

HEP C U Later

*Impact Report - A year in review
April 2021 - March 2022*

Joint Working Agreement (JWA) Statement:

Hep C U later is an output of an 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.

Page Number	Gilead resource input under the JWA	MPFT input under the JWA	NHS APA input outside of the JWA
7	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)	The following roles are funded by Inclusion, part of Midlands Partnership NHS Foundation Trust (MPFT): <ul style="list-style-type: none">• Edward Taylor (Marketing & Communications Assistant)• Candie Lincoln (Project Manager)	

Page Number	Gilead resource input under the JWA	MPFT input under the JWA	NHS APA input outside of the JWA
7		<p>Additional roles to support the infrastructure of the JWA are provided by MPFT but not mentioned in the report. They are:</p> <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) 	
9 - 16	<p>The data work streams described in these pages are enabled through Gilead Sciences funded posts.</p>	<p>MPFT have contributed the expertise of David Cupit (Commercial & Information Lead).</p>	
17 - 26	<p>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.</p>		
27		<p>This work falls outside of the JWA and is directly funded and managed through Inclusion, MPFT.</p>	

Page Number	Gilead resource input under the JWA	MPFT input under the JWA	NHS APA input outside of the JWA
28	Gilead Sciences fund the posts to enable the training activity and data forum.	The awards fall outside of the JWA and are directly funded and managed by Inclusion, MPFT in association with NHSEs HCV elimination programme.	
29 - 30			The practitioner's forum, blogs, charter and standards are a NHS APA membership contribution outside of the JWA.
31	The national Drug Treatment Service Provider Forum is a Gilead Sciences organised initiative.		
32	All references to year 3 money related activities/interventions were funded by Gilead Sciences.		The awards submissions were a NHS APA activity and did not fall under the Gilead Sciences JWA.
33	The national Drug Treatment Service Provider Forum is a Gilead organised initiative. 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.		The use of Cepheid GeneXpert Machines are not a JWA activity. The work to increase the surveys for the UKHSA Unlinked Anonymous Monitoring Survey of PWID are an NHS APA activity.
36 - 37	Gilead Sciences contributed funding to develop the Hep C U Later campaign in year one only of the JWA.	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.	Presentations at national conferences are the activity of NHS APA.

Page Number	Gilead resource input under the JWA	MPFT input under the JWA	NHS APA input outside of the JWA
38	<p>The following were a result of funding and support from Gilead Sciences:</p> <ul style="list-style-type: none"> • Innovation and Event Reports • Innovation Presentations 	<p>The following were the result of Inclusion (MPFT) activity:</p> <ul style="list-style-type: none"> • Hep C Workbook 	<p>The following were NHSAPA activity:</p> <ul style="list-style-type: none"> • Hep C U Later webinars • Cepheid SOP • NHS APA conference videos
39	<p>Year 4 data plans are the result of Gilead Sciences funded posts as part of the JWA extension.</p>		
40	<p>Gilead Sciences have contributed direct funding for the innovation initiatives mentioned on this page and the subsequent reports.</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>Funding for the communications and marketing operational staff are funded by Inclusion (MPFT) and these staff lead on the development of comms plans and social media squares.</p>	<p>The development of the following will be an NHS APA activity, however, will be made possible through the oversight of Gilead Sciences funded Hep C U Later posts:</p> <ul style="list-style-type: none"> • Development of resources • Blogs, Newsletters • Training slides and toolkits • Presence at national and global conferences
41	<p>Training and development activity is funded by Gilead Sciences through a Training and Development Coordinator post.</p>		<p>The use of Cepheid GeneXpert Machines are not a JWA activity.</p>

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Introduction

The Hep C U Later Project continues to grow and adapt in its effort to micro-eliminate hepatitis C across NHS Addiction Provider Alliance (NHS APA) services by the end of 2023. The project has successfully overcome a substantial number of challenges brought about by Covid-19 and many services have now fully restored. Alongside these challenges, we have responded flexibly and dynamically which has resulted in multiple innovations and new ways of working across the sector.

This year saw the launch of a number of events aimed at engaging staff from across the country including the Hep C U Later Webinars, micro-elimination presentations, plans for the Hep C U Later Data Forum and the continuation of the Hep C U Later Practitioners Forum. Additionally, the Hep C U Later campaign has grown significantly in its reach on social media, reaching a global audience, and the brand continues to be recognisable, strong and associated with good quality.

Introduction continued

One of the biggest achievements the project has seen is that testing rates across our member services have nearly doubled this year compared to the previous year. Additionally, we have seen a significant increase in those listed as having successfully completed treatment. The substantial focus on data and data integrity has driven services forward and ensured a high quality of care.

Nationally, the Hep C U Later project has been collaborating with multiple organisations outside of the NHS APA on a number of work-streams 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. The project continues to thrive thanks to the commitment from our national partners, and of course, the enabling effect of NHS England's HCV Elimination Programme.

Our Joint Working Agreement with Gilead Sciences has been extended into years 4 and 5, assisting our team to expand, continue the vital work within NHS APA services, and allowing us to create increasing bespoke packages of support. Much of the work for years 4 and 5 will focus on data - to target testing, to focus resources and to ensure data integrity across our members. It is important at this stage that we forward plan to grow sustainability and resilience for hepatitis C work to continue in drug services for when the project comes to a close in March 2024.

The Hep C U Later project team are proud to have supported our NHS APA services over the last 3 years and to have worked with so many passionate individuals in the field. We will continue tirelessly to improve, learn, have impact and say 'Hep C U Later'.

The Hep C U Later Project Team is:

Deanne Burch

Lead for Hep C U Later

Louise Hansford

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

Laura Hughes

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

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

Candie Lincoln

Hep C U Later Project Manager (3
days per week)

Eddie Taylor

Marketing and Communications

Background

The NHS Addiction Providers Alliance (www.nhsapa.com) is an alliance of 15 NHS Trusts that provide drug and alcohol treatment services across England and is currently chaired by Inclusion (part of the Midlands Partnership NHS Foundation Trust). This reach currently extends to over 49,000 people who use drug and alcohol services, across 16 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 Hep C U Later Initiative member trusts are:



What the data has shown

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 the level of work required to reach elimination.

Using Data and Information to Support Micro-elimination

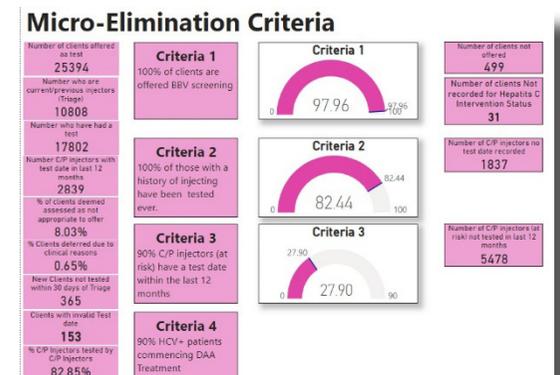
Within the last year, following extensive consultation, we have focused on building an improved system for monitoring the NDTMS data we receive from our NHS APA members. This new 'dashboard on a page' report, sent monthly, allows each member Trust to monitor their own data across a number of fields, track progress, identify barriers and mark their progress against micro-elimination measures.

Using the 'dashboard on a page report' has led 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
- Which services may require additional resources or input
- Which services are closest to micro-elimination
- The level of testing required by each recovery worker in a service to reach micro-elimination
- Cohorts of people to target testing



Example of a dashboard on page report



Using Data and Information to Support Micro-elimination continued

As a result, the Hep C U Later Project have undertaken schemes of work to resolve issues or address trends which the data has identified, for example:

- A high rate of the status 'offered and refused' was identified in one area, which led to the Hep C U Later team delivering training to staff. This training focused on engaging service users in testing using the 'opt out' approach and utilising peers from the Hepatitis C Trust.
- A member Trust reported that their testing numbers did not appear in line with the data held by the Hep C U Later team. This led to the Hep C U Later team undertaking a deep data dive and discovering that data was being inputted in a different area of the system and therefore the testing data was not captured by NDTMS. The service produced guides to support their staff in the correct process for recording.
- Several deep data dives in partnerships with ODNs - ensuring service user's records across both disciplines are accurate. As a result, one service updated 71 sustained viral response results (Sustained Virologic Response (SVA) - post treatment results).

