people's needs through not only offering hepatitis C testing and treatment but many additional interventions aimed at reducing harm.
- Hep C U Later coordinated the NHSE needs assessment project for the whole of the Wessex ODN.



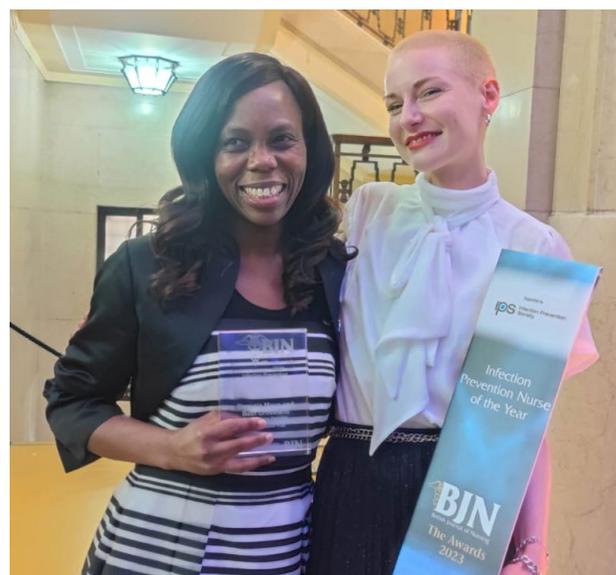
South and London

Hep C U Later Project Review

Central & North West London NHS Foundation Trust – Hounslow, Ealing, Hillingdon, Brent, Milton Keynes

- The Cepheid GeneXpert machine has been used across Hounslow, Ealing and Hillingdon. CNWL have purchased their own now due to the success of its placement.
- Training events and deep data dive work has been completed across Hounslow and Hillingdon. Year 3 monies were used to invest in additional data time to address 'data drop-out' points, collate historic data, and ensure all data makes it onto NDTMS.
- Innovation money* was used for bank monies to data cleanse and establish new business processes and they have on site treatment clinics.
- CNWL has been actively engaged in European Testing Week, the NHSE Needs Assessment Project and 'Love Yourself, Get Tested' weeks.
- Staff in the service have received hepatitis C training.
- The service supported Hep C U Later in the micro-elimination criteria work and two of their nurses won the BJN Infection Prevention Nurse of the Year award.
- Veronique Walsh (General Manager, UK and Ireland at Gilead Sciences) visited the Hounslow service to meet staff and support the training for the needs assessment.

The Hillingdon service is extremely close to micro-elimination and the Hounslow service achieved micro-elimination in March 2023.



South and London

Hep C U Later Project Review

Central & North West London NHS Foundation Trust – Hounslow, Ealing, Hillingdon, Brent, Milton Keynes

“CNWL have had superb support from the Hep C U Later team, which has enabled us to turn our treatment results around. This has so importantly empowered our teams to put blood borne virus firmly on the map, evidenced by our achievement of hep c micro-elimination across Hounslow. This achievement made public when two of our nurses Eugenia Moyo and Beth Crossfield won the British Journal of Nursing Award.”

- Teresa Wirz, Head of Addictions

“The support and enthusiasm from the Hep C U Later team, enabled two of our nurses from CNWL Addiction Teams to be recognised for their work at this year’s British Journal of Nursing as Infection Prevention Nurse(s) of the year. This was due to the tremendous collaborative partnership working from all partners and stakeholders.”

- Eugenia Moyo, Addiction Nurse Practitioner, ARC Hounslow

“I have really liked working alongside the Hep C U Later team! Louise is always very helpful and knowledgeable. It is amazing to see the live data and is always helpful to track what areas need to be look at.”

- Faye Martin, West London Peer Programme Manager, Hepatitis C Trust

South and London

Hep C U Later Project Review

South London & Maudsley NHS Foundation Trust - Richmond, Wandsworth, Lambeth, Bexley

- Rob in Lambeth has been instrumental in helping Hep C U Later compile accurate reports and understanding why systems report unknown results. Deep data cleansing work has been undertaken and the service system has had an upgrade. The service is working really closely with the Hepatitis C Trust.
- Hep C U Later have visited three of the sites and supported the ODN with their van.
- Incentives* have been used successfully.
- Intensive work with data and systems has been carried out across Wandsworth and Richmond.
- The ODN van has been initiated and is linking in with the team.

Sadly, last summer, Grace Makoni passed away after a short illness. Grace worked for SLaM for over 22 years and devoted herself to her career, her colleagues and our patients. She was an incredible advocate for Hep C U Later and was involved from the very start. Siobhan Jackson has since taken over the hep C work and we have seen the initiatives flourish under her leadership.

“Hep C U Later, have been integral within Richmond & Wandsworth Community Drug and Alcohol Services (RWCDAS) goal to achieve micro elimination...The goal is tough, the external stressors on clients, staff and services often make the goal even harder to achieve or even consider. Louise and the team have been beyond understanding of this and have been a source of motivation throughout my time here at RWCDAS.”

*- Katy Elsdon, Harm Reduction Nurse,
Richmond & Wandsworth Community
Drug & Alcohol Service (SLaM)*

Hep C U Later Project Review

Avon & Wiltshire Mental Health Partnership NHS Trust – Dorset Reach, BaNES, Bristol Roads

Dorset:

- Bespoke data reports have been compiled and deep data systems work has been conducted.
- Hep C U Later have delivered dry blood spot testing and in-service hepatitis C training.
- The service have delivered multiple data informed testing events and simplified pathways for treatment, as well as implementing a multi-disciplinary team meeting for service users.
- The ‘find a friend’ scheme is ongoing, vouchers* have been used effectively and the team have supported nurse-led clinics.



Bath:

- Following the pathway workshop led by Gilead Sciences, a group was formed who actively meet to discuss progress on micro-elimination. This group is a true collaboration of multiple stakeholders and not only consist of BaNES service staff but also a commissioner, representation from OHID and peers. Regular meetings are additionally held with the commissioning team.
- Vouchers* have been utilised well to improve progress towards elimination.



