

HEP C U Later

Dorset High Intensity Test and Treat (HITT) Report

- Utilising find a friend and postal self testing during European Testing Week, 22nd - 26th November

This document will report the learning, feedback and data from the Dorset High Intensity Test and Treat (HITT). All stakeholders were invited to an initial review meeting on Thursday 16th December with a more detailed meeting in January scheduled to review the NTDMS data and plan the next testing event. This work will be submitted as an abstract for forthcoming conferences.

Project Overview

The Dorset HITT was planned in order to launch the 'Find a Friend' project and to further resource and promote the REACH and Exchange Supplies NSP Direct (Needle Syringe Provision) 'Postal Self Testing' service. Both these schemes have been supported by Hep C U Later innovation grants secured by AWP NHS as the clinical provider within the REACH service.

Special thank you to Sean Caddy (Inclusion), Jane Trebilcock (Exchange Supplies) and Clare Skaife (AWP) who went above and beyond in their commitment and responsiveness working outside of usual hours to ensure everyone who wanted a test received them.

Stakeholders

This project has been led by Hep C U Later under the Avon and Wiltshire Mental Health Partnership NHS Trust (AWP NHS) 'Find a Friend and Postal Testing' Innovation Project. Hep C U Later is a joint working agreement between Gilead Sciences and the Midlands Partnership NHS Trust supporting the NHS Addiction Provider Alliance member trusts to eliminate hepatitis C. As part of this partnership, each member trust has support from the Hep C U Later Coordinator and Gilead Patient Access to Care Manager for their region. Multi-agency stakeholder meetings were held from the beginning of the project which included:

- Dorset Liver Service
- REACH Dorset
- Inclusion Recovery Hampshire – Wessex Clinical Van Team
- Exchange Supplies
- Public Health Dorset
- The Hepatitis C Trust
- Dorset Healthcare Homeless Health Service
- The Lantern Trust

- Gilead Patient Access to Care Team
- MSD Elimination team

Other stakeholders:

- *Liver 4 Life*
- *Beacon Church Bridport*
- *Dorchester Foodbank*
- *Shelter*
- *The Bus Shelter*

Project overview

Find a friend

- The aim of the initiative is to encourage those at high risk of hepatitis C, or living with hepatitis C and not yet sought treatment, tested and into treatment. This is done by offering voucher incentives through hepatitis C ambassadors who socialise with the target audience.
- The hepatitis C ambassador receives a £5 voucher for every person they refer who gets tested.
- The person accessing the test will also receive a £5 voucher.
- The additional objective is to recruit mentors to work alongside staff in the quest to achieve hepatitis C elimination.

Self Testing

- Developed by (EDP) with Exchange Supplies with support from Hep C U Later.
- It is hosted on REACH NSP webpage.
- Service users can order a Manchester PHE dried blood spot kit. A 'how to' video and downloadable leaflet is available on the website with a printed copy of the leaflet sent with each test.

Objectives

The main objective was to test as many service users as possible through offering incentives for testing with additional incentives for bringing friends at risk of hepatitis C to be tested. Dorset REACH were experiencing difficulties reaching the target for Public Health England (PHE) Unlinked Anonymous Monitoring (UAM) Survey and it was agreed for the team to assist with this during the 5 day testing event. Jane Trebilcock from Exchange Supplies was utilised on the ground by 'spreading the word' on the ground and encouraging interest to attend the event. The Hepatitis C Trust peers provided high quality information around risks, dispelling myths and supporting those needing treatment along the care cascade.

Another key objective was testing and re-engagement of people previously lost to follow up. A prior agreement ensured hepatology nurse provision was available and on-call via telephone during the first four days and in attendance on the final day to assess anyone requiring treatment.

We aimed to raise awareness of the event and hepatitis C in general through use of the various social media channels and a press release.

Key people present during HITT event

<i>Person</i>	<i>Role</i>	<i>Days out</i>
Sean	Wessex Clinical Van Coordinator	5
Jane	Find a Friend Lead	5
Clare	Hep C Mental Health Engagement Worker	4
Sandy	Homeless Healthcare	3
Louise	Hep C Elimination Coordinator	3
Vanessa	Peer Support Lead	3
Brandon	Van Driver	2
Dave	Hep C Hants P2P	2
Jenna	Senior Hepatology Nurse	1
Clive	Peer Support Lead	1
Alisha	Hep C Mentor	1
Tina	Hep C Ambassador	Was unable to stay due to plan B being implemented

Provision and resources

The original plan included the use of two clinical vans - the Wessex and Dorset clinical vans.