Patient numbers of those who require testing have been sent monthly to a number of member Trusts to support them in inviting cohorts who are at risk of hepatitis C in for testing. Equally, lists of people with a hepatitis C RNA (ribonucleic acid) positive status have been sent to providers on a regular basis to support their internal data quality work and to compare with the ODNs to ensure those who have had treatment are updated on their system.

Each NHS APA provider who is supplying the Hep C U Later team with data has received a bespoke presentation on their data, what it shows and what steps they need to take to reach micro-elimination. We have found this method to be extremely motivating for services.

Hep C U Later recognise there is more work to be done to resolve system issues which have an impact on data and have launched a quarterly Hep C U Later Data Forum in May 2022.

"Since the introduction of the HEP C U Later Data structure, CDAS has hugely benefited on the visual impact this has had, highlighting strengths and weakness within its existing management, providing focal points to improve on performance. Regular meetings to drive workforce and streamline processes has significantly impacted on the accuracy of real time data which accurately reflects the hard work of the team in ensuring we reach eradication of Hep C."

Lisa Nagington, Service Manager, Substance Misuse services, North Staffordshire Combined Healthcare Trust

Testing Data

The bar chart below shows the NDTMS testing data for the NHS APA for active service users from April 2021 to March 2022. A total of **7017** hepatitis C tests were taken.

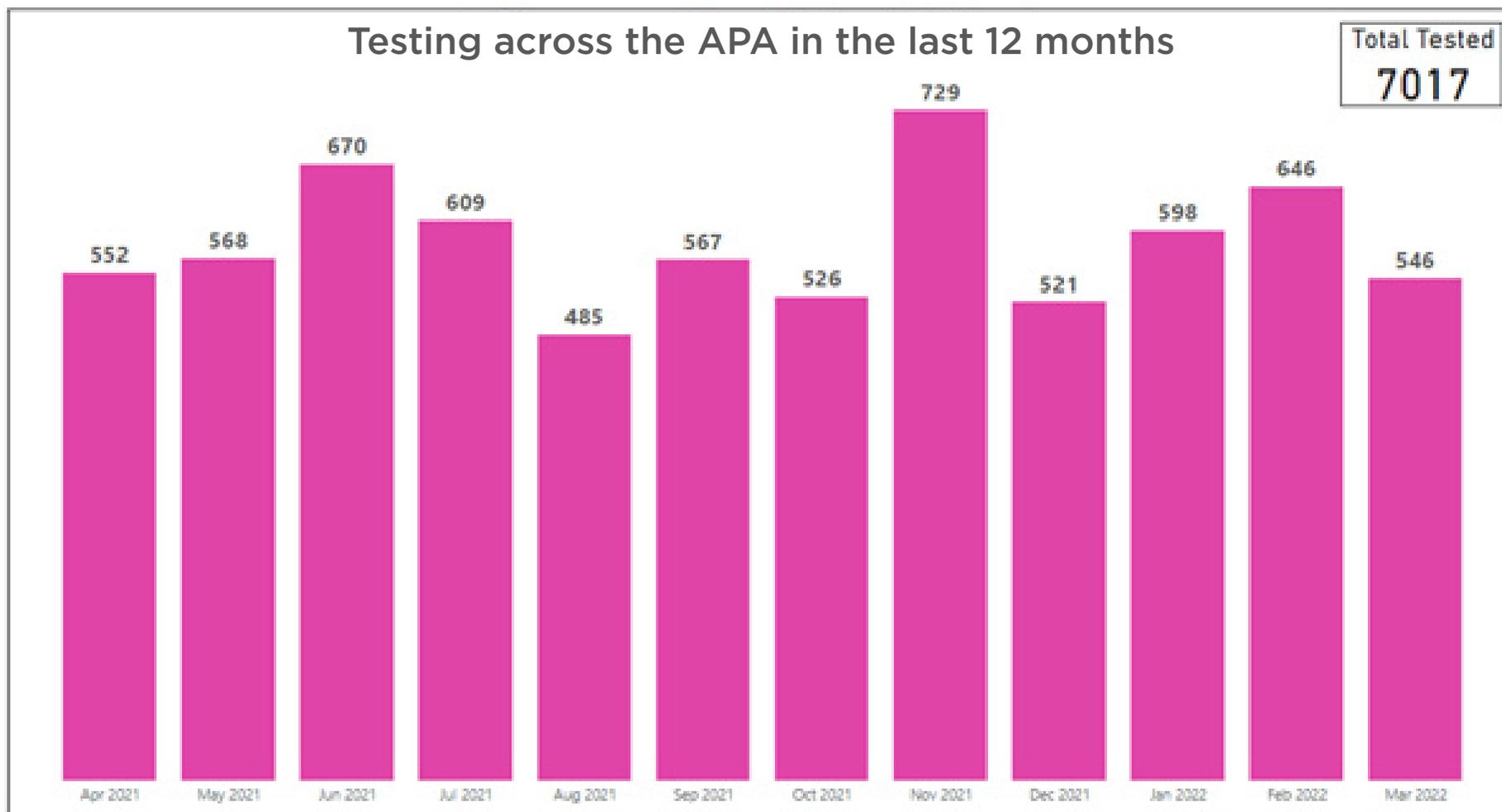


Fig 1

The stacked bar chart below shows the testing numbers per month for each NHS APA service from April 2021 to March 2022. The black line is the cumulative number of tests over time.