South and London

Hep C U Later Project Review

Avon & Wiltshire Mental Health Partnership NHS Trust – Dorset Reach, BaNES, Bristol Roads

Bristol:

- A jointly funded post with the ODN meant a Hep C Assertive Engagement Worker was employed. Georgia Woodcock has been in this role and she along with the rest of the team have had a significant impact on the number of people supported into treatment. 83 people have been treated in this period of time.
- Multi-agency stakeholder meetings have been underway and deep data work has been completed on site with regular reviews.
- A multi-stakeholder group that meets monthly, and in person quarterly, has been created and this has allowed for careful tracking of all service users commencing hepatitis C treatment and crucially reflects this accurately on the data. The team are focusing the group on clearing the backlog (even if found in A&E for example, being part of this group means this is captured at BDP, so therefore it is a true reflection of who is left to treat).
- There is work ongoing engaging with the ODN to ensure pathways are efficient and highlighting quickly where there is any duplication (e.g. additional phone calls). There is some great linkage with all of the other elimination initiatives.

Surrey and Borders Partnership NHS Foundation Trust – i Access North West, i Access South West, i Access East

- Regular meetings are held with the commissioning team and a full multi-stakeholder meeting is held bi-monthly.
- The data lead from i Access has been highly supportive of the micro-elimination work and supported the Hep C U Later team with the micro-elimination criteria development.
- A monthly data sharing meeting is held with the ODN and data cleansing meetings regularly take place.
- The team are linked in with the van team to do targeted testing days at various locations.

National Work

'Love Yourself, Get Tested' week

From the 13th to the 17th of February 2023, Hep C U Later ran the NHS APA 'Love Yourself, Get Tested' week. This week saw a push on testing, engagement in treatment, data work and education across the majority of NHS APA member Trusts, with a number also delivering events and completing work later in February and March 2023.

Some services utilised the Cepheid⁷ machines (Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England), and others completed testing events to reach those who needed testing or post treatment bloods. Some focused heavily on training and awareness, reaching new staff, focusing specifically on dry blood spot testing skills, or what they could do to reach the micro-elimination criteria as a service. There were services who incorporated other much needed health and wellbeing interventions, such as liver screening or Naloxone distribution.

Data work was completed across many services to ensure data was captured effectively and that anomalies were investigated. Many services offered incentives such as vouchers⁸, food, and even self-care kits.



Staff from the Inclusion Dame Carol Black Detox Unit in Fareham completing training for 'Love Yourself, Get Tested' week.



Jess Oke and Georgia Woodcock from BDP testing in the community for 'Love Yourself, Get Tested' week.



Ben and Sarah from Solihull (Birmingham & Solihull) for 'Love Yourself, Get Tested' week.



Mersey Care 'Love Yourself' table and self-care kits for 'Love Yourself, Get Tested' week.



National Work

Hep C U Later Webinars

The Hep C U Later team continued the series of bi-monthly webinars⁹ in 2022 on the following subject areas:

- The Impact of Hepatitis C Treatment
- Harm Reduction and Needle Exchange
- Innovate to eliminate – sharing of innovations which create momentum for hepatitis C testing and treatment



Each webinar had presenters from across the UK who are leaders in the hepatitis C field. Links to resources and documents for professionals aiming to improve their hepatitis C knowledge, improve their services or support services were released with each webinar and the Hep C U Later team also hosted networking and engagement events to build on existing partnerships.

Hep C U Later Awards

The Hep C U Later Awards¹⁰, in conjunction with NHSE's Hepatitis C Elimination Programme, were launched in May 2022. The Hep C U Later Awards were a chance for our extensive partnerships to recognise the great achievements and tireless work we had witnessed from individuals, teams and partnerships across the NHS APA. We received a number of incredible nominations from across the country.

The winners were announced in July's Hep C U Later webinar and the winners received a trophy and certificate. All of those shortlisted received feedback and a certificate.



Hep C U Later award winners

The Peer Award

The Peer Award Winner:

- Jason Dean from The Hepatitis C Trust

Highly commended for The Peer Award:

- Jane from Exchange Supplies
- The Wessex Clinical Van Peers (Sean Caddy, Alan Howard, Natasha Topham, Vanessa Rodriguez, Clive Williams)
- Clive Williams from The Hepatitis C Trust

The Innovation Award

The Innovation Award Winner:

- Sean Caddy and the Wessex Clinical Van

Highly commended for The Innovation Award:

- The Health Bus, Nottingham
- The Clean Slate service, Nottingham

The Big Impact/Best Improvement Award

The Big Impact/Best Improvement Award Winner:

- Hayley Curran from Brook Place, Mersey Care NHS Foundation Trust



Jason Dean: The Peer Award Winner

“The whole system is very grateful for the level of commitment you have shown, and your willingness to go above & beyond what anyone has expected of you to support both the system and crucially those individuals who need close support to get them through. Thank you.”

- Mark Gillyon-Powell, Head of HCV Programme, NHSE

Sean Caddy: The Innovation Award Winner

“The van programme has been one of the ‘breakout successes’ of the HCV Elimination Programme, but only in the areas where it is done right. Wessex are doing it right – and Sean is a big part of that. As a team, it is clear that you put everything into your desire to make sure that everyone can benefit from elimination.”

- Mark Gillyon-Powell, Head of HCV Programme, NHSE

Hayley Curran: The Big Impact/Best Improvement Winner

“Working within the Administration Team, this nomination is an example of when a person has achieved something which was bigger than what was expected of them. Putting such passion and commitment into driving elimination, engaging service users and supporting the staff to achieve, as well as running innovative events is a sure sign of emerging leadership.”

- Mark Gillyon-Powell, Head of HCV Programme, NHSE

National Work

Hep C U Later Training

The Hep C U Later team have delivered bespoke hepatitis C training¹¹ to the majority of NHS APA drug and alcohol services across the country via Tony Mullaney, Hep C U Later's Training and Development Coordinator, and other members of the team. Some of this bespoke training includes:

- Hepatitis C training (variety of depth to the training dependent on need, including skills-based dry blood spot testing training)
- Bespoke hepatitis C training including service specific data and areas to focus on for micro-elimination
- Capillary Blood Testing Training
- Cepheid (GeneXpert) Machine Training
- A video presentation on how to use the 'assessed as not appropriate to offer' status

This training has allowed the Hep C U Later team to be responsive to the specific needs of each NHS APA member Trust and a variety of professionals from across each organisation.