The Wessex clinical van was supported by Inclusion, on behalf of the Hep C U Later programme and the Dorset Clinical Van provided by Liver for Life and supported by The Hepatitis C Trust.

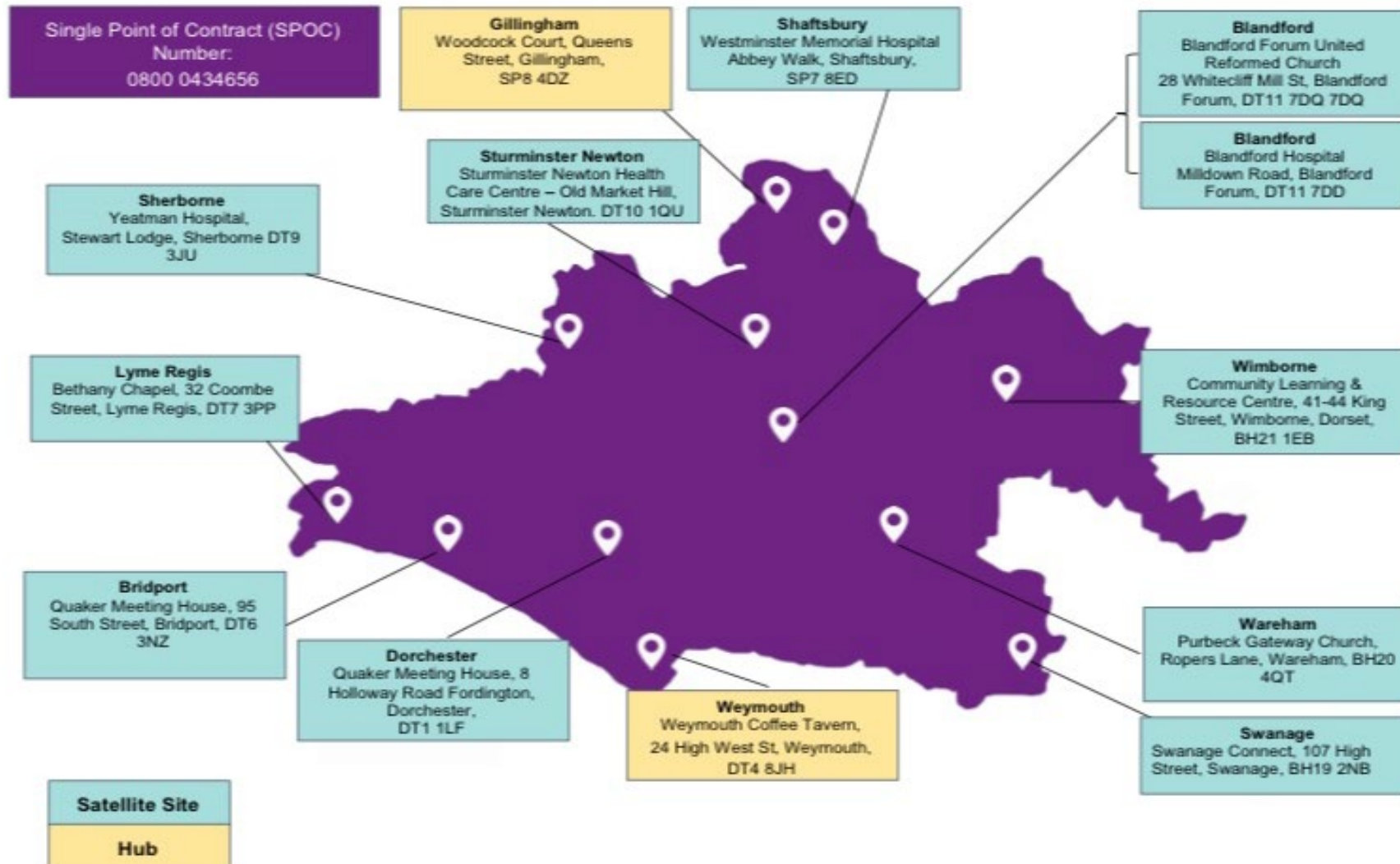
The Wessex van conducted 5 days of testing, with the Dorset van completed 2 days due to unexpected resource issues.