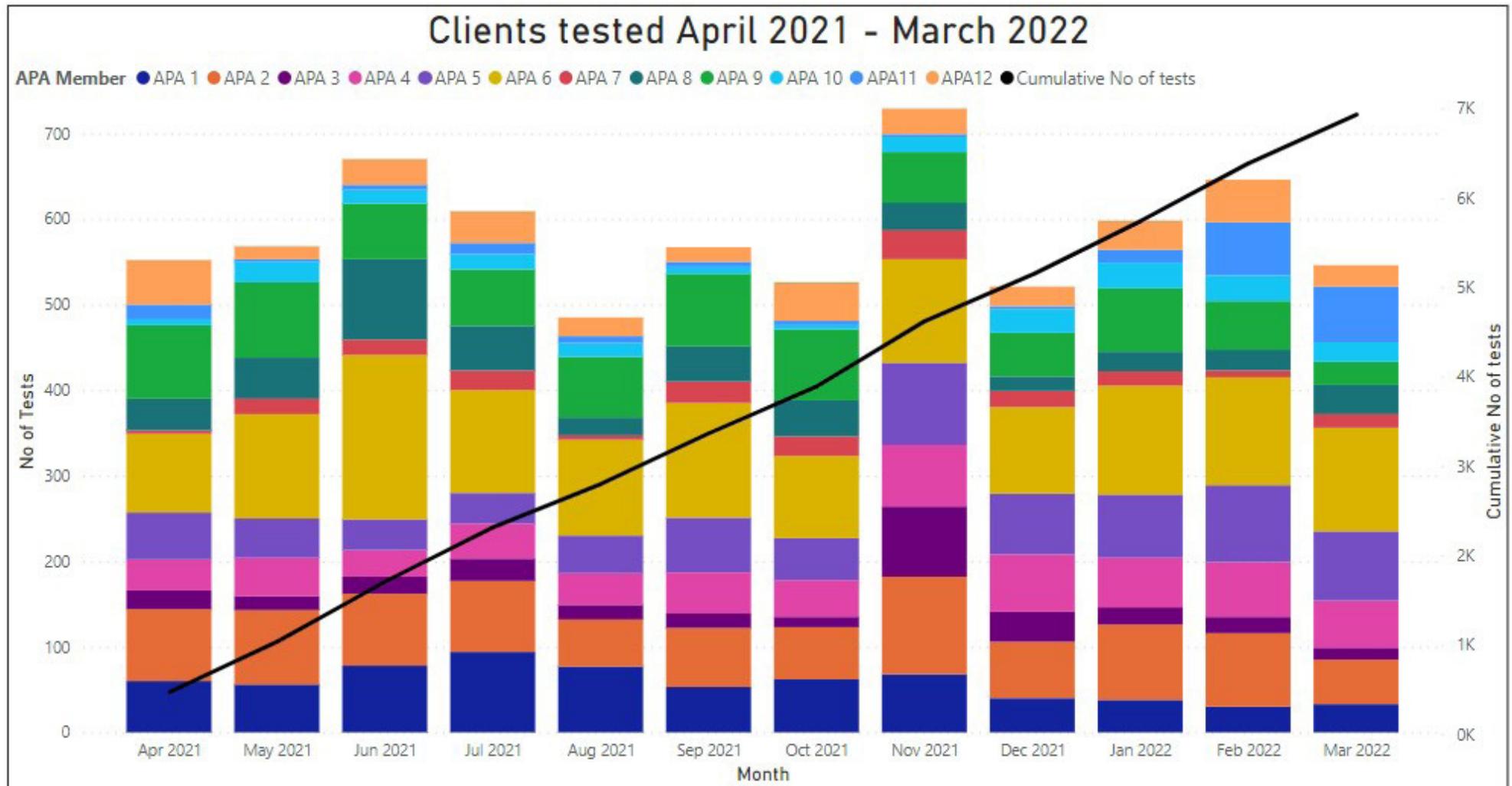


Fig 2

The bar chart below shows the monthly testing numbers for each month, comparing the year April 2020 - March 2021 to the year April 2021- March 2022. Every single month in the year April 2021-March 2022 saw an increase in the numbers of people tested in comparison to the previous year. The highest testing month was November 2021.

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.



Fig 3

The number of tests carried out across the NHS APA in April 2020 - March 2021 was **3762**.

The number of tests carried out across the NHS APA in April 2021 - March 2022 was **7071**.

We have nearly doubled our testing in April 2021 - March 2022, with an **86.97%** increase in testing over 2020-2021.

Offered and Refused

The graph below outlines the last 6 months where the Hep C U Later team have started data integrity work alongside supporting services to meet the micro-elimination criteria. It shows a reduction in the number of people with the status 'offered and refused'.

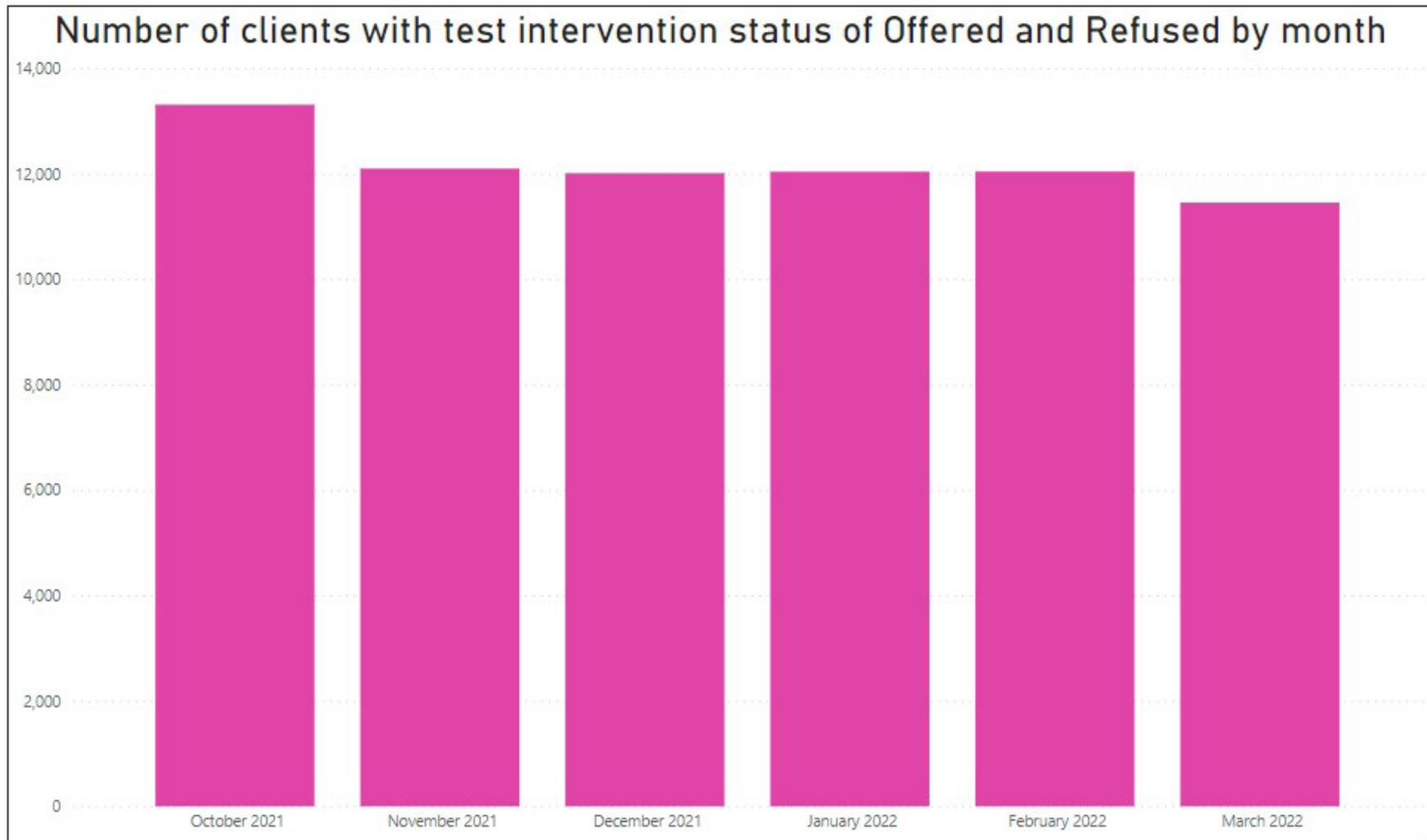


Fig 4

Treatment Data

The data below shows the number of RNA positives listed within each NHS APA service. It is worth noting that the number displayed on the graph will 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.

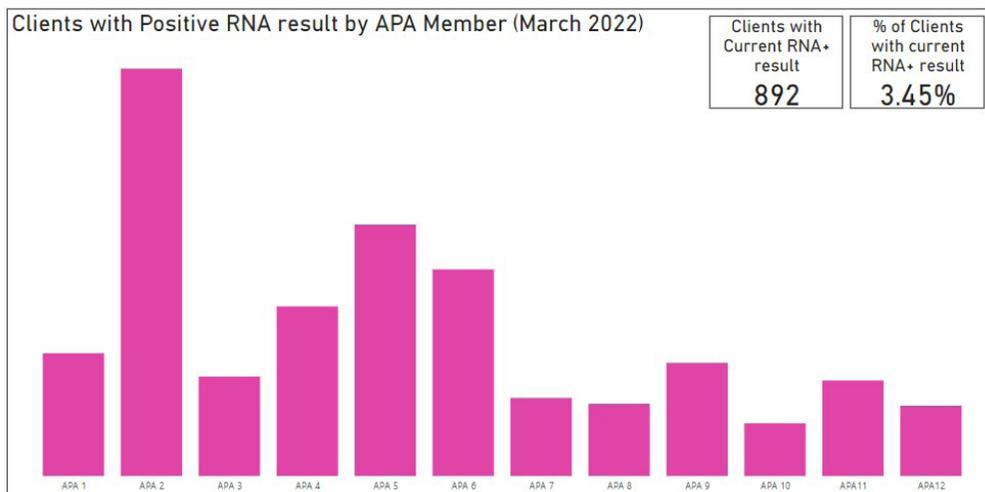


Fig 5

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

In this past year we have referred an average of 40 people per month to treatment across the NHS APA.

The total number of people listed as RNA positive across the APA on the 31st March 2022 was **892**.

Figure 6 shows the 'RNA negative - cleared by treatment' data for active service users across the NHS APA from April 2021 to March 2022. There was a noticeable dip in December 2021 which is likely due to a mixture of the Christmas holidays and staff sickness reported by member services at that time, however, the number of those listed as 'RNA negative - cleared by treatment' has continued to increase steadily.