"On behalf of all the staff,
thank you so much! We loved having you
present to us."

- John McNeil, Substance Misuse Worker,
Sheffield Treatment and Recovery Team

Cepheid machine implementation

Tony Mullaney
Training and Development Coordinator
Hep CU Later

Hep C U Later Project

Assessed as not appropriate to offer
February 2023

The micro-elimination targets

1. 100% offered a test (not offered, blanks and not set are no longer acceptable if we aim to meet this standard)

Offered and accepted, offered and refused and assessed as not appropriate to offer count here

1. 100% of current/previous injectors have a test date (this is a test date for any period of time, even previous episodes/treatment providers but it must be logged)

Any dates set as 1900 won't be counted by NDTMS so if you have any of these they will need to be revisited

1. 90% current/previous injectors have a test date in the last 12 months (assessed as not appropriate to offer can be used here)

Rates of assessed and not appropriate to offer will be monitored to ensure they are within acceptable limits

1. 90% of Hep C positive clients have commenced treatment (joint responsibility with ODN)

National Work

Hep C U Later Training

Areas where Hep C U Later training has been provided:



Current Cepheid placements:



Previous Cepheid placements:



“Ben and I would just like to thank you and the providers of the ‘Christine’ Cepheid machine in our work to micro eliminate Hep C from Solihull. Since her instillation, Ben has worked tirelessly to commence a weekly testing clinic and also already booked evening drop-in sessions for those in employment. The machine has provided a “buzz” of enthusiasm in our service, not only with the staff but the service users alike.”

- Sarah Keeling, NMP, Solihull Integrated Addiction Services (Birmingham & Solihull Mental Health NHS Foundation Trust)



National Work

Hep C U Later Training

The Hep C U Later team have developed an internal Cepheid⁷ Implementation SOP to ensure strong processes are in place to support services to get the most out of the machines. An external Cepheid SOP is also available to support NHS APA organisations should they wish to implement the use of these machines in their services.

NHS addictions provider alliance

**HEP C
U Later**

Internal Cepheid
(GenExpert)
Machine
Implementation
and Management
SOP

NHS addictions provider alliance

**HEP C
U Later**

Cepheid
(GenExpert)
SOP

National Work

Hep C U Later Resources

A number of additional resources have been developed to support services:

- Hep C U Later Stigma Toolkit*
- Hep C U Later Engaging People in Testing Handbook*
- Hepatitis C Bulletins for services (with key information, links to training, resources and support)
- Hep C U Later posters for services*
- Hep C U Later leaflets about hepatitis C*
- Hep C U Later comment cards for use in services, training or events (available on request)
- Hep C U Later training certificates for staff to use as evidence of CPD (available following training)

*These resources can be found on the Hep C U Later website by [clicking here](#).



National Work

Hep C U Later Practitioners Forum

Hep C U Later are very proud to have re-launched the practitioner's forum in 2023 on a monthly basis. Whilst the previous forums focused on areas of interest and innovations, the sessions in 2023 focused on the micro-elimination criteria, resources and strategies to support services to achieve micro-elimination. The forum is designed specifically for people who are working directly with service users and seeks to allow the space for practitioners to learn, reflect and collectively problem solve.

Micro-elimination criteria



- We will visit each of the 4 criteria in more depth in future sessions
- Why do we need it?
- How did it come about?
- Common data source is NDTMS
- Let's talk about each target...



National Work

Hep C U Later Data Forum

The Hep C U Later Data Forums aim to bring together BBV and Data Leads from across the country to resolve issues relating to data, share learning and provide a space for reflective practice to ultimately better capture hepatitis C data, which demonstrates the significant level of testing and treatment being undertaken. The forums are needs-led, meaning they're arranged when there is a need.

The first data forum focused on:

- How to use the 'assessed as not appropriate to offer' status
- NDTMS data returns and how they could be utilised
- The NHSE Needs Assessment Project learning

NDTMS data set R Proposal forum:

- In December 2022, the Hep C U Later team drew together NHS APA services and drug and alcohol services across the national drug treatment sector, to agree a proposal to NDTMS for the future data set (Data Set R).
- This resulted in a clear proposal which looked to alter existing data fields to improve the quality of data received by all services nationally. It was hoped that changing the fields in this way would support the ongoing monitoring of micro-elimination, but also where there may be gaps in provision and has been accepted by NDTMS for consultation.

National Work

Hep C U Later Blogs

The Hep C U Later team and our NHS APA services have written a series of blogs throughout the year on subjects which have been of interest to practitioners across the sector.

- Hepatitis C stigma
- Barriers to treatment
- Hepatitis C education
- A year in review
- London Joint Working Group guest blog

Hep C U Later plan to continue the blog series on subjects such as hepatitis C and drug related deaths, hepatitis C and alcohol, homelessness, harm reduction, good practice in hepatitis C prevention, and to continue to invite guest blogs.

Visit our blog by [clicking here](#).

Date posted: October 5th, 2022

Hepatitis C Education – Why is it essential?

Please read this blog about the importance of regular Hepatitis C training.

Date posted: July 26th, 2022

Hepatitis C and Stigma

Please read this blog which summarises the stigma faced during Hep C treatment.

Date posted: February 28th, 2022

Using Incentives for a Treatment Pilot

Please read this blog about how incentives have been used by our partners in Telford for their treatment pilot.

National Work

Hep C U Later Newsletters

Hep C U Later have released regular newsletters updating the sector on the work that is being carried out to micro-eliminate hepatitis C. Newsletters have been a mechanism for updating NHS APA members, however, these have a reach which extends beyond the NHS APA.

Key features of the newsletters are:

- Innovative practices
- Summaries from conferences
- Case studies
- Sections from our members

All of our newsletters can be found on our website by [clicking here.](#)

December 2022 Newsletter

Please click below to view the December 2022 Newsletter.

[HCUL NL Q4 2022 V5](#)

August 2022 Newsletter

Please click below to view the August 2022 Newsletter.

[HCUL NL August 2022](#)

May 2022 Newsletter

Please click below to view the May 2022 Newsletter.

