

**HEP C**  
*U Later*

# Dashboard on a Page (DOAP) Guide

## Hep C U Later Dashboard on a Page (DOAP) Guide

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*Please note – We recognise that the commonly accepted term ‘service users’ is not used throughout this document. There are instances where the term ‘client’ is used due to this being a term used by NDTMS both in guidance and when referring to data fields. Where possible we have changed the language, however, recognise this cannot be done in all cases.*

## Introduction to the DOAP report

The dashboard on a page, or DOAP, shows how each NHS Addictions Provider Alliance (NHS APA) member or service is doing in the journey to achieve hepatitis C micro-elimination.

The DOAP report is made up of two pages. The first page gives information about testing and the hepatitis C intervention status of service users. The second page gives information on how close to achieving micro-elimination the NHS APA member or service is.

The data used to generate the DOAP comes from the NDTMS data submitted each month to the Hep C U Later project, following the NDTMS monthly submission. NDTMS information includes six key pieces of data on hepatitis C, this data is recorded:

- At triage when a service user starts an episode of treatment
- When a service user completes one of their regular reviews or when their keyworker updates their case notes. This is called the Client Information Review (CIR)

To tell the difference between the two, the same name is used with those recorded at the Client Information Review being preceded by CIR, so for intervention status we have HEPCSTAT (Triage) and CIRHEPCSTAT (Client Information Review, CIR).

As a review always comes after the service user has started an episode of treatment the data held in the CIR field is usually more up-to-date than the data recorded at triage. For service users who have not yet had a review we use the information recorded at triage.

All information used in the report comes from service user who are “active”, these are service users that have not been discharged on the reporting date which is taken as the last day of the month.

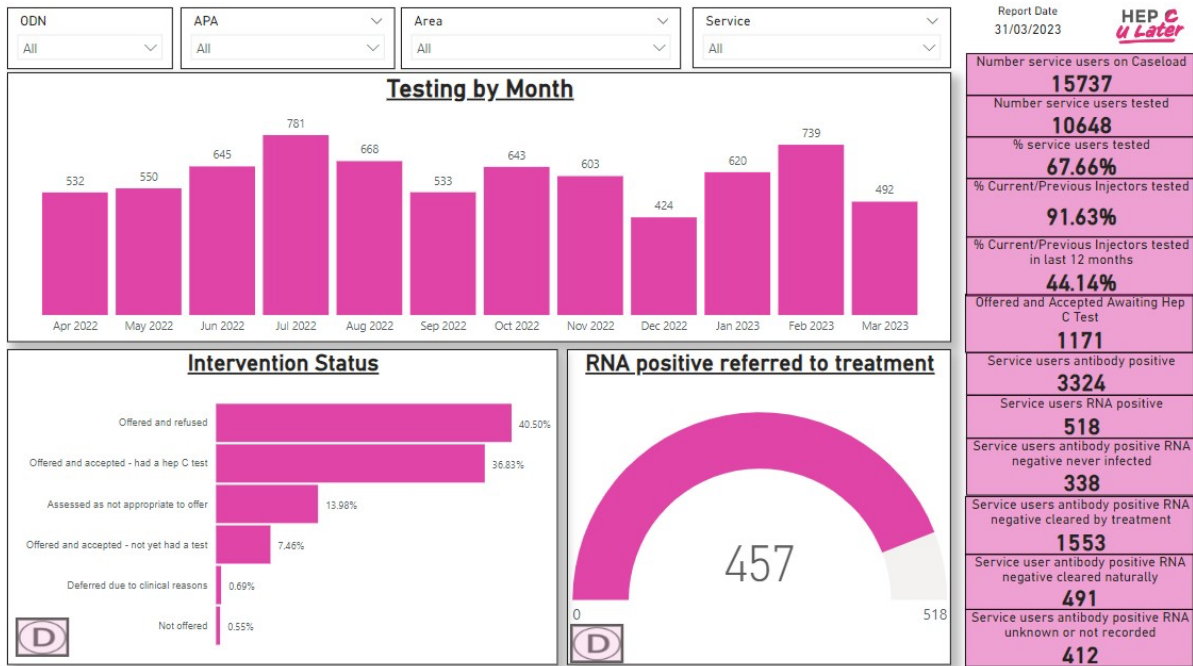


### Something to consider ....

*The dashboard is created from the last information submitted to the Hep CU Later team. It may have changed/been updated since the information was shared and will be updated on the next dashboard.*

A full breakdown of the NTDMS fields used is included at Appendix A. Appendix B explains what the boxes on the report mean for meeting the micro-elimination targets. Appendix C details the Criteria 4 calculation, definition (numerator/denominator) and the processes used when reaching and declaring micro-elimination.

**DOAP - Page 1**



We will now go through what each of the 3 charts and the 12 boxes mean and how they are calculated.

**Chart 1 - Testing by month**



*"Shows the number of tests completed in each calendar month"*

**Technical Definition:** The date period is taken as a rolling 12-month period from the current report date. NDTMS records the test date in 2 places:

- At triage this is recorded as the HEPCTSTD
- At the Client Information Review (CIR) and is recorded as CIRHEPCTSTD