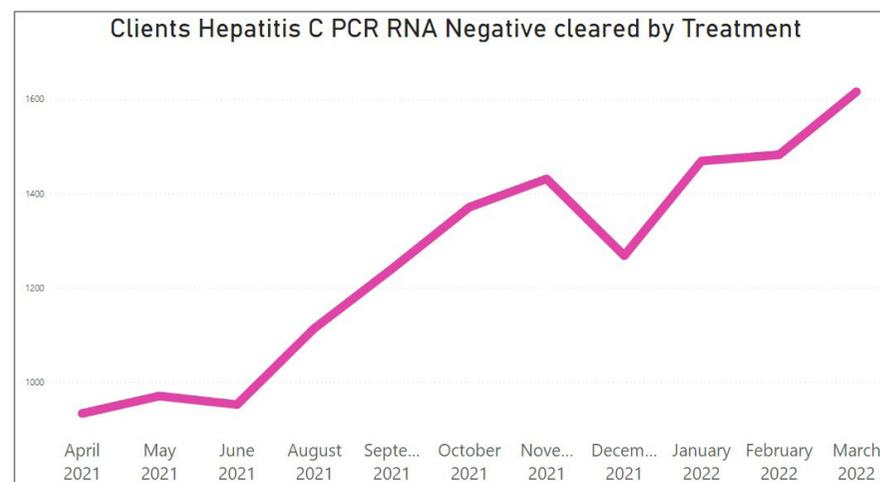


Fig 6

Data Summary

Despite NHS APA member Trusts experiencing great challenges because of Covid-19, such as restoration, redeployment and sickness 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.

"We have worked with the Hep C U Later analyst to produce a set of data quality metrics that support our service delivery model. These reports have aided us in identifying those clients who have been offered a test and accepted it but have not had this followed up easily. The services use these reports to follow up on those service users that still require testing, those who need to be re-offered testing and to identify data quality issues that need to be fixed.

These reports have been invaluable in enabling the services to make marked improvements in testing across the Achieve (GMMH) footprint. They have also been useful to look at future service planning and testing capacity across the different services.

The summary information is shared with the senior leadership team for their monthly meetings, and it is evidenced in these report's the work that is being carried out to meet the target of Hep C eradication across the footprint.

Having this information directly from the Hep C U Later programme has alleviated some of the pressures on our business intelligence department having to provide regular and ad-hoc complex reports."

Sandra Kite, Performance Lead, Specialised Services network, GMMH



Hep C U Later team at a testing event at One Recovery Bucks.
Candie Lincoln, Louise Hansford and Deanne Burch

Since the departure of Vicky Holden and Simon Morton from the team, Deanne Burch has been overseeing 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:

- Since commencing their hepatitis C steering group last year GMMH have successfully applied a systematic approach to minimising the barriers to testing and treatment, some of which has included:
 - Shortening the results giving pathway
 - Shortening the pathway to accessing treatment
 - Incorporating hepatitis C into daily flash meetings
 - Rolling out training across all four services
 - Ensuring testing is a core part of outreach
 - Building the capacity of their BBV leads
 - Completing regular testing events across the area
 - Offering incentives vouchers* for testing
 - Implementing a dashboard for staff to alert to testing which is due
- They are currently working on mechanisms which allow them to complete data integrity work with Hep C U Later and the ODN.
- Testing numbers have doubled over the last 5 months and this new testing rate has been sustained.
- Out of the four GMMH sites Bury is the closest to micro-elimination.

North Staffordshire Combined Healthcare NHS Trust – Stoke CDAS:

- The Stoke CDAS team continue to meet their treatment targets each month
- There are plans in place for the Hep C U Later team to develop a training package for staff to maximise opportunities for reaching a whole team approach to testing, to ensure excellent recording of hepatitis C testing and a refresher on dry blood spot testing.
- The Stoke CDAS BBV Lead completes regular outreach with a peer lead from the Hepatitis C Trust.

Merseycare NHS Foundation Trust – Brook Place:

- Merseycare previously ran 3 services, however, now runs just one large service (Brook Place).
- Hep C U Later provided hepatitis B and C training for all 3 services which included an update on how to take a dry blood spot test. There are plans in place for the Hepatitis C Trust to deliver further training on how to better engage people into testing and treatment.
- There is continual data integrity work in place with Hep C U Later and the ODN.
- The BBV Lead at Brook Place has organised testing and treatment drive weeks in collaboration with the ODN resulting in an extremely successful testing increase. In both February and March 2022 we saw 9 times the amount of testing carried out in comparison to their previous monthly testing average.

"The Hep C U Later team have supported our service in the drive towards eliminating Hep C by providing us with data analysis of clients tested/not tested. At the beginning, this helped us focus our attention on what needed actioning first. As the months of testing went on, we saw a massive improvement from the original data, so this was a proud positive moment to see the benefits of all the work done. We have monthly meetings with Hep C U Later, and we discuss what work we have done to improve testing, and what we need to do to keep improving and eliminate Hep C. The Hep C U Later team provides not only the support needed for future planning, but also offer different ways to how we approach testing, such as offering peers to attend our service, offer training for staff, promotional supplies etc and as we continue to keep moving forward on Hep C elimination I think keeping the collaboration and communication between all the teams involved is important as we all have the same focus and goals."

Hayley Curran, BBV Lead, Brook Place, Merseycare

"Hep C U later have been an invaluable source of support to Achieve as we move towards hepatitis C elimination - providing guidance and support around best practice so our patients receive the best possible outcomes. The Hep C U later team is approachable and always available to offer sound advice if queries arise and offer guidance around future planning. Contributions from Hep C U later at service steering groups has had a tremendous impact on service delivery, guiding our practice and providing oversight about performance. Hep C U later has ensured that Achieve has good links with the ODN by arranging meetings to develop relationships between services. Currently, Hep C U later are attending team meetings to update on progress and elimination targets which has been very well received by staff teams - this has been most useful to help motivate and focus staff across the service and also a great opportunity for the leadership team to help focus next steps. Practitioner webinars have been well received by staff members and have been a good learning opportunity and a chance to link in with BBV teams across the country. With ongoing support from Hep C U later I believe our service can achieve elimination of Hepatitis C in our service user groups."

Alison Hardie, Lead Nurse, Achieve Bolton, Bury, Salford & Trafford,
GMMH

Pennine Care NHS Foundation Trust - Stockport:

- Pennine continue to complete a good rate of testing within their service.
- The Pennine team have identified the need for exploring their data further and are currently working on an information governance framework which would allow a Hep C U Later data analyst to work intensively with them to complete data integrity work.
- After successfully rolling out phase one of their innovation fund bid* the Pennine service plan to explore commencing phase two of their bid. The valuable learning shared from this project undertaken by Pennine had a significant impact on the future data work the Hep C U Later team undertook.

Sheffield Health & Social Care NHS Foundation Trust - START:

- The Sheffield service have recently joined the project and are in the process of completing information governance processes to share their data, however, continue to complete good testing levels.
- The Sheffield team are completing regular data integrity work alongside the ODN.
- Hepatitis C training is currently being planned for delivery to the service team.
- Future plans for the service include a deep data dive utilising one of the Hep C U Later data analysts.

Rotherham, Doncaster & South Humber NHS Foundation Trust – Aspire:

- The Doncaster team are completing a series of work-streams which will give them further assurance around their hepatitis C data including building in notifications when testing is due. The RDASH team have also delivered data masterclasses to their staff to support the correct inputting of data.
- The Hep C U Later team are supporting with regular data feedback so they are able to target testing and update their systems. The service plan to use vouchers to incentivise testing amongst those who are most at risk.
- The Hep C U Later team presented a hepatitis C update and details around their data at their recent team meeting with a highly positive response from the staff.