[HCUL NL May 2022](#)

January 2022 Newsletter

Please click below to view the January 2022 Newsletter.

[HCUL NL Jan 2022](#)

October 2021 Newsletter

Please click below to view the October 2021 Newsletter.

[HCUL NL October 2021](#)

January 2021 Newsletter

Please click below to view the January 2021 Newsletter.

[HCUL NL Jan 2021](#)



HEP C U Later

Q4
2022

Quarterly Newsletter

UK-UNB-3338 / December 2022

In this edition

- An interview with Georgia Woodcock
- Needs Assessment Project at GMMH
- Hayley Curran, HCUL Award Winner
- Recap of the data forum and NHS APA conference
- The INHSU Conference 2022
- Recap of the HCV action event
- An interview with a member of the team
- Upcoming events

Please let us know your thoughts, comments and suggestions for further newsletters.

- Hep C U Later is an initiative of the NHS Addictions Provider Alliance (NHS APA) and an innovative collaboration with Gilead Sciences.



- The NHS APA is a collective of NHS addictions service providers who are working collaboratively with service users, carers and other organisations and are committed to contributing positively to the ongoing development of the addictions field including within drug and alcohol, gambling and gaming treatment.

National Work

Hep C U Later Standards

In early 2022, Hep C U Later devised the Hep C U Later Standards for Drug Services in collaboration with some of our NHS APA partners (notably GMMH and CNWL).

The Hep C U Later standards were taken to the national and sector wide Hepatitis C Drug Treatment Service Provider Forum and built upon further, and have now become drug treatment sector BBV standards¹². This benchmarking tool has been used to establish where there may be gaps in hepatitis C related service provision.

These standards help services to identify key actions to improve service delivery and ensure good quality and resilient working practices.

The Drug and Alcohol Service Standards for BBVs (England) can be found on our website by [clicking here](#).

Drug and Alcohol Service Standards BBVs (England) - full document

Please click below to view the Drug and Alcohol Service Standards BBVs (England) – full document.

[Drug and Alcohol Service Standards BBVs \(England\) – full document](#)

Drug and Alcohol Service Standards for Hepatitis C Virus (HCV) and other Blood Borne Viruses (BBVs) (England)

Version 1.0, published November 2022

For review: November 2023

Drug and Alcohol Service Standards for Hepatitis C Virus (HCV) and other Blood Borne Viruses (BBVs) (England) has been developed by Gilead Sciences Ltd in collaboration with representatives from Gilead-partnered Drug Treatment Service (DTS) providers and The Hepatitis C Trust.



Awards, Posters and Conference Presentations:

Awards

We are proud to work with some incredible individuals and teams and have gained some recognition for the work undertaken by being shortlisted for a number of awards. A number of our NHS APA members have been shortlisted for, and won awards, however, we have not detailed them here. Over the coming year we hope to continue to nominate our NHS APA partners and associated networks for awards to recognise their commitment and value.

Hep C U Later were shortlisted for:

- UKPHR Best Social Media Campaign (Hep C U Later) - 2022

Click on the image to watch Lou Wilkins from Nottingham Health and Social Care NHS Trust speak about the Hep C U Later campaign. →



Awards, Posters and Conference Presentations:

Awards

Along with our partners in the DTS Forum we were shortlisted for¹⁴:

- HSJ Performance Recovery Award (DTS Forum, NHSE, Gilead Sciences, Hepatitis C Trust) - 2022
- HSJ Most Impactful Project Addressing Health Inequalities (DTS Forum, NHSE, Gilead Sciences, Hepatitis C Trust) - 2023
- HSJ Best Pharmaceutical Partnership with the NHS (DTS Forum, NHSE, Gilead Sciences, Hepatitis C Trust) - 2023
- HSJ Best Healthcare Analytics Project for the NHS (DTS Forum, NHSE, Gilead Sciences, Hepatitis C Trust) - 2023

Hep C U Later are excited to announce that we, alongside our partners at...

- NHSE
- Gilead Sciences
- Hepatitis C Drug Treatment Services Provider Forum

...won the HSJ award for the *Best Healthcare Analytics Project for the NHS* in March 2023!



Awards, Posters and Conference Presentations:

Posters

Poster presentations¹⁵ are a way to present the exceptional work being carried out across the sector and stimulate discussions with other areas nationally and globally.

Hep C U Later and NHS APA member Trusts have had the privilege of presenting hepatitis C related posters on the work being carried out at a number of conferences including:

- INHSU Conference (Glasgow) - 2022
- Gilead Sciences Elimination Conference - 2022
- The South East Public Health Conference - 2023
- UKPHR - Andover accessing the inaccessible/Hep C Elimination - 2022

Engaging the Disengaged:

HCV self-testing and linkage to care for drug treatment service users during COVID-19.

Daves¹, Gallagher², Parsons³, Hansford¹, Howard⁴, Rock⁴, Winn^{1,4}, Wilton⁴ and ¹Royal Surrey County Hospital, ²Inclusion, part of Midlands Partnership Foundation Trust, ³The Hepatitis C Trust, ⁴Surrey and Borders NHS Trust (SABP)

Overview: Self-testing is validated for HIV with evidence for increased testing uptake, comparable linkage to care and an absence of harm in at-risk individuals. However, there is limited data on this strategy for HCV infection. During COVID, most clinics moved to telephone consultations, reducing opportunities for blood-borne viruses (BBV) screening. This project targeted patients with >12 months follow up for re-engagement testing through supported home self-testing for HCV with rapid linkage to care.

Aims: The aim of this project was to assess the efficacy of supported postal (home) self-testing, during periods of national lockdowns, for active HCV infection in a population of service users from two providers in Surrey-Inclusion Recovery Alcohol's Substance Misuse Service and Incess CDAT (SABP).

Methodology: Data from Inclusion Aldershot gathered during the pilot phase of the project between May–October 2021, and from 1 access between October 2021–March 2022 as part of a wider roll-out of the project. Interrogation of patient records identified target populations of older clients (>45years) who had not previously been tested. Exclusion criteria: Individuals who had a previous positive HCV Ab result, and/or who had received prior treatment for HCV, and/or had a negative DBS test within 6 months, were excluded. Telephone contact was made with 422 service users in order to gain consent for their participation in this project. Participants who consented received a postal testing pack including bioprobe patient information leaflet and Oraquick® point of care test. A dedicated phone line was set up and used to discuss results and deliver support. Positive HCV Ab tests triggered urgent assessment by Hepatology nurses, and those with active HCV infection were supported through treatment by The Hepatitis C Trust peers.