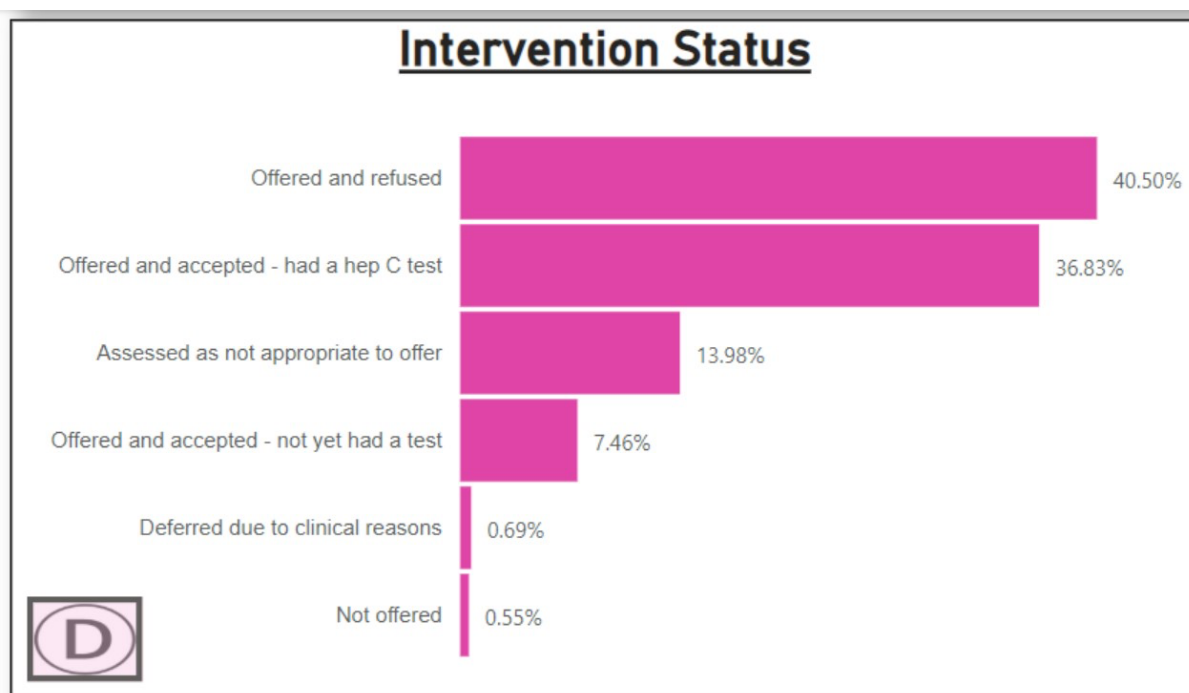
The test date used is the most recent test date, usually from the CIRHEPCTSTD.



**Something to consider ....**

It is worth noting that due to how tests are added to NHSAPA members' clinical recording systems there can sometimes be a time lag in the total number of tests in the last two months shown on the DOAP.

**Chart 2 - Intervention status**



*“Latest Hep C Intervention status - % of service users”*

**Technical Definition:** In NDTMS the Hep C intervention status is recorded both at Triage and CIR as HEPSTAT and CIRHEPSTAT. The latest (most recent) value is used for each service user in the service.

The chart displays the different status code in the NDTMS Hep C Intervention status and shows the percentage of service users who are “active” in that status. More details on the HEPSTAT statuses is included in Appendix A. There are a number of statuses that were redacted in dataset P. You may have clients who have these redacted statuses, specifically referral to treatment, and therefore they will not be shown on the chart.

Some of the statuses that you may want to monitor are:

- **Assessed as not appropriate to offer.** This is the status used for stating it is not appropriate to offer a Hepatitis C test. There will be a Hep C U Later video presentation guide on this that you can find on the Hep C U Later website.
- **Not Offered.** All service users should be offered a hepatitis C test. Hopefully over time the number not offered will become zero.
- **Offered and accepted – not yet had a test.** People with this status have agreed to having a test but have not yet had one, these would be key people to support to get tested.



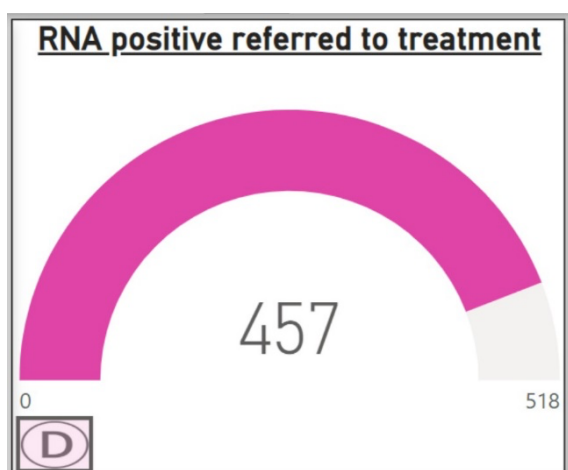
**Something to consider ...**

The Hep C U Later team would always recommend that you complete an audit of those who are listed as assessed as not appropriate to offer if the percentage is high. This is to ensure that the status is used appropriately. It is important to understand that if a person with a current or previous injecting status has not had at least one test they could not be considered for this status. There are several ways this can be done:

- Look at a small number of case notes to ensure there are no risk factors
- Compare those listed as AANATO and with the service users' latest TOPs (to look for injecting in last 28 days).

Similarly, rates of offered and refused and deferred for clinical reasons should also be monitored to ensure they are being used appropriately.

**Chart 3 - RNA positive referred to treatment**



*“Number of service users RNA positive who have been referred for Hep C Treatment”*

**Technical Definition:** This gauge chart shows the number of service users who are hepatitis C RNA positive that have been referred to treatment. It also shows the total number of service users who are hepatitis C positive.

In the latest NDTMS dataset (Dataset Q), if a service user is referred for treatment it is recorded in REFHEPCTX (Triage) and CIRREFHEPCTX (Client Information Review).

A service user's Hepatitis PCR (RNA) status is recorded in HCVPCR (Triage) and CIRHCVPCR (Client Information Review). The latest (most recent) value is used.



### Something to consider ....

Only new assessments or new CIRs entered after April 2020 (introduction of CDS-P) will show in the information above.

This means if a service user has been in service for a long period of time, it will not show until a new CIR is completed and uploaded.

If your numbers look low here, please check an updated CIR has been completed.

*n.b. Please note the Hep C U Later team can update this information with your old CDS-O information. Please speak to your Hep C U Later Coordinator to find out how.*

Now we have gone through the three main charts, the next section details the boxes shown on the right hand side of page one of the dashboard.

## Number service users on caseload

Number service users on Caseload

**15737**



*"Total number of active service users"*

**Technical Definition:** This is the number of unique individuals, who are "active" as service users in the service on the last day of the month in accordance with NDTMS submission practice.