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

- The Health Shop's innovation bid* was extended due to delays in implementation caused by Covid-19.
- The project continues to go from strength to strength, incorporating multiple innovations to reach people with severe multiple disadvantage such as:
 - Delivering re-infections training to staff, hostels and service users
 - Incorporating minimally invasive testing techniques such as antibody swabs
 - Utilisation of a testing and treatment van which links hepatitis C interventions with other forms of much needed health care
 - Flexible delivery of hepatitis C treatment
 - Utilising Cepheid RNA testing to shorten the testing to treatment pathway
 - Continual data integrity work and collaboration with the ODN
 - Testing events, education and materials which reach people in communities who might not routinely access services such as the Roma community.
 - Bespoke access to treatment plans and assertive outreach
 - Compiling 'partner packs' for friends and family to be tested

"The Hep C U Later team have been instrumental in our ambition of the micro-elimination of Hepatitis C within the service. They provided support on so many different levels. Regular meetings with coordinator, localised and team specific data clearly demonstrating successes and areas for improvement with respect to the elimination criteria. Education and networking via board meetings and webinars and action planning to ensure we have a clear strategy and focus. Our service has never done anything like this before, the Hep C U Later team are always there to answer questions and provide information. Whether it relates to marketing/social media, new equipment, such as the Cepheid machine or celebration of innovation (reinfection training). The Hep C U Later team are now an extension of our local Hep C project - we couldn't do it without them!"

Louise Wilkins, The Health Shop, Nottingham

Inclusion (Part of Midlands Partnership NHS Foundation Trust) - Thurrock, Telford, Buckinghamshire:

- Inclusion launched their Hepatitis C strategy and aim to micro-eliminate across all of their services by March 2023. Significant work has been undertaken to resolve barriers to testing and treatment which the Hep C U Later team have led on including:
 - Communicating regular hepatitis C bulletins which detail resources staff can use
 - Incorporating a hepatitis C focus into the staff supervision template
 - Bespoke service level data presentations given to each team
 - Supporting a data lead to launch a spreadsheet across all services which informs staff of upcoming testing which is required and potential data anomalies
 - Devising an alteration to the clinical recording system which captures treatment starts, treatment completions and SVR testing dates.
 - Launching an interactive hepatitis and the liver workbook for staff
- One Recovery Bucks have completed a deep dive of their data and have treated high numbers having micro-eliminated previously. They have completed work to ensure the regular feedback of tests required, work to ensure the correct recording of hepatitis C data and hepatitis C training updates for new members of the team. Four testing events have been held utilising the Hepatitis C Trust, UKHSA UAM Survey of People Who Inject Drugs and Cepheid machine.
- Telford STaRS have a good level of testing in place and are currently on an upward trajectory.
- Inclusion Visions Thurrock delivered an extremely successful and collaborative health and wellbeing day in December 2021 which incorporated Cepheid hepatitis C testing, the ODN van, The Hepatitis C Trust, fibroscans, vaccinations, health, wellbeing and sexual health assessments. The team have a very low number of people left to test and all service users who were positive have been treated. It is likely they will micro-eliminate by May 2022.



Michael Sandiford-Turnock and John Wortley at a Thurrock testing event

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

- Wolverhampton completed a large testing event in November 2021 utilising incentives vouchers*. The testing numbers for this month were 4 times higher than their highest month of testing on record.
- The Wolverhampton service are working closely with The Hepatitis C Trust to complete regular testing events.
- The Hep C U Later team have supported with a hepatitis C update and a presentation of their data to the service, however, are planning another more in-depth training package for the team.
- Hep C U Later are organising a hepatitis C treatment pathway meeting to look for any opportunities to improve upon the pathway alongside the Hepatitis C Trust.
- The Solihull team continue to test service users and appear to have a reasonably small number of service users to test to reach micro-elimination. Hep C U Later hope to support Solihull with a testing event to target the service users who require testing.

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (The CNTW service has been overseen by Louise Hansford since Simon Morton left the Hep C U Later team):

- Deep data dives are currently being undertaken alongside training on dashboards.
- Hep C U Later have visited the service and action plans have been created.
- The service is linked with the ODN and have been supported to access the Hepatitis C Trust.
- Incentive vouchers* are being used to increase testing.

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

Inclusion (Part of Midlands Partnership NHS Foundation Trust) – Hampshire, IOW, Wessex ODN Clinical Van:

- Extensive work has taken place across Hampshire to deliver training and link in with the UKHSA UAM Survey of People Who Inject Drugs.
- Vouchers* are being used extensively to incentivise testing.
- The Hampshire Data Lead has developed a 'real time' report for BBV's and this is being sent to staff with clear actions.
- Supporting on NHSE projects - reinfections, needs assessment project and linking in the GP Tool to drug services data.
- A Capillary Blood Testing Pilot* has been completed.
- Hep C U Later have supported numerous testing events within the Isle of Wight using a clinical van and the Southampton ODN staff are running a regular outreach clinic on the island.
- The Wessex Clinical Van which is a collaborative partnership that sits under the strategic leadership of Hep C U Later has had an extremely successful year. It has reached into communities of people who do not access drug services, it has assertively outreached, and brought rapid testing using Cepheid machines and treatment to people across the Wessex ODN. The clinical van has continued to successfully bring harm reduction interventions to individuals such as naloxone, needle and syringe provision and harm reduction advice.

"Hep C U Later has supported our service to move towards elimination by:

- *Providing Cepheid testing equipment - non-invasive testing methods have been instrumental in inclusivity and addressing health inequalities as previously, clients with poor venous access would not always consent to testing. Same day diagnose of Hepatitis C through Cepheid testing has significantly reduced anxiety in our client group and has shortened both referral times and treatment pathway.*
- *Being instrumental in the Wessex Clinical Van Project.*
- *Dashboard on a page – this provides a clear overview of where each service is in regards to the elimination targets and supports us to target/focus work where needed.*
- *Access to incentive vouchers – this is supporting increased testing.*
- *Being invited to regular meetings/forums to look at BBV strategies and work streams*
- *General access to support through Hep C U Later as a whole*

Having a Hep C U Later manager that oversees the area of the Services I cover is extremely helpful- this has, and continues to be one of the most helpful resources. It provides ongoing support as/when needed and clear lines of communication."

Alan Howard, Hep C Hants P2P Coordinator, Inclusion

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

- Work to ensure data quality is ongoing and a BBV dashboard is being developed internally.
- An onsite Hepatology clinic has been initiated.
- A Cepheid machine is being used at Hounslow and 3 testing events have been facilitated.
- The team continue to work closely with the coordinators for CGL and WDP (Ealing and Brent)
- Vouchers*, testing events and linking with the multiple partners across CNWL is taking place to drive forward hepatitis C elimination efforts.
- The Data Lead from CNWL has been highly supportive of micro elimination work.
- An A&E project* concluded and suffered complications due to Covid, however, has produced lots of learning which has been shared.
- The Hep C U Later team have visited the sites and training has been delivered.
- DBST kits have been donated to support testing.

"Once again, thank you Louise for the training that you provided, it truly made a difference."

Eugenia Hlahla Outreach Nurse Practitioner (drugs and alcohol), Hounslow, CNWL

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

- Hep C U Later have supported the services with incentives vouchers* and are developing plans for further funding for leaflets and posters which support service users education around testing and treatment.
- Richmond have previously achieved micro-elimination.
- The SLAM BBV Lead has delivered sessions at the Hep C U Later Webinar and Practitioners Forum sharing her knowledge with other services.
- Deep data dives have been completed and the service has been supported to resolve issues around receiving results.

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

- Hep C U Later have supported with hepatitis C pop-up clinics.
- Hep C U Later and Bristol ODN have match funded a BDP Hep C Assertive Engagement Worker*.
- Testing events have been supported.
- Deep data work has been undertaken to cross reference all 245 RNA positive service users with ODN data.
- The Bristol Data Lead has been highly supportive of the micro-elimination work.
- The BBV Lead, Jess Oke, has received two awards for her work.
- The Bath Pop-Up Clinics* have been successful and there are plans for more in years 4 & 5.

"BDP and ROADS have found support from Hep C U later to be invaluable. Their expert knowledge around getting the best from NDTMS means we are now providing accurate statistics that evidence our activity to reach micro-elimination in Bristol."