Whilst in action, the following were provided via the clinical vans;

- The Hepatitis C Trust supplied Hep C antibody test kits
- Both vans had use of MSD / NHSE Cepheid machines transforming the landscape and experience for patients
- £2000 vouchers allocated to the 'find a friend' scheme
- Needle exchange equipment
- Naloxone training and kits
- Covid vaccination clinic linked in on 26/11/2021 to maximise health interventions in one visit

Area covered

The Map below shows the area covered by this event, most of the locations had static events, however some were visited individually to be more time effective (Lyme Regis, Charmouth, Ferndown and Wareham).



Data

Ahead of the event, deep data dives were conducted to identify those at risk and those yet to be treated. This information was utilised to make a plan of where the van would visit and be most effective. This work proved to be more extensive than initially thought, which directly impacted on the time available to engage with service users ahead of the event. This also led to the decision to schedule specific times and dates for van locations which resulted in a more effective way to plan the events due to van availability.

Please see separate appendix for data. 

The Inclusion Illy Carepath patient database is used to evidence outcomes for the Wessex and Dorset Clinical Van project. This enables the reporting on both vans separately and collectively for NHS England (NHSE) and local monitoring (please see dashboard below).

All data has been updated on open episodes within Halo, and for everyone seen on the Dorset Clinical Van modality within Illy Carepath. Regular meetings are planned to ensure treatment referrals and start dates are shared with REACH and the Dorset Clinical Van Team.

Dorset Clinical Van: Activity Report

Testing Week (22nd-29th November 2021)

HEP C
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Individuals Seen

68

Total Contacts

68

Total Tests

68

Antibody Tests

42

Total Cepheid

26

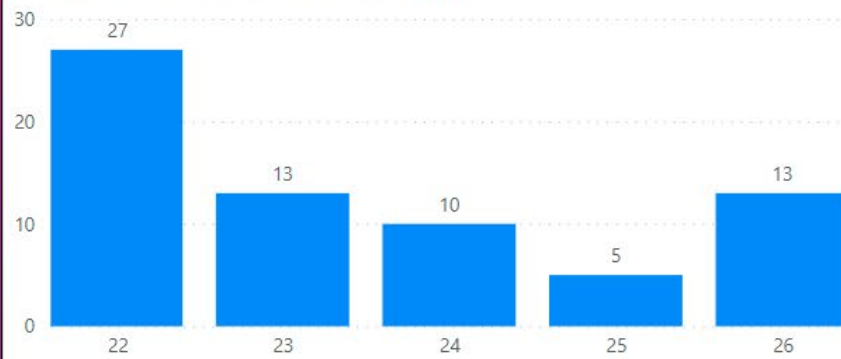
RNA Positive

6

RNA Negative

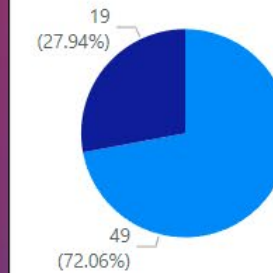
20

Patients Seen by Date (November date)



Gender

● Male ● Female



Cepheid Detected

6

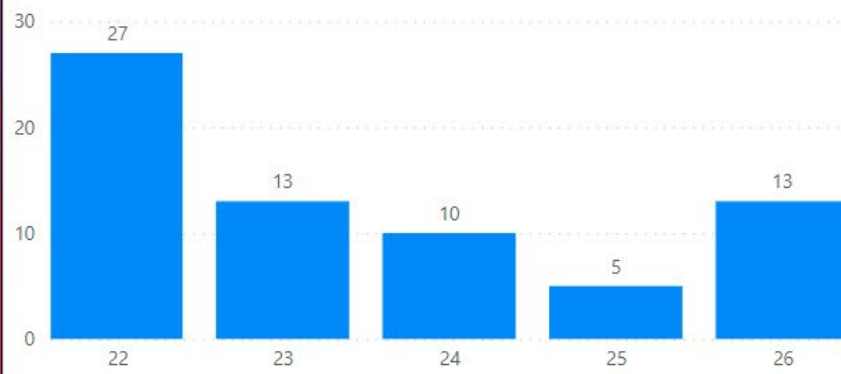
Liver Assessments

6

Naloxone

5

Hep C Tests Carried Out (November date)



Age and Gender

● Female ● Male



Case study

On day two of the HITT, two of the team went into Weymouth town centre to encourage people to get tested. Dave brought an individual back to the van, who he had successfully engaged with the use of incentive vouchers for completing the UAM Survey (£9 Love2Shop Voucher).