## Number service users tested

Number service users tested

**10648**



*"Number of active service users Hep C tested"*

**Technical Definition:** These are the number of active service users who have a valid Hep C test and test date recorded. If a service user has been tested more than once only their latest test is used.

## % service users tested

% service users tested

**67.66%**



*"Percentage of service users active in the service with a valid Hep C test and test date"*

**Technical Definition:** This is the percentage of all service users who are "active" (not just those who are listed as having a current/previous injecting status) who have had a hepatitis C test. This is calculated by dividing "Number Tested" by the "Number on the Caseload".

## % Current/previous injectors tested

% Current/Previous Injectors tested  
**91.63%**



*“Percentage service users who are active, with a current/previous injecting status, and a hepatitis C test and test date”*

**Technical Definition:** An “active” service user’s injecting status is recorded at Triage in the NDTMS INJSTAT field. This records if a service user is listed as currently injecting or previously injecting (but not currently).

The injecting status is not recorded at a Client Information Review. An indication as to whether a service user is currently injecting can be found by using the TOP data return of IVDRGUSE. This records how many times a service user has injected in the last 28 days, a number between 1 and 28 indicates that the service user is currently injecting. The difference between a service users injecting status at triage and from their Top data was not significant, and to adhere to best practice the injecting status at triage is used.

By selecting only service users that currently or have previously injected on the report date we can calculate the number of these service users who have had a test.

By dividing the two figures we calculate the result as a percentage.

## % Current/previous injectors tested in the last 12 months

% Current/Previous Injectors tested  
in last 12 months  
**44.14%**



*“Percentage of service users listed as currently/previous injecting hepatitis C Tested in the last 12 months”*

**Technical Definition:** This follows closely the methodology used in the ‘% current/previous injectors tested’ above. This includes service users who are currently or have previously injected and checking on the date of their latest hepatitis C test from either their HEPCTSTD or CIRHEPCTSTD, to see if the test date is within 12 months of the report date we can select only those service users who are currently or previously injecting and have a test date within 12 months of the current report date. This is then divided by the total number of current and previous injectors to give the percentage.

## Offered and accepted awaiting Hep C test

Offered and Accepted Awaiting Hep  
C Test  
**1171**



*“Number of service users awaiting a hepatitis C test who have accepted a test”*

**Technical Definition:** A service user’s hepatitis C intervention status is recorded in HEPSTAT (Triage) or CIRHEPSTAT (Client Information Review).

This records the status of a service user being offered a hepatitis C test. There are a number of possible responses (shown in Appendix A). Over the different NDTMS datasets the



responses have changed. This shows the number of “active” service users who have a current status of offered and accepted – not yet had a test.

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### Service users antibody positive

Service users antibody positive  
**3324**



*“Number of active service users with a positive antibody result recorded”*

**Technical Definition:** The service user’s antibody status is recorded in HCVAS (Triage) or CIRHCVAS (Client Information Review). With the hepatitis C antibody status once a service user is antibody positive they remain antibody positive. This takes into account both the current status of a service user using the HCVAS or CIRHCVAS values and whether the service user has ever been recorded as antibody positive.

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### Service users RNA positive

Service users RNA positive  
**518**



*“Number of active service users with a positive hepatitis C RNA result recorded”*

**Technical Definition:** The hepatitis C PCR (RNA) test result status is recorded in HCVPCR (Triage) and CIRHCVPCR (Client Intervention Review). There are 5 possible values available, these are shown in Appendix A. We use this to select only positive values and the most recent value so that service users who are RNA positive can be identified.

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### Antibody positive RNA negative never infected

Service users antibody positive RNA  
negative never infected  
**338**



*“Number of active service users with a positive antibody and negative RNA result recorded”*

**Technical Definition:** In the same way service users who are RNA positive, service users who have an RNA status of negative (never infected) can be identified at both Triage (HCVPCR) and Client Intervention Review (CIRHCVPCR). Before April 2020 there was only an option for the RNA status of negative, this covered both negative never infected and negative cleared by treatment and are now classified as negative (never infected). This along with the service user being antibody positive can be used to select only those service users who are antibody positive and RNA negative (never infected).

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### Antibody positive RNA negative cleared by treatment

Service users antibody positive RNA  
negative cleared by treatment  
**1553**



*“Number of active service users with an RNA negative (cleared by treatment) result recorded”*

**Technical Definition:** In the same way service users who have a status of RNA negative (never infected) can be identified at both Triage (HCVPCR) and Client Intervention Review

(CIRHCVPCR), service users who have an RNA status of negative (cleared by treatment) can be identified. In the same way service users with an Antibody Positive status can be identified. These service users are those that have been treated for and cleared of hepatitis C since April 2022.

### Service users antibody positive RNA negative cleared naturally

Service user antibody positive RNA negative cleared naturally  
**491**



*“Number of active service users with an antibody positive and RNA negative (cleared naturally) result recorded”*

**Technical Definition:** In the same way service users who have a status of RNA negative (never infected) can be identified at both Triage (HCVPCR) and Client Intervention Review (CIRHCVPCR), service users who have an RNA status of negative (cleared naturally) can be identified. In the same way service users with an Antibody Positive status can be identified. These service users are those that have been cleared of hepatitis C (natural through spontaneous clearance) since April 2022.

### Service users antibody positive and RNA unknown or not recorded

Service users antibody positive RNA unknown or not recorded  
**412**



*“Number of active service users with a positive antibody and RNA result of unknown or not recorded”*

**Technical Definition:** This figure represents the number of service users who are antibody positive and have an unknown RNA(PCR) test result status. The unknown status can indicate that the result of the test was inconclusive. In some cases unknown can mean that the result is unknown or waiting for the test results. A not recorded (Blank) value can indicate that the service user has not had a Sustained Viral Response (SVR) test.