Jess Oke, BBV Lead Nurse AWP, Bristol ROADS

Avon & Wiltshire Mental Health Partnership NHS Trust - Dorset (REACH):

- A High Intensity Test and Treat roadshow took place in European Testing Week November 2021.
- The Find a Friend project* was highly successful and enabled a new partnership with Exchange Supplies.
- Deep data work has identified complexities with the clinical system, however, solutions have been put in place.
- Bite size training has been developed and delivered to all staff.
- The Hep C U Later team collaborate closely with the Wessex ODN to ensure records are accurate and complete.
- A testing and treatment database has been built for the new BBV Lead and a shared drive for data has been developed and is being utilised.
- The Hep C U Later coordinator has strategic and operational management of the Dorset Clinical Van.
- A Mental Health Engagement Worker role was funded for one year*. A regular outreach clinic was set up which engaged three people who were RNA positive into treatment. There were lots of challenges but key learning has led to some successful events across mental health services.

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

- The Data Lead from I Access has been highly supportive of micro elimination work
- Hep C U Later have met with all teams and have monthly data sharing meetings with the ODN.
- Hep C U Later funded a postal testing innovation pilot*. There has been great learning and it has showed the schemes of work to be done to achieve micro-elimination. It identified two new people with a positive diagnosis which otherwise may have been missed due to historic injecting. The team have had an abstract accepted for the British Society of Gastroenterology.

"As a service, we are continuing our commitment to the micro-elimination work being undertaken nationally and are reviewing our processes to ensure we continue to demonstrate best practice in relation to BBV interventions. This includes acting on information received from our data team taken from several sources i.e. SystemOne and TOPs, working in collaboration with the ODN and accessing 'Wilma' the van / CNS and training delivery. We will be taking part in testing events in the summer of 2022."

Lynda Winn Manager, NMP, i access (taken from the I access/Hep C U Later Innovation Report)



Louise Hansford carrying out hep C testing training at CNWL

Hep C U Later Webinars

The Hep C U Later team launched a series of bi-monthly webinars in January 2022 on the following subject areas:

- Hep C Testing, Treatment and Results
- 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.

The engagement with Hep C U Later work following the webinars has been extremely positive. Each webinar is available on the Hep C U Later website (Home - HEP C u later).

"I found the webinar I attended very helpful, it helped me feel supported in my role, the information was solid and I understood it well. Because of the webinar I have looked at processes and will be delivering more harm reduction when clients come in for needle exchange. I have spoken to the wider team about this and got them on board and suggested training for the team to attend, we will be aiming for gold standard. I have also spoken with service users about what they want and I have connected with people that are doing a similar role as me. Thank you for all the support"

"Thanks, it was all very informative, and highlighted what great work everyone is doing"

"Thank you - made lots of notes - really enjoyed it!"

Hep C U Later Awards

The Hep C U Later Awards in conjunction with the NHS APA and NHSE's HCV Elimination Programme will be launched in May 2022. The Hep C U Later Awards are a chance for our extensive partnerships to recognise the great achievements and tireless work we have seen from individuals, teams and partnerships across the NHS APA. The winners will be announced in the July Hep C U Later webinar and each winner will receive a trophy and certificate.

Hep C U Later Training

The Hep C U Later team have delivered bespoke hepatitis C training to multiple NHS APA drug and alcohol services across the country and additionally, a detox unit, sexual health services, a health inequality network and national prescriber's meeting.

In addition to traditional hepatitis C training the Hep C U Later team have also delivered specific Hepatitis C Micro-Elimination presentations to each service in the NHSAPA. These presentations have covered:

- The global, national and Hep C U Later strategy for Hepatitis C micro-elimination.
- A personalised data report on how close the service is to micro-elimination, identifying areas for improvement and celebrating successes.
- A breakdown of simple actions which can lead staff closer to micro-elimination.
- An overview of the key messages and next steps for each service.
- Key resources for the professionally curious.

Hep C U Later Data Forum

Following the success of the joint working across the NHS APA to support Gilead Sciences with the micro-elimination criteria and in recognition of some of the greater challenges services face with regards to data, Hep C U Later will be launching a quarterly data forum in May. The Hep C U Later Data Forum aims to bring together BBV leads and data leads from across the country to collectively 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.

Hep C U Later Practitioners Forum

Hep C U Later are very proud to have delivered a bi-monthly practitioners forum. 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.

Subjects the practitioner's forum has focused on so far have been:

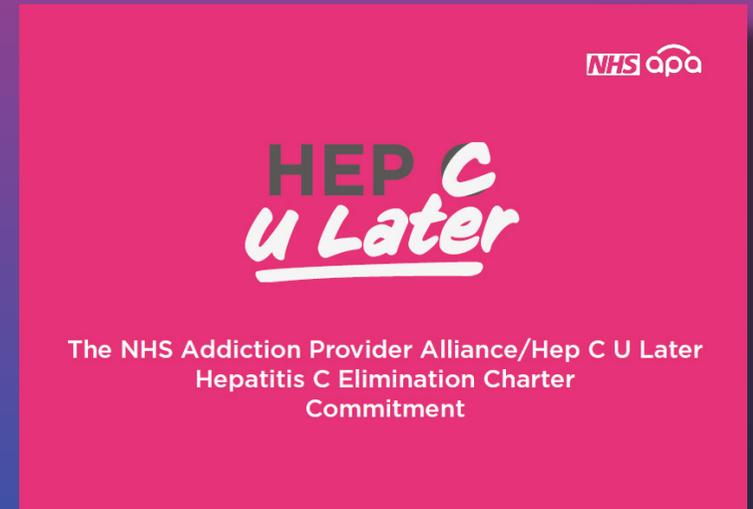
- Hep C elimination – policy and expectations
- Peer involvement in hepatitis C elimination
- Postal testing pilots
- Cepheid machines
- Clinical vans
- NSP Direct
- Standards for hepatitis C service delivery

Future practitioner forums will be focused on:

- Re-infections
- Needle exchange
- Sustainability
- Non-Medical Prescribing of Direct Acting Antivirals
- Adherence to hepatitis C treatment

Hep C U Later Charter

To re-establish commitment to the Hep C U Later project and the overall aim of hepatitis C micro-elimination in drug services Hep C U Later devised a charter. This charter is in the process of being signed by a couple of remaining NHS APA services.



Hep C U Later charter

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 (News - HEP C u later).

- Incentives for Treatment Pilot – Inclusion Telford
- The UKHSA UAM Survey of PWID
- Recovery Worker’s perceptions of the barriers to hepatitis C testing

Hep C U Later plan to release a further blog series in late 2022 on subjects such as hepatitis C stigma, re-infection, good practice in hepatitis C prevention, hepatitis C training, drug related deaths and future planning for maintaining micro-elimination.

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. This benchmarking tool has been used to establish where there may be gaps in hepatitis C related service provision. The Hep C U Later Standards help services to identify key actions to improve service delivery and ensure good quality and resilient working practices.

HEP C U Later

Hep C U Later Standards Review

The purpose of these standards is to ensure NHS APA services meet good practice measures in relation to Hepatitis C work. It is hoped that benchmarking each service against these standards will support the service to move closer to Hepatitis C elimination.

Service: _____ Date: _____

Standard Number	Standard	Standard Detail	Overview (what are we doing well? Where are the gaps?)	What do we need? (resources, financial support, data, links/pathways, pathways, education)
1.	BBV Leads	1.1 - Each service has a designated BBV Lead/BBV Champion. Eg. The service has a designated member of staff who leads on and champions Hepatitis C work. Duties would include driving forward testing within the service, working collaboratively with Hepatology, peers and other organisations, using data to identify who requires a test.		
2.	Engaging service users in testing:	2.1 - All service users are proactively and routinely offered a hepatitis C test using the 'opt out' approach. Eg. The offer of testing is given proactively but also routinely and when offered it is offered in		

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Hep C U Later standards review

As a time limited project, the Hep C U Later team are conscious of ensuring that effective working practices are resilient to the future withdrawal of Hep C U Later as a resource. We are committed to doing everything we can to ensure hepatitis C testing is considered 'core work' for individuals and organisations, that commissioning supports this and the workforce is suitably skilled and educated.