Results: Out of 422 service users, a total of 210 people consented to participate and received home HCV self-test kits.

92 test results reported (44% of tests dispatched)

80 HCVAb- (6.5% of completed tests)

6 HCV Ab+ (0.5% of completed tests)

6 test failures

5 appointments for PCR (out of the 6 with HCV Ab+)

x2 PCR(RNA) negative (spontaneous clearance)

x3 PCR(RNA) positive (all 0% in and of treatment)

Conclusions and next steps:

From HCV testing results, providing opportunities to engage at past or current risk.

Telephone re-engagement strategy returned 44% of postal test kit results.

Allowed staff to deliver services to those who they had been reached due to COVID-19.

Once engaged, linkage to HCV care was effective during the pandemic and beyond.

Disclaimer: This project has been supported through an association of the British Pharmaceutical Industry (ABPI) Joint Working Initiative between Gilead Sciences Ltd, NHS Medicines Providers Alliance (NHS C U Later) and NHS England.

Pan-Dorset Hepatitis C Mental Health Engagement Pilot

Skaffe¹, Hansford^{1,2}, Avon and Wiltshire Mental Health Partnership NHS Trust, ¹Inclusion, part of Midlands Partnership NHS Foundation Trust

Background: In England, a significant risk factor for hepatitis C virus (HCV) infection is injecting drug use (IDU). If left untreated, HCV can lead to advanced liver disease, hepatocellular carcinoma (HCC) and liver-related mortality. People with Significant Mental Illness (SMI) often report engaging in risk behaviours including IDU and are therefore at increased risk of acquiring hepatitis C virus (HCV). Limited integration between mental and physical healthcare services frequently means that this population neither accesses nor receives appropriate care for HCV, increasing their risk of developing advanced liver disease.

Aims: Initiated by Hep C U Later, the aims of this project were to:

- Pilot a strategy targeting patients under the care of the Community Mental Health Team (CMHT) services within Dorset.
- Undertake HCV testing for HCV and support those with active HCV infection to access treatment services. Critical to the project's success.
- To reduce an CMHT staff on the HCV elimination agenda.

Methodology: Working in partnership with a representative from the local Clinical Commissioning Group (CCG), a HCV Elimination Strategic and Operational Board was created to better coordinate the work of the pan-Dorset teams, and to provide strong governance for the various bids and HCV initiatives.

Approaches to engaging those with SMI to undertake HCV testing included:

- Setting up bi-weekly Hep C, Homecare clinic at the local CMHT.
- Linking with Mental Health.
- Deployment of the Homecare Clinical Van at key locations for testing events.

Results: Although the pandemic hindered delivery of the project, under the Board's guidance and through regular clinics established within one CMHT:

- 5 patients with active HCV infection were tested through treatment.
- A further 10 patients with active HCV infection were tested through the Homecare Van.
- 60 people tested during Summer Testing Week on the Homecare Van.
- Training delivered to CMHT staff with resources created on HCV and poor mental health.
- HCV care pathways for those with SMI were reviewed, negotiated and established.

Conclusion and next steps:

The pilot demonstrated that, through enhanced joint working, an more comprehensive SMI can be supported to access HCV services more effectively, and valuable insights into the experience of patients can be obtained.

During the project a gap was identified highlighting the need for more comprehensive SMI awareness training within drug & alcohol services, and mental health services, for those with more complex needs and/or co-morbid conditions.

The intent will be examining where there are further opportunities to align more strongly across CMHT and CCGs to provide those with SMI better access to HCV care.

References: NSA 2022. Hepatitis C in England 2022. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/103277/HCV_in-England-2022-Full-report.pdf. Accessed September 2022.

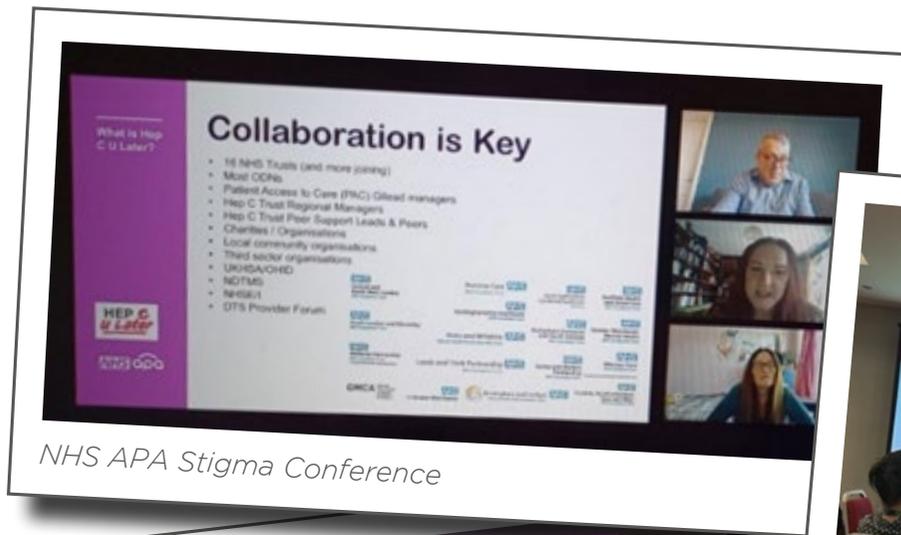
Disclaimer: This project has been supported through an Association of the British Pharmaceutical Industry (ABPI) Joint Working Initiative between Gilead Sciences Ltd, NHS Medicines Providers Alliance (NHS C U Later) and NHS England.



Awards, Posters and Conference Presentations:

Conference Presentations

Our Hep C U Later team have also presented at multiple conferences¹⁶ and webinars over the last year. Some of these have included presenting for HCV Action, INHSU, UKPHR, The South East Public Health Conference, Gilead Sciences Elimination Conference and the NHS APA Stigma Kills conference. This has resulted in raising awareness of the Hep C U Later project in new areas.