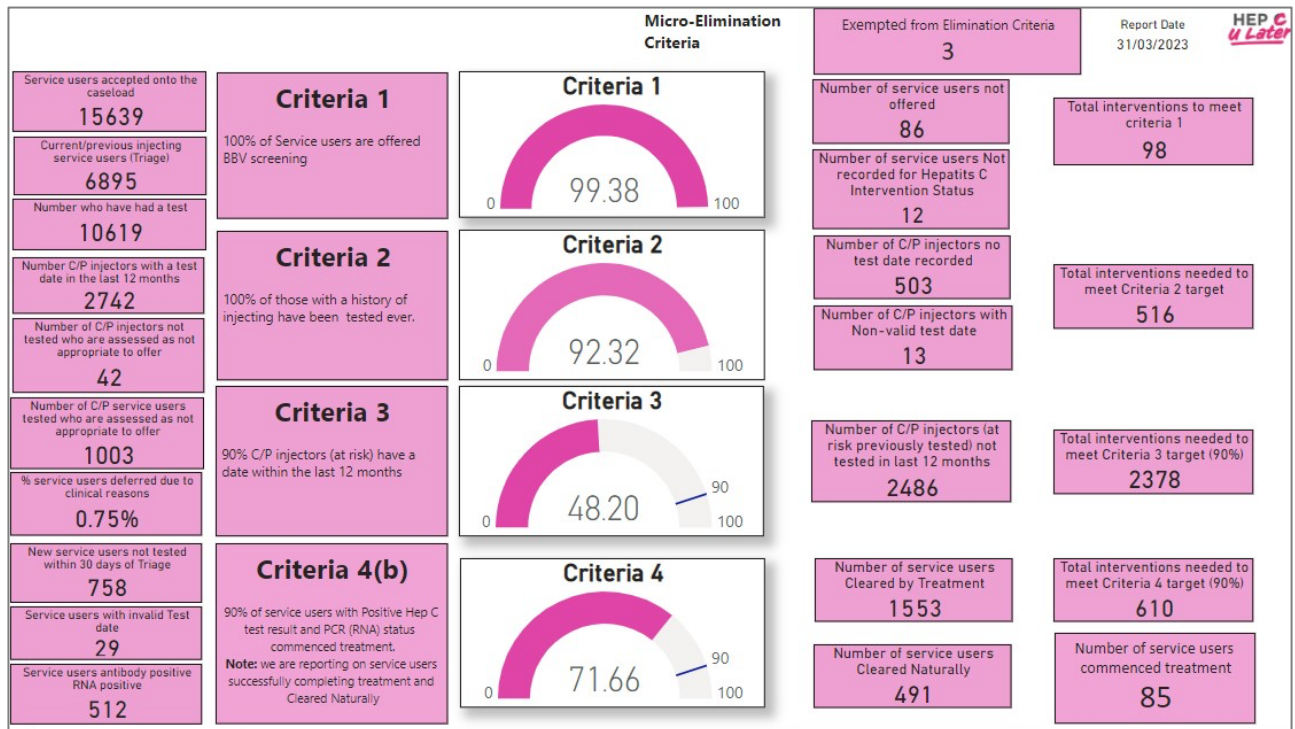


#### Something to consider ....

As we work towards micro elimination of hepatitis C the accurate recording of a service users PCR(RNA) test status will become more significant. The more accurate and upto date this information is, the easier it will be to declare micro elimination especially for criteria 4 (see page 2)

**DOAP - Page 2**

This page of the dashboard on a page report is the micro-elimination dashboard.



The information on this page is used by the Hep C U later team to support the services in reaching micro-elimination.

The nationally agreed micro-elimination criteria for drug and alcohol services can be viewed here:

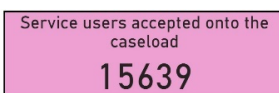


Hep C Micro Elimination Criteria



Hep C Micro Elimination Criteria

**Number of accepted service users on caseload**



*“Number of “active” service users with a valid HEP C STAT or CIRHEP C STAT recorded”*

**Technical Definition:** This figure is lower than the number of service users on the caseload on page 1. Here the figure uses the service user’s hepatitis C intervention status HEP C STAT or CIRHEP C STAT - whichever is the newest record. This figure does not include service users who have recorded:

- Not offered a Hepatitis C test (NDTMS code D)
- Have no record of being offered a Hepatitis C test (no data for the service user).

## Number who are current/previous injectors (triage)

Current/previous injecting  
service users (Triage)  
**6895**



*“Number of accepted service users with an injecting status of ‘current/previous injector’ at triage”*

**Technical Definition:** To comply with NDTMS guidelines this figure shows the number of accepted service users who at Triage were listed as either currently or previously injecting.

## Number who have had a test

Number who have had a test  
**10619**



*“Number of accepted service users that have a valid hepatitis C test date recorded”*

**Technical Definition:** This is number of accepted service users who have had a hepatitis C test at some time during their treatment journey that are “active” on the report date. A valid test date is defined as a test taken after 1<sup>st</sup> January 1993 and the up to and including the current report date, usually taken as the last day of the month.

## Number current/previous injectors with a test date in last 12 months

Number C/P injectors with a test  
date in the last 12 months  
**2742**



*“Number of accepted service users that have a valid Hep C Test date recorded that is within the last 12 months”*

**Technical Definition:** These are service users recorded as currently/previously injecting at Triage that have been tested in the 12 months prior to the report date (latest recorded hepatitis C test date is used). This figure excludes service users who have a current hepatitis C intervention status of not offered or those who have been triaged in the 30 days before the report date.

## Number of C/P injectors not tested who are assessed as not appropriate to offer

Number of C/P injectors not  
tested who are assessed as not  
appropriate to offer  
**42**



*“Number of Current/Previous injectors who have never had a hepatitis c test and are assessed as not appropriate to offer”*

**Technical Definition:** This is the number of service users who have a current HEPSTAT status of ‘assessed as not appropriate to offer’ from HEPSTAT or CIRHEPSTAT that were listed as currently or previously injecting at triage and have never had a hepatitis c test.