The Hep C U Later team meet regularly with the Gilead Sciences led national Drug Treatment Service Provider Forum, which aims to bring together national BBV Leads from across the sector to work in partnership. The group focuses on campaigns linked to testing weeks, the sharing of good practice and ensuring an excellent standard of hepatitis c interventions across the national drug treatment footprint. Hep C U Later have been working alongside the Drug Treatment Sector Provider Forum, Gilead Sciences, the Hepatitis C Trust and NHSE to finalise a hepatitis C micro-elimination criteria which can be used across England using common data fields. It is hoped that the criteria will be fully agreed in May 2022.

Following on from the launch of the Hep C U Later Standards, Gilead Sciences and the Hep C U Later team hope to collaborate with the National Drug Treatment Service Provider Forum to produce a national set of standards which drug services can work to and commissioners can use when writing tender requirements.

Hep C U Later have released regular newsletters updating the sector on the work being carried out to micro-eliminate hepatitis C.



Louise Hansford, Hep C U Later Coordinator for the South and London, and Jess Oke, BBV Lead Nurse

Year 3 Money for Hepatitis C Related Interventions

In previous years, the Hep C U Later project have supplied funds to NHS APA service who completed an innovation bid. Whilst we have seen multiple successes with this we wanted to give our member services a greater level of flexibility this year. Funds were allocated to each service based on the number of service users in drug and alcohol treatment. Many services have used this money flexibly to respond to their own unique needs as a service.

Some of the funds have been spent on:

- Promotional materials
- Leaflets and resources
- Travel to hepatitis C appointments
- Incentives vouchers (for testing and treatment)
- Temporary staffing (for data, testing, engagement, mental health support)

One of the most successful methods has been the utilisation of incentives vouchers to improve testing numbers. Some services have offered these during testing events and others have begun to use them routinely.

Awards

We are proud to work with some incredible individuals and teams. Some of the members we collaborate with have won the following awards:

- **Hep C U Later Central Data Team Alongside All NHSAPA Data Leads -** Illy Team of the Year 2021 - Silver Award
- **Jess Oke** - Innovation Bronze (3rd place)
- **Jess Oke** Systems Change Hero Award Golden Key Great Practice Awards 2021

As we have had the privilege of seeing outstanding pieces of work we have nominated some teams who have successfully won awards:

- **Queen Alexandra Portsmouth Hepatology** - Team of the Year Gold Winner - British Journal of Nursing Award 2022
- **Dorset Liver Service** - British Journal of Nursing Hepatology Team of the Year 2021

Over the coming year we hope to nominate our NHS APA partners and associated networks for many awards to recognise their commitment and value.



Louise Hansford, Robert Fair and Deanne Burch celebrating the NHS APA Data Leads winning the Silver Illy Team of the Year award

Partnership Working

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

- Linking drug services with the Hepatitis C Trust to ensure service users have the best level of support possible, ensuring pathways are effective and collaboration can be undertaken to assertively reach service users in the community.
- Working collaboratively with third sector providers of drug and alcohol services across the country, not only when they have joint contracts with NHS APA services, but also on a wider scale through Gilead Science's Drug Treatment Service Provider Forum to impact hepatitis C interventions across the country.
- 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.
- Regular contact with and support of the NHS England HCV Elimination Programme streams of work, with plans to support the roll out of their ambitious Needs Assessment Project in 2022.
- Ongoing collaboration with MSD and Cepheid using the Cepheid Machines to accelerate testing and treatment across the country.
- 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.
- Continuing regular work alongside ODNs to ensure treatment pathways are streamlined, stakeholders are working collaboratively and that data is shared effectively.



Picture of the Wessex Clinical Van out on the road



Partnership Working

"We are fortunate that we have unlimited medicines to treat people with HCV. However this resource is useless without knowing who has it and inefficiently deployed if don't done so without the intelligence of where it can be done so most effectively. The data we get from our colleagues at hep CU later allows us to make this vital step and is one of the big reasons we are approaching elimination in our ODN."

Mark Wright, ODN Manager, Wessex ODN

"Working with the Hep C U Later project has been a wonderful experience. Having joined the project part of the way through, I have felt supported and communication has been excellent. This project has captured the enthusiasm of staff at drug and alcohol services and has kept us focussed on the elimination target."

Sarah Montague, ODN Manager,
Nottingham ODN

"I'm delighted with the progress that's been made over the last year as our partnership with Hep C U Later has flourished, facilitating increasingly productive working relationships with APA's drug and alcohol services. Hep C Trust peers have delivered awareness training for staff, engaged and supported increasing numbers of service users to be tested and supported into and through hepatitis C treatment. Significantly this collaborative working approach has ensured that some of the most vulnerable service users have received comprehensive care throughout their treatment journey and we look forward to building on these successes as we progress towards elimination."

Danny Morris, Midlands & West Regional
Manager, The Hepatitis C Trust

"During 2021 / 2022 financial year we have worked more closely than ever before with the Hep C U Later program to drive forward the shared goal of elimination in our key addiction provider services. As we recover from the covid pandemic our focus on elimination is becoming more focused and the support of the program is supporting the delivery of targeted interventions within services is invaluable to the operational delivery network. We are seeing increased number of patients accessing life changing treatment across services."

David Byrne, ODN Manager, Cheshire and Merseyside ODN

"As manager of the Greater Manchester & Eastern Cheshire Hepatitis C Operational Delivery Network (ODN), working in collaboration with the Hep C U Later Programme Team, in particular their Lead Hepatitis C Elimination Co-ordinator, Deanne Burch, has been instrumental in driving positive change with our multitude of community partners, especially in some key areas of focus to the north of our catchment area. The Hep C U Later team are a key partner as we head towards the latter stages of our journey towards micro-elimination. A key area in which they've assisted my network here in the north-west has been increasing the communication, partnership working and data sharing. Deanne, along with her colleagues, have been a huge asset in using their plethora of contacts with partner agencies, such as drug treatment services, to initiate and facilitate conversations that have really started to help drive service improvement, which ultimately benefits service users that have had hepatitis C."

Tom Bills, Hepatitis C Operational Delivery Network Manager - Greater Manchester & Eastern Cheshire ODN

HEP C U Later

Marketing Campaign

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 looks 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 were started January 2020 and have grown in interest and gathered momentum with the content being shared.

Social media accounts were created to support the hep c elimination programme and to deliver on the 4 key messages identified above. We look ahead, with a continued commitment to the key messages and support to say Hep C U Later as our services across the NHS APA strive for micro-elimination.

The platforms currently being used include:

- Twitter
- Facebook
- Website

The key messaging identified for the Hep C U Later campaign includes:

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 has been leading the marketing and communication workstream for the drug and alcohol providers forum.

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

Our Hep C U Later team have also presented at multiple 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.

Over the past year we have seen:

- A reach of **1,299,813** (an increase of over a million since the last report)
- Impressions of **216,317**
- A following of **1,851**

The most popular posts have been posts from testing events, training the Hep C U Later team have delivered and posts related to the Wessex Clinical Van.

Over the past year we have taken part in:

- The Spring and Autumn European Testing Weeks
- World Hepatitis Day
- Gilead Sciences Hepatitis C Awareness Weeks
- These have led to a growth in our social media following and our brand awareness.

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



FACEBOOK

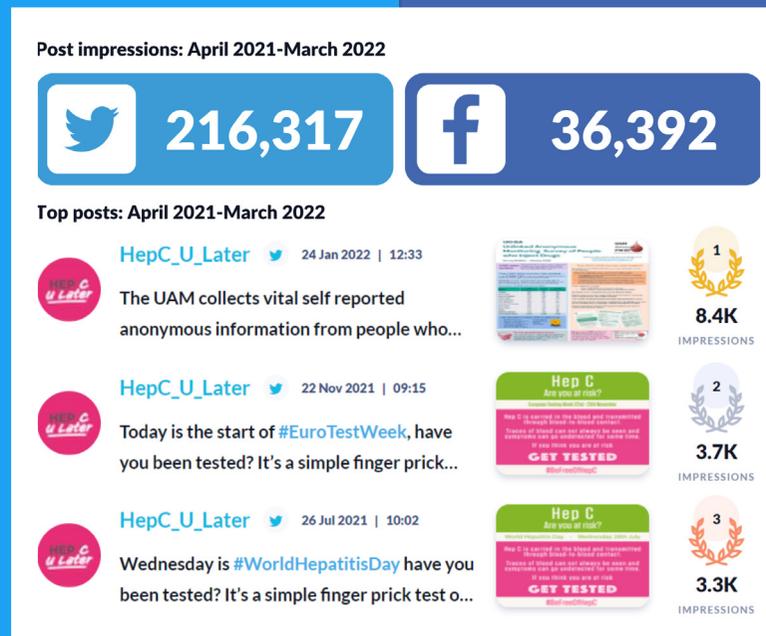
As identified above, the Hep C U Later Facebook account was predominantly set up with the concept of targeting service users to (i) raise awareness of HCV and (ii) provide a 'call to action' with advertising of pop up clinics or face-to-face testing events which have been impacted by Covid 19.