NHS APA Stigma Conference



HCV Action ODN Conference



INHSU Glasgow Conference

HEP C u Later

Marketing Campaign ¹⁷

Hep C U Later is the brand name of the programme which encompasses our shared ambition to eliminate hep C.

The bespoke Hep C U Later marketing and communications campaign aims to raise awareness, showcase excellence across NHS Addictions Provider Alliance member Trusts and support the ongoing activities both offline and online.

The communications aim to reduce barriers, increase awareness and educate those at risk, of treatment options, removing myths and helping to encourage and engage them into treatment.

This report focusses on the performance of Hep C U Later across its digital platforms. The website and social media accounts started January 2020 and have grown in interest and gathered momentum, with a steady upwards trajectory since its inception.

Social media accounts were created to support the programme and deliver on 4 key messages identified below. We look ahead, with a continued commitment to marketing activities to help more people say 'Hep C U Later' as services across the NHS APA strive for micro-elimination.

The digital platforms currently being used include:

- Twitter
- Facebook
- Website
- LinkedIn (launched April 2023)

Key messages identified for the Hep C U Later campaign:

1. HCV can be eliminated and we aim to do it
2. We are NHS APA - NHS bringing care, quality, trust and are dependable
3. What 'at risk' behaviours are and how to reduce risky behaviour
4. Treatment is quick, easy and accessible

Hep C U Later continues to lead the marketing and communication workstream for the drug and alcohol treatment providers forum.

This is a collaborative of the NHS APA member Trusts and non-NHS treatment providers with a shared ambition of achieving hep C elimination.

The Hep C U Later team continue to present at conferences and webinars over the last year. Some of these have included presenting for HCV Action, INHSU, The Public Health Practitioner Conference and the UKHSA UAM Symposium. This has resulted in raising awareness of the Hep C U Later project in new areas.





Twitter

The rationale for the Hep C U Later Twitter account was to target an audience of professionals and influencers within the hepatitis field, whilst raising awareness of the programme of work and the Hep C U Later brand.

The Hep C U Later Twitter account is followed by a mixture of service users and professionals. Our reach, impressions and followers have significantly increased in the last year.

From April 2022-March 2023 we have seen:

- Impressions of **121.4k**
- Over **2.4k** likes
- **3.26%** average post engagement

The most popular posts have been from testing campaigns and events, training the Hep C U Later team have delivered and posts related to the Euro Testing Week campaign.

Over the past year we have taken part in:

- The Spring and Autumn European Testing Weeks
- World Hepatitis Day
- Drug Treatment Provider Forum collaborative social media planning

These have led to a growth in engagement over the last year.

The hashtag **#HepCULater** is now one of the most noticeable hepatitis C hashtags in the UK and is being used across all services.



Facebook

was predominantly set up with the concept of targeting service users to (i) raise awareness of HCV and (ii) provide a 'call-to-action' with advertising of pop-up clinics or face-to-face testing events which were impacted by COVID 19.

The Hep C U Later Facebook account is predominantly aimed at service users, however we are also followed by a number of professionals.

From April 2022-March 2023 we have seen:

- A reach of **25.4k**
- Post impressions of **24.3k** and account impressions of **34.5k**
- A following of **560** which continues to increase steadily each month

Whilst the engagement rate has decreased on the previous years, this is still significantly above the Facebook average of circa 3%.

The most popular Hep C U Later posts on Facebook have been those sharing news of testing events, campaign promotions, and celebratory posts relating to award nominations.



Website: www.hepculater.com

The website was launched in January 2020 and has continued to grow since its inception.

The website, hosts information about what hep C is, how it can be transmitted, symptoms, those at risk, testing facilities across the NHS APA testing sites, as well as success stories from those who have been treated and have said 'Hep C U Later'.

The analytics tell us there have been nearly 3,000 visitors in the last reporting year and, overwhelmingly, 62% of those have gone directly to the website or redirected from hepculater.co.uk. This illustrates that those people have known the web address and typed it in directly, with a further 19.5% from the search engine Google.

Additional resources continued to be added to the website, a summary of which include:

- Innovation and event reports
- Hep C U Later webinars
- Cepheid standard operating procedure
- Hep C workbook
- Useful web links
- Innovation presentations
- NHS APA conference videos
- Informative newsletters
- Best practice examples

These resources, and more, can be found on our website by [clicking here](#).



Users

2,797

vs 2,512 (+11.35%)

Sessions

3,785

vs 2,493 (+9.33%)

Page views

7,071

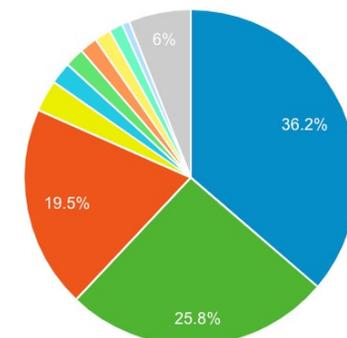
vs 6,756 (+4.66%)

Pages per session

1.87

vs 1.95 (-4.27%)

Referral sources



Top 5 sources

1. www.hepculater.co.uk
2. Direct
3. Google (organic)