## Number of C/P service users tested who are assessed as not appropriate to offer

Number of C/P service users tested who are assessed as not appropriate to offer  
1003



“Number of Current/Previous injectors who have had a hepatitis c test and are assessed as not appropriate to offer”

**Technical Definition:** This is the number of service users who have a current HEPSTAT status of ‘assessed as not appropriate to offer’ from HEPSTAT or CIRHEPSTAT that were listed as currently or previously injecting at triage and have had a hepatitis c test.



### Something to consider ....

For a number of service users who are not coming into contact with the risks associated with hepatitis C transmission, e.g sharing equipment used for drug use, the need for an annual hepatitis C test may not be necessary and these service users should have their HEPSTAT changed to ‘assessed as not appropriate to offer’. Their risk status should be monitored and assessed on a regular basis and where necessary they should be offered a hepatitis C test and their HEPSTAT changed appropriately.

## % of service users deferred due to clinical reasons

% service users deferred due to clinical reasons  
0.75%



“Number of accepted service users with a HEPSTAT status of deferred due to clinical reasons”

**Technical Definition:** This is the number of service users who have a current HEPSTAT status of deferred due to clinical reasons from HEPSTAT or CIRHEPSTAT that were current or previous injectors at Triage. The percentage is calculated by dividing the number of these service users by the number of those listed as currently or previously injecting above.

## New service users not tested within 30 days of triage

New service users not tested within 30 days of Triage  
758



“Number of accepted service users with no valid hepatitis C test date recorded within 30 days of their triage date”

**Technical Definition:** These are service users who have been triaged in the 30 days before the report date that have not yet had a hepatitis C test following their recent triage.

## Service users with an invalid test date

Service users with invalid Test date  
**29**



*“Number of accepted service users with a recorded hepatitis C test date that is not valid”*

**Technical Definition:** An invalid test date is defined as one of the following

- A hepatitis C test date before 1<sup>st</sup> January 1993 (01/01/1993)
- A hepatitis C test date after the current report date, effectively in the future.

This is for service users who are active on the report date that have an invalid hepatitis C test date according to one of the above criteria.



### Something to consider ....

The rationale for the cut-off point of 1/1/93 is that testing for Hepatitis C was not widely available prior to this date. This is in line with the nationally agreed micro-elimination criteria.

For invalid test dates the Hep C U Later team can provide this information back to you. Invalid test dates that are set as future dates can often be easily rectified by looking at the individual’s case notes. For those who have a test date pre 1/1/93 we suggest re-offering testing.

## Service users antibody positive and RNA positive

Service users antibody positive  
RNA positive  
**512**



*“Number of active service users with a positive antibody and RNA result recorded”*

**Technical Definition:** By selecting the service users who are antibody positive and service users who are RNA positive the service users who are both can be identified and shown in the report.

## Exempted from Elimination Criteria

Exempted from Elimination Criteria  
**3**



*“The number of service users agreed to be exempted from the 4 micro-elimination criteria.”*

**Technical Definition:** These are service users who have been identified by the service as being exempt from the 4 micro-elimination criteria. This rationale for a service user being deemed exempt normally falls into one of three categories:

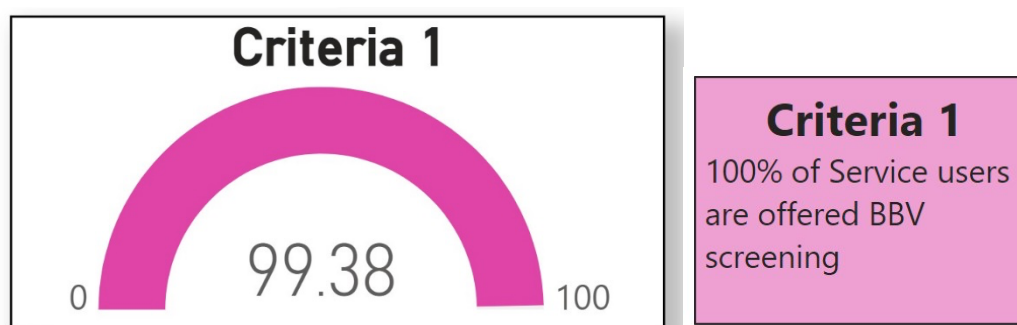
1. Service user is under palliative care
2. Service user is under the care of hospital/has a current severe illness
3. Service user is at a high risk of disengaging from drug and alcohol service (and all reasonable attempts have been made to engage them)

There is a full Hep C U Later procedure around any service user being exempted as well as the monitoring of their exemption status. Using the exemption criteria is normally rare for services and the numbers are not expected to exceed single figures for any service. The process for agreeing that someone is exempt is a robust, auditable and collaboratively agreed process. More details can be found in Appendix C.

## Micro-elimination Criteria

### Elimination Target 1

*100% of service users are offered a BBV screening.*



The gauge chart shows as a percentage the number of service users who have been offered a hepatitis C test against all the active service users on the report date. The service users who have been offered a hepatitis C test excludes those service users who have a latest hepatitis C intervention status of:

- Not offered
- No data recorded

The latest hepatitis C intervention status is taken from the HEPSTAT or the CIRHEPSTAT whichever is the latest for the service user.

The gauge shows the actual percentage for the service in large text below the dial. On the dial it shows the percentage for the whole of the NHSAPA as a thick black line. The end of the dial shows the target for the criteria, which in this case is 100%.



#### Something to consider ....

Those who are listed as not offered a test can be reflected back to the service so the test can be offered and the status can be changed. This is normally a relatively 'quick win' when it comes to meeting this micro-elimination target. Please get in touch with your Hep C U Later coordinator to discuss this further.

The following additional information is used to support the service in reaching micro-elimination target 1.

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### A. Number of service users, not offered a hepatitis C test

Number of service users not offered
86



*“Number of service users recorded as not offered a hepatitis C test”*

**Technical Definition:** This measure shows the number of service users who have a current hepatitis C intervention status set of ‘not offered’. This is recorded in HEPSTAT or CIRHEPSTAT whichever is closest to the report date.