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

Over the past year we have seen:

- A reach of **33,752** (an increase of over a 30,000 since the last report)
- Impressions of **36,392**
- A following of **490**

The most popular Hep C U Later posts have been from testing events, 'meet the team member' and posts related to the Wessex Clinical Van.



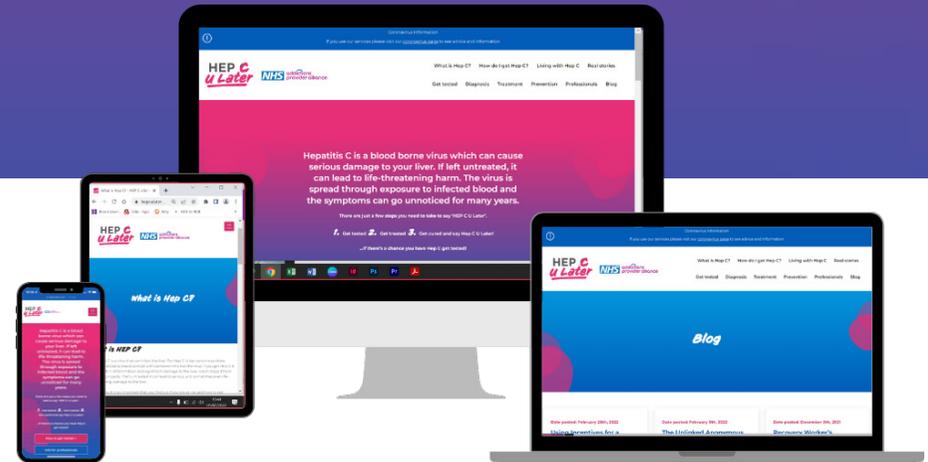
The Website

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, those at risk, testing facilities across the NHS APA sites, blogs, and success stories from those who have been treated and have successfully said 'Hep C U Later'.

The analytics from the Hep C U Later website identify:



12.4%

Increase in
overall website
users

Number of
visitors this
reporting year

6,756

45.2%

Increase in
visitors from
last year

Traffic from
social media
and referrals

53.6%

58.6%

Increase in
traffic from
social media

The Hep C U Later website has recently been updated with resources for professionals which includes:

- 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

Hep C U Later Project – Year 4 Plans

As we head into year 4 of the Hep C U Later project, with a significant level of experience behind us and as momentum continues to grow across the NHS APA, we are excited to reveal some key plans for the next year.

Year 4 Data Plans:

As our NHS APA member Trusts move closer towards micro-elimination, we intend to complete systematic work to improve data quality within each service before they declare micro-elimination.

Our additional data analyst will have a crucial role in improving this data across the NHS APA. This will include working in partnership with each member to minimise data quality issues such as:

1. Rectifying invalid test dates
2. Resolving where there are test dates but no result is inputted
3. Exploring instances where a person is RNA positive and listed as not referred to treatment
4. Assessing whether the percentage of 'assessed as not appropriate to offer' is within acceptable limits
5. Investigate antibody negative and RNA positive results

Additionally, it is expected that the data analyst will be able to support NHS APA member Trusts where they are experiencing significant issues with data within their local recording systems.

In a broader sense, data will increasingly be used to identify where Hep C U Later resources need to be focused to provide intense input which drives change.



Picture of the Wessex Clinical Van out on the road

Hep C U Later Project – Year 4 Plans

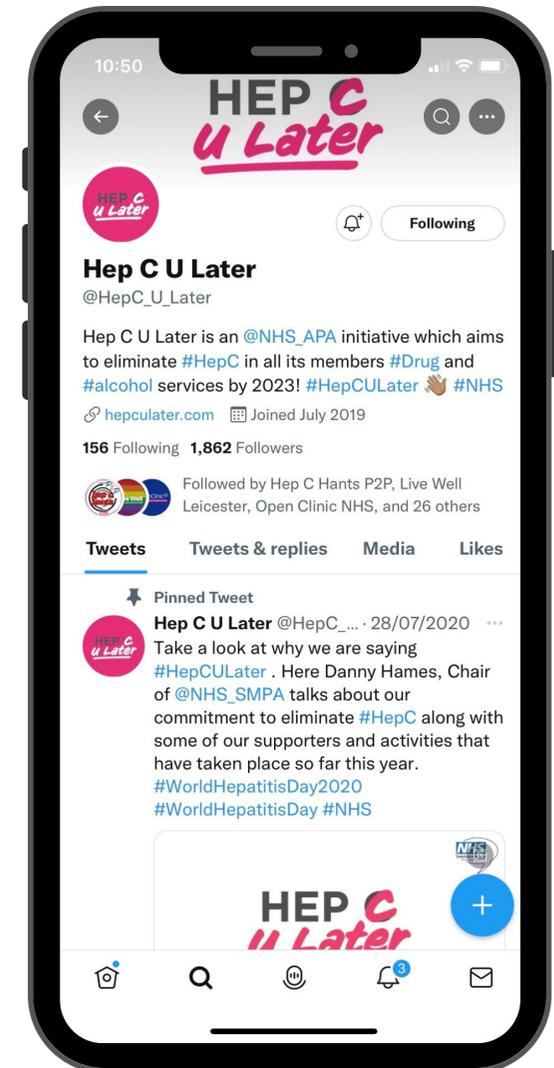
Year 4 Communications Plans:

Due to the success of the Hep C U Later online social media campaign we aim to continue with developing our online and social media content. Our goals for year 4 include:

- Expanding our reach towards professionals in different areas of healthcare
- Expanding our reach nationally and globally
- Continuing to increase our twitter followers
- Developing our online content
- Releasing practical content for use by healthcare professionals
- Increasing our interactive content

We will achieve this through:

- Developing practical resources, leaflets, posters, workbooks and guides
- Publishing blogs (both internal and external guest blogs) and articles
- Continuing with the Hep C U Later quarterly newsletter
- Publishing interactive content such as hepatitis C training slides, toolkits for increasing testing and treatment.
- Developing a strategic comms plan for testing events, including social media squares in collaboration with external key stakeholders
- Publishing reports of innovations
- Releasing content alongside campaigns from other hepatitis C related organisations
- Seeking opportunities to reach national health and social care groups to deliver hepatitis C awareness
- Presence at national and global conferences



Hep C U Later Project – Year 4 Plans

Year 4 Training and Development Plans:

With the extension of the joint working agreement with Gilead Life Sciences into years 4 and 5, Hep C U Later are very excited to develop the role of a Training and Development Lead. The purpose of this new post will be:

- To deliver bespoke hepatitis C and harm reduction training packages with a virtual and face to face component (often in collaboration with key partners in the areas such as the Hepatitis C Trust, ODNs and local BBV leads).
- To develop and launch resources for staff and service users which supports health promotion, education, the streamlining of work and efforts towards hepatitis C elimination.
- To organise the rotation of the Hep C U Later Cepheid machines and ensure data is fed back and BBV leads are trained.
- To develop and support testing events across the country.
- To further engage with key partners through visits, training and social media.



Inclusion Recovery Hampshire showing their support for Hep C U Later

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. It will no doubt be a busy year full of challenges, but also exciting opportunities to bring more people together to ultimately impact 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 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

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 www.hepculater.com

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