Traffic %

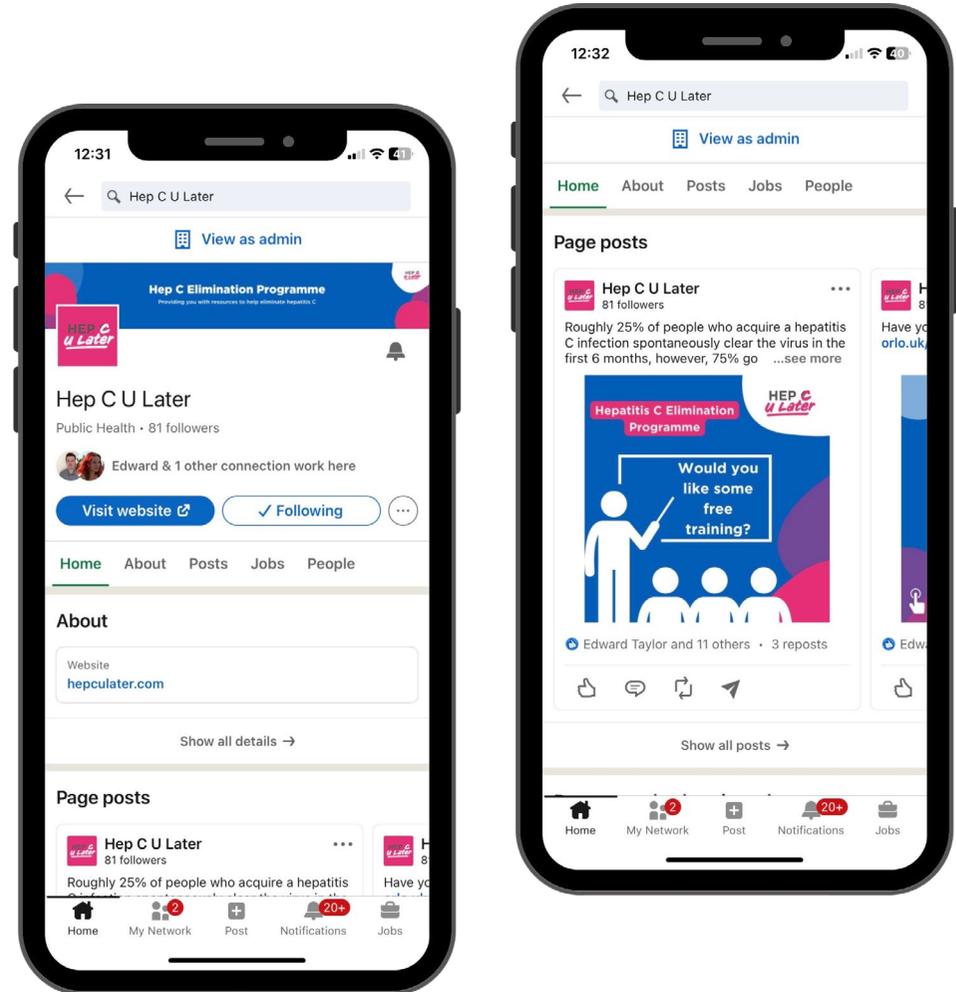
1. 36.25%
2. 25.83%
3. 19.5%

Hep C U Later Engagement Programme

In 2023, Hep C U Later implemented an additional engagement, communications and awareness programme, focusing on professionals who work in primary care, antenatal services and emergency departments. This was an additional Hep C U Later initiative provided by Inclusion (Midlands Partnership University NHS Foundation Trust) as part of the NHS APA collaboration and commissioned by NHSE.

The programme is currently in its early stages, however, a new LinkedIn page has been launched, which you can follow by [clicking here](#).

The Hep C U Later website is being re-designed, scoping is being completed and a multitude of resources are being developed. Later in the year the engagement programme will provide these professionals with CPD accredited online webinars and further engage them to increase testing and treatment.



Hep C U Later Project - Year 5 Plans

As we head into year 5¹⁹ of the Hep C U Later project, our last full year, we have a significant level of experience behind us and a great deal of momentum across the NHS APA. Our main aim for this coming year is to continue to strive towards micro-elimination whilst ensuring that the efforts are as sustainable as possible.

Reflecting on the last year we have achieved what we set out to do to improve data, awareness, engagement and education.

This coming year is all about focusing on what bespoke work each NHS APA member Trust requires to support them on the road to hepatitis C micro-elimination. To do this we will work with each member Trust to ensure we are able to understand and unblock any barriers, offer our resources to give additional support and where possible work with them on wider issues which may affect their ability to sustain micro-elimination.

The Hep C U Later data analysts have undertaken a significant level of work to support our main objective and will continue with a number of work streams on trend analysis and predicting what level of testing can lead to micro-elimination.

In Memory

Hep C U Later would like to take this opportunity to honour some of the highly valued members of our collaboration who have passed away over the duration of our project.

They have been much valued champions of hepatitis C elimination and highly committed to tackling health inequalities.

The loss of these individuals has been felt greatly by their teams and we at Hep C U later will continue to keep them in our thoughts.

Conclusion

The success for the Hep C U Later project over the last year provides us with confidence that our goal of hepatitis C micro-elimination is achievable. This impact report demonstrates the tremendous level of energy and commitment to this objective across our NHS APA providers and our external key partners.

The next year for Hep C U Later is a critical one in reaching our goal. It will no doubt be a busy year full of challenges, but also exciting opportunities to bring more people together to impact positively on service users lives. We will continue to focus, reflect, improve, collaborate, share learning and keep the momentum going across the sector.

The success of our marketing campaign, the improvement seen within the data for testing and treatment, and the incredible body of work carried out over the last year is a testament to the tireless work of not only the Hep C U Later team, but every person in every organisation who is leading staff, analysing data, sharing knowledge or testing, treating and engaging service users across the country.

We are incredibly proud of the impact we have had over the last year and we want to thank every person we have worked alongside for their valuable work.

Together, we're all saying Hep C U Later.

- Deanne Burch, Lead for Hep C U Later

Joint Working Agreement (JWA) Statement

Hep C U later is an output of an NHS Addictions Provider Alliance (NHS APA) and Gilead Sciences joint working initiative.

The aims and objectives of this joint working agreement are to:

- Increase the number of at-risk people per month who are tested for Hepatitis C.
- Increase the number of people appropriately referred into the care of a treater, either those who are newly diagnosed Hepatitis C positive or those previously diagnosed with Hepatitis C but not treated.
- Improve the efficiency with which Hepatitis C positive patients are diagnosed and ultimately treated as measured e.g., through data reported by Operational Delivery Networks (ODNs).

This report includes an update on initiatives funded by the JWA as well as those funded by other partners which are aligned to NHS APA's strategic objective to eliminate Hepatitis C. For clarity the tabled information below summarises:

- Where Gilead have contributed resources through either funding, funding of roles, clinical or project management expertise.
- Where MPFT and other NHS APA members have contributed as part of the JWA.
- Where activities are undertaken outside of the JWA by member Trusts who have aligned goals.