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### B. Number of service users not recorded for hepatitis C intervention status

Number of service users Not recorded for Hepatitis C Intervention Status
12



*“Number of Service Users without a recorded hepatitis C intervention status”*

**Technical Definition:** This measure shows the number of service users that have no current data recorded for the hepatitis C intervention status. This again is taken from the service users HEPSTAT or CIRHEPSTAT, whichever has a closest date to the report date.

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### C. Total interventions to meet criteria 1

Total interventions to meet criteria 1
98



*“The number of interventions/actions needed by the service to meet Micro Elimination Criteria 1”*

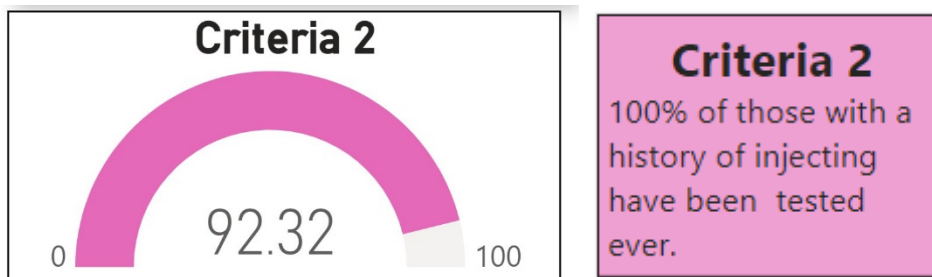
**Technical Definition:** This measure shows how many interventions or actions are need to be taken for the service to reach the target for the criteria. In this case there are 346 interventions required to meet the criteria because boxes A and B are added together.—This is the total number of service users needing some form of intervention to meet the elimination criteria. Intervention in this can be anything from data cleansing the service user’s record on the service’s clinical recording system to actually contacting the service user and offering them a test.

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## Elimination Target 2

100% of service users with a history of injecting have been tested ever.



This gauge shows the percentage of service users with a history of injecting who have ever had a hepatitis C test below the gauge. On the gauge the percentage across the NHSAPA is shown as a dark blue line as well as the target to meet criteria 2, which is 100%.

For a service user to be included as meeting the target they must:

- a) Have been offered a hepatitis C test by having a hepatitis C intervention status other than not offered recorded in HEPSTAT or CIRHEPCSTAT.
- b) Be listed as currently or previously injecting at the start of their current intervention (latest triage) recorded by the service users INJSTAT status.
- c) Have not had their latest triage within 30 days of the latest report date.
- d) Have had a hepatitis C test with a valid test date. A valid test date is either after 1<sup>st</sup> January 1993 or before the report date.

The following additional information is used to support the service in reaching micro-elimination target 2.

### D. Number of current and previous injectors with no test date recorded

Number of C/P injectors no test date recorded  
**503**



“Number of service users listed as currently/previously injecting with no valid test date recorded”

**Technical Definition:** This is the number of service users who were listed as currently or previously injecting at their last triage who do not have a hepatitis C test date.

### E. Number of current and previous injectors with non-valid test date

Number of C/P injectors with Non-valid test date  
**13**



“Number of service users listed as currently/previously injecting with an invalid test date recorded”

**Technical Definition:** As with (D) above, this is the number of service users who were listed as a currently or previously injecting at their last triage who have a hepatitis C test which is considered invalid - a date before 1<sup>st</sup> January 1993 or after the current report date.

## F. Total interventions to meet criteria 2

Total interventions needed to meet Criteria 2 target  
**516**

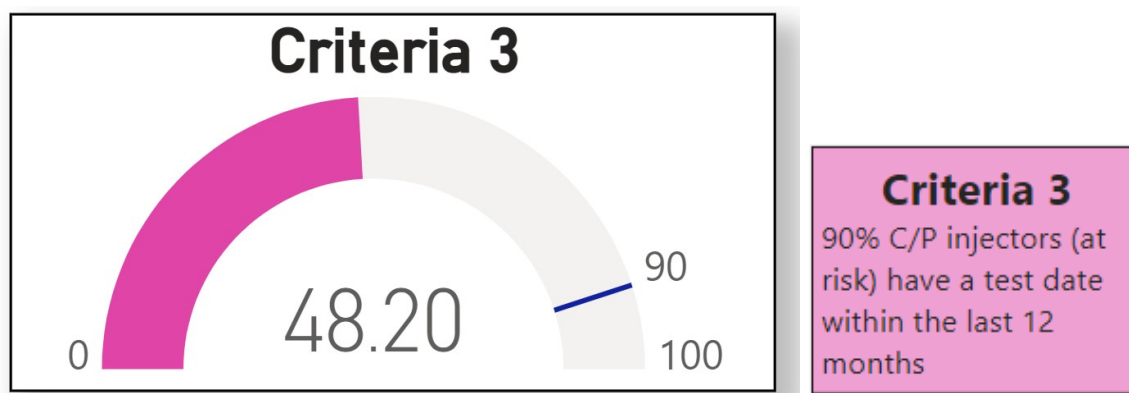


*“The number of interventions/actions needed by the service to meet micro-elimination criteria 2”*

**Technical Definition:** This figure is the number of interventions/actions needed for the service to meet micro-elimination criteria 2. This may be simple actions such as addressing incorrectly recorded test dates, or tests/dates recorded in case notes that need adding through a CIR. This could also be outstanding tests that need to be completed.

## Elimination Criteria 3

*90% of current and previous injectors (at risk) have a test date within the last 12 months.*



As with the other gauges this gauge shows the percentage of service users who previously injected who have had a hepatitis C test in the previous 12 months to the report date below the gauge. On the gauge the percentage across the NHSAPA is shown as well as the target to meet Criteria 2, which is 90%.

For a service user to be included in this criteria the requirements are:

- a) They must have been offered a hepatitis C test by having a hepatitis C intervention status other than
  - Not Offered
  - Assessed as not appropriate to offer
- b) They must be listed as currently or previously injecting at the start of their current intervention (latest triage) recorded by the service users INJSTAT status.

- c) That they have not had their latest triage within 30 days of the latest report date.
- d) That they have had a hepatitis C test in the 12 months prior to the current report date.

The base for the percentage is taken from service users who meet the criteria above except for (D) having a test in the last 12 months.