He presented as vulnerable and stated he was homeless, with limited further information.

With support from a member of the team the individual completed the survey. On completion of the test, he tested positive for hep C antibodies. The result was explained to the individual and agreed a second test with the Cepheid machine. Once the test was started using Cepheid machine it allowed approximately an hour for the member of the team to reach out to other agencies who knew the individual as there were some concerns regarding the individuals ability to understand the information including the need to return on day 5 for an assessment for treatment.

Access to patient records provided further information including the complexities of the individuals case and requesting support from Reach and Homeless Healthcare. Integrated working resulted in two staff arriving from Shelter within minutes who were able to provide further context to the individuals needs and other agency support.

Unfortunately he left just before receiving the result from Cepheid machine with an agreement to return on 26th November to be assessed by Hepatology Nurse, Jenna Wooding. The test returned an error but the individual returned Friday as promised and a repeat Cepheid test was conducted which confirmed he had Hepatitis C detected with a viral load of 1210000 IU/ml. A fibro-scan was completed which was within normal range and he was assessed by the hepatology nurse who will continue to work with other supporting agencies to agree treatment plan.

Without the voucher incentive, this individual would not have attended. The survey provided a wealth of information about his current situation and risk factors. This resulted in a robust plan with multi agency involvement.

Lessons learned

- Find a Friend scheme was a success at engaging those previously not tested, as was the voucher incentive.
- With a total of £430 of vouchers issued it proved to be value for money.
- Effective method of getting PHE Unlinked Anonymous Survey of People Who Inject Drugs completed with 47 received by PHE so far. This enabled the service to reach their target of 60 samples.
- Low reinfection / retreatment rates could potentially be linked to the excellent needle exchange availability and high quality equipment and skilled staff delivering harm minimisations awareness.
- Scheduling fixed locations ahead of the testing event may have increased engagement on some days for example Blandford, Gillingham and Shaftesbury.
- Later starts and finish times may have been beneficial.
- Ability to be responsive was a real asset and meant we engaged more people.
- Having back up plans in place proved essential.
- Multi agency working is critical to effectiveness of events.
- Analysing data ahead of the event was more time consuming than expected and revealed more patients than expected. The original number to recheck was 32 and by looking in other datasets in Halo this became 119. Building in a significant time for data analysing to be conducted is key.
- Inaccuracy of form completion resulted in difficulties updating patient records. Data inputting extensive and protected time should be allocated in advance, including time for feedback on referrals from hepatology
- NDTMS upload was completed before all the data could go on - therefore this needs to be checked in January 2022 to ensure it has corrected the testing information for November 2021
- Data needs to be correct on all systems - several service users had no records around their hepatitis C testing and treatment from events in 2020, several had incorrect data on NHSE Treatment Registry
- We could have more use of local social media accounts and press releases
- Linking in with Covid vaccination clinics was an ideal opportunity to offer testing, needle exchange and naloxone

Patient feedback

"I have been unable to have my SVR done due to Covid, thank you for making the effort to come out to where I live. Now I have my SVR I can put that part of my life behind me and move on"

"Thanks for maintaining my confidentiality, excellent service"

"My mum was in tears when I gave her the news my treatment had worked"

"I never knew the risks, great to be educated"

"Jane made all the difference to me coming to get tested"

And my personal favourite...

"My dealer told me to come and get tested" This was due to Jane's intervention

Summary and future plans

Future Plans

- Meetings planned to scope out Jane's role with postal testing via Exchange Supplies
- Using the incentive vouchers for those patients returning a postal testing kit
- Lessons learnt re data and recording will be shared with REACH and training arranged
- Regular cross referencing of patients planned with Dorset Hepatology to ensure accuracy of records
- Regular events will be planned to secure SVR's promptly and to keep momentum going

Summary

The Dorset HITT achieved all proposed outcomes, reaching patients that are both known, and not known to services. The Find a Friend element led by Jane Trebilcock was instrumental in the success and we have £1570 vouchers left in the budget to repeat this initiative; however caution should be exercised to ensure the same people are not re-tested.