Section of Report	Gilead resource input under the JWA	MPFT input under or outside of the JWA	NHS APA input outside of the JWA
Hep C U Later Project Team	1: The following roles are directly and fully funded by Gilead Sciences: <ul style="list-style-type: none"> • Deanne Burch (Lead for Hep C U Later) • Louise Hansford (Elimination Coordinator) • Laura Hughes (Elimination Coordinator) • Robert Fair (Data Analyst) • Chris Heaps (Data Analyst) • Tony Mullaney (Training and Development Coordinator) 	2: The following roles are funded by Inclusion, part of Midlands Partnership University NHS Foundation Trust (MPFT): <ul style="list-style-type: none"> • Edward Taylor (Marketing & Communications Assistant) • Candie Lincoln (Project Manager) Additional roles to support the infrastructure of the JWA are provided by MPFT but not mentioned in the report. They are: <ul style="list-style-type: none"> • Danny Hames (Head of Inclusion/Chair of NHS APA) • David Cupit (Commercial & Information Lead) • Grace Masinuka (Marketing & Communications Lead) 	

Section of Report	Gilead resource input under the JWA	MPFT input under or outside of the JWA	NHS APA input outside of the JWA
Using Data and Information to Support Micro-elimination	3: The data work streams described in this section are enabled through Gilead Sciences' funded two data analyst posts.	3: MPFT have contributed the expertise of David Cupit (Commercial & Information Lead) to support the data work streams detailed in this section.	
Partnership Working	4: The Hep C National Drug Treatment Provider Forum is a Gilead Sciences led collaboration drawing together BBV Leads from across the drug treatment sector. The Gilead PAC managers are part of the resource brought by Gilead Sciences. The PAC managers also provide expertise in supporting the relationships with the ODNs.	4: MPFT have contributed the expertise of Grace Masinuka (Programmes and Communications Lead) to support the social media campaign work produced within the Hep C National Drug Treatment Provider Forum.	5: The Hep C U later initiative have benefited from the use of Cepheid (GeneXpert) machines which have been utilised across the NHS APA (Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England) – this is not part of the JWA with Gilead Sciences.

Section of Report	Gilead resource input under the JWA	MPFT input under or outside of the JWA	NHS APA input outside of the JWA
Hep C U Later Project Review	<p>6: Gilead Sciences staff have contributed time and expertise to the work carried out in these NHS APA member Trusts. Gilead Sciences have also funded the hepatitis C elimination coordinator posts who work directly with these NHS APA member services. For the purpose of transparency those report items marked with a * are as a direct result of funding for Hepatitis C elimination activities through the JWA in years 3 to 4.</p>	<p>6: The Hampshire Homeless Program was funded by NHSE and is not a part of the JWA with Gilead Sciences</p> <p>6: The Wessex Clinical Van is a Wessex ODN initiative funded by NHSE. The team operating the van are managed by Inclusion and the Hep C U Later team provide operational support and guidance.</p>	<p>6: The NHS APA have contributed their own internal staff resources in each of the services mentioned in the report and a representative board member for the Hep C U Later board meetings.</p> <p>6: The Hep C U later initiative have benefited from the use of Cepheid (GeneXpert) machines which have been utilised across the NHS APA (Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England) – this is not part of the JWA with Gilead Sciences. For transparency items marked with a ~ correspond to this agreement.</p> <p>6: The work to increase the surveys for the UKHSA Unlinked Anonymous Monitoring Survey of PWID are an NHS APA activity.</p>

Section of Report	Gilead resource input under the JWA	MPFT input under or outside of the JWA	NHS APA input outside of the JWA
National Work	<p>8: Gilead Sciences have directly funded the vouchers mentioned, for the purpose of Hepatitis C elimination activities through the JWA in years 3 to 4.</p> <p>11: Gilead Sciences fund the posts to enable the training activity and data forum.</p> <p>12: Gilead Sciences lead the Hep C Drug Treatment Service Provider Forum and led the development of the drug treatment sector BBV standards document.</p>	<p>9: The Hep C U Later webinars fall outside of the JWA and are directly funded and managed through Inclusion, MPFT.</p> <p>10: The awards fall outside of the JWA and are directly funded and managed by Inclusion, MPFT in association with NHSEs HCV elimination programme.</p>	<p>7: The Hep C U later initiative have benefited from the use of Cepheid (GeneXpert) machines which have been utilised across the NHS APA (Cepheid GeneXperts funded by MSD as part of the Hepatitis C Elimination Tender with NHS England) – this is not part of the JWA with Gilead Sciences. This applies to all mention of Cepheid machines through this report.</p> <p>12: The practitioner’s forum, data forum. resources, newsletters, blogs, and original Hep C U Later standards are an NHS APA membership contribution outside of the JWA.</p>
Awards, Posters, and Conference Presentations	<p>14: Gilead Sciences contributed time and staff resource to lead the submissions for the HSJ awards mentioned in this section.</p>	<p>14: MPFT contributed time, resource and the support of David Cupit (Commercial & Information Lead) to support these nominations and associated presentations.</p> <p>15: MPFT contributed the time and resource of Grace Masinuka (Programmes and Communications Lead) for the branding of these posters.</p>	<p>13: Nominating colleagues within the NHS APA is an activity of the NHS APA and not an activity of Gilead Sciences.</p> <p>15: NHS APA member Trusts contributed time and resource in the development of poster presentations. The poster presentations do not form a part of the JWA.</p> <p>16: Conference presentations are a contribution of the NHS APA and not part of the JWA.</p>

Section of Report	Gilead resource input under the JWA	MPFT input under or outside of the JWA	NHS APA input outside of the JWA
Hep C U Later Campaign	<p>17: Gilead Sciences contributed funding to develop the Hep C U Later campaign in year one only of the JWA.</p> <p>Gilead Sciences give time and expertise to the project to support the alignment of similar organisations to engage in national campaigns.</p>	<p>17: The social media, communications and marketing operational oversight and resource is fully funded by Inclusion (MPFT) and the Hep C U Later brand identity is the property of Inclusion. These staff lead on the development of comms plans and social media.</p> <p>18: The Hep C U Later Engagement Programme is an additional Hep C U Later initiative provided by MPFT and is not part of the JWA.</p>	
Hep C U Later Project – Year 5 Plans	Year 5 data plans are the result of Gilead Sciences funded posts as part of the JWA extension.		



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