The intervention status of ‘assessed as inappropriate to offer’ allows for the service user who is not at risk to not to be asked for a hepatitis C test every year. Hep C U Later have a video presentation guide on this which can be found on the Hep C U Later website.

If a service user has not been tested in Criteria 2 they will also need to be tested for criteria 3.

The following additional information is used to support the service in reaching micro-elimination target 3.

### **G. Number of current and previous injectors (at risk previously tested) not tested in the last 12 months**

Number of C/P injectors (at risk previously tested) not tested in last 12 months  
**2486**



*“Number of service users listed as currently/previously injecting, who are identified as at risk, who have not had a hepatitis c test recorded in the last 12 calendar months”*

**Technical Definition:** This is the number of service users listed as currently or previously injecting at their last triage who have had a hepatitis C test at some time, but have not had a hepatitis C test in the last 12 months prior to the current report date.

### **H. Total interventions to meet criteria 3**

Total interventions needed to meet Criteria 3 target (90%)  
**2378**

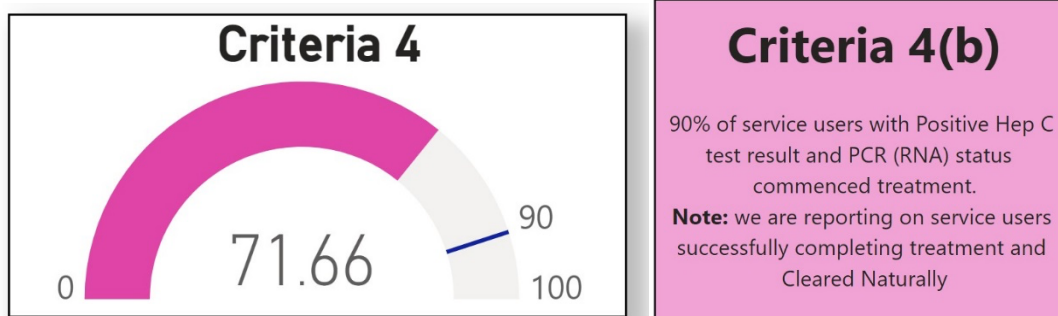


*“The number of interventions or actions required by the service to achieve micro-elimination criteria 3 target of 90%”*

**Technical Definition:** This is the total number of interventions or actions required to meet micro-elimination criteria 3 target of 90% – either because they need testing or there is missing data. This figure will include those service users who need interventions to meet micro-elimination criteria 2.

### **Criteria 4(b) of the micro-elimination criteria**

*90% of Service Users with positive hepatitis C test result and PCR (RNA) status are cleared of hepatitis C.*



We have taken the approach of calculating Criteria 4 as a % of service users who have cleared the hepatitis C virus who have had a positive Hep C test result. To calculate if a service user has cleared the hepatitis C virus we are using the following based on their latest NDTMS PCR (RNA) test result from HCVPCR or CIRHCVPCR

- a. Number of service users who are hepatitis C antibody positive and have a PCR(RNA) status of negative cleared by treatment
- b. Number of service users who are hepatitis C antibody positive and have a PCR(RNA) status of negative cleared naturally (including antibody positive and RNA negative never infected).
- c. For service users who have a PCR(RNA) value of positive, unknown or blank (not recorded), working with the service we will identify where those service users are in their hepatitis C treatment journey and if it is known these will be included in the calculation.

### Number of service users Cleared by Treatment

Number of service users  
Cleared by Treatment  
**1553**



*“Number of service users who are Hepatitis C antibody positive and have a current PCR(RNA) test result of negative cleared by treatment”*

**Technical Definition:** Service users who at any time in their involvement with the service have had a positive result for a hepatitis C antibody test recorded in their NDTMS HEPCVAS or CIHEPCVAS. These clients also have a current NDTMS hepatitis C test result PCR(RNA) status of Negative (cleared by treatment) from their current NDTMS HCVPCR or CIRHCVPCR.

### Number of service users Cleared by Naturally

Number of service users  
Cleared Naturally  
**491**



*“Number of service users who are hepatitis C antibody positive and have a current PCR(RNA) test result of negative cleared by naturally”*

**Technical Definition:** Service users who, at any time in their involvement with the service, have had a positive result for a hepatitis C antibody test recorded in their NDTMS HEPCVAS or CIHEPCVAS. These service users also have a current NDTMS hepatitis C test result PCR(RNA) status of negative (cleared naturally) from their current NDTMS HCVPCR or CIRHCVPCR

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### Total interventions needed to meet Criteria 4 target (90%)

Total interventions needed to meet Criteria 4 target (90%)  
**610**



*“Number of actions needed to meet criteria 4 target of 90%”*

**Technical Definition:** These are the number of service users where we need to know more about where they are on their hepatitis C treatment journey, ie. if they have recently commenced treatment (which is not captured on the NDTMS data yet as ‘cleared by treatment’ because they have not yet had their sustained viral response (SVR) tests completed.

It is important to understand that the number of interventions needed to meet criteria 4 may be higher than the number of people listed as being RNA positive. This is because the number of interventions includes service users with an RNA status of a positive, unknown or blank.

For those who are nearing micro-elimination across all 4 criteria the process detailed in Appendix C outlines how the Hep C U Later coordinators, the services and the Operational Delivery Networks (ODNs) work collaboratively to identify where people are on their treatment journey. This is then fed back into the DOAP and a new updated calculation can be made.

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### Number of service users commenced treatment

Number of service users commenced treatment  
**85**



*“Number of service users who have commenced treatment for hepatitis C.”*

**Technical Definition:** This is the number of service users that from working collaboratively with the service and ODN are classified as having commenced treatment (or completed but not yet changed to this status on the system as they have not yet had their SVR).

## Appendix A

### *Hepatitis C Fields in NDTMS Dataset Q*

Full NDTMS data-set Q guidance can be found here:

- [NDTMS Reference Data CDSQ](#)
- [NDTMS core dataset Q: Blood borne virus \(BBV\) guidance](#)

Below are the current fields with options in NDTMS Dataset Q related to hepatitis C. In addition to these there is the hepatitis C Test date HEPCTSTD.

The fields shown are for those taken at a service user's triage. There is a corresponding set of fields taken at a Client Information Review (CIR) which are prefixed with CIR.

Please note that the images in this appendix are taken directly from the NDTMS guidance.

#### 3.39 Hep C intervention status – HEPCSTAT

Code	Text	Comments	Dataset inclusion	Sort order
B	Offered and refused		AD, YP	1
D	Not offered		AD, YP	2
F	Assessed as not appropriate to offer		AD, YP	3
G	Offered and accepted – not yet had a test		AD, YP	4
H	Offered and accepted – had a hep C test		AD, YP	5
K	Deferred due to clinical reasons		AD, YP	6

#### 3.40 Hep C test result antibody status – HCVAS

Code	Text	Comments	Dataset inclusion	Sort order
1	Positive		AD	1
2	Negative		AD	2
3	Unknown	Client has received a test but the result is unknown/inconclusive	AD	3

### 3.41 Hep C test result PCR (RNA) status – HCVPCR

Code	Text	Comments	Dataset inclusion	Sort order
1	Positive		AD	1
2	Negative (never infected)		AD	2
3	Unknown	Client has received a test but the result is unknown/ inconclusive	AD	5
4	Negative (cleared by treatment)	Client has received treatment for hep c and has subsequently tested negative for hep c.	AD	3
5	Negative (cleared naturally)		AD	4

### 3.43 Referral for alcohol related liver disease – LIVSCRN

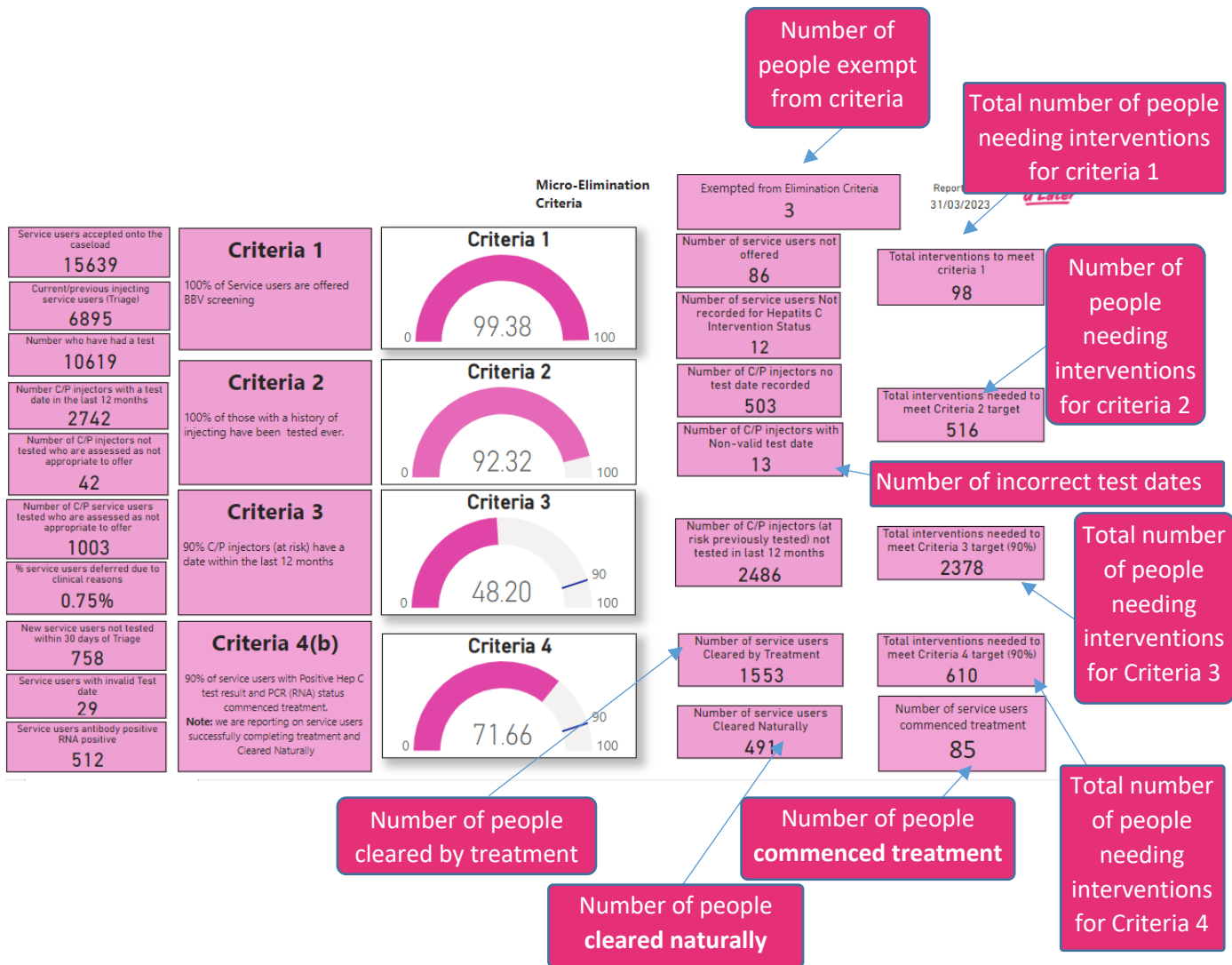
Code	Text	Comments	Dataset Inclusion	Sort order
Y	Yes		AD	1
N	No		AD	2
U	Unknown	Unknown should be used when the service user doesn't remember whether they have had an investigation for liver disease (via GP or specialist) and drops out before the treatment service has been able to establish this or made a referral themselves.	AD	3

### 3.64 Has the client been referred for hep C treatment – REFHEPCTX

Code	Text	Comments	Dataset Inclusion	Sort order
N	No		AD	1
Y	Yes		AD	2

**Appendix B**

*Micro-elimination DOAP Quick Reference Image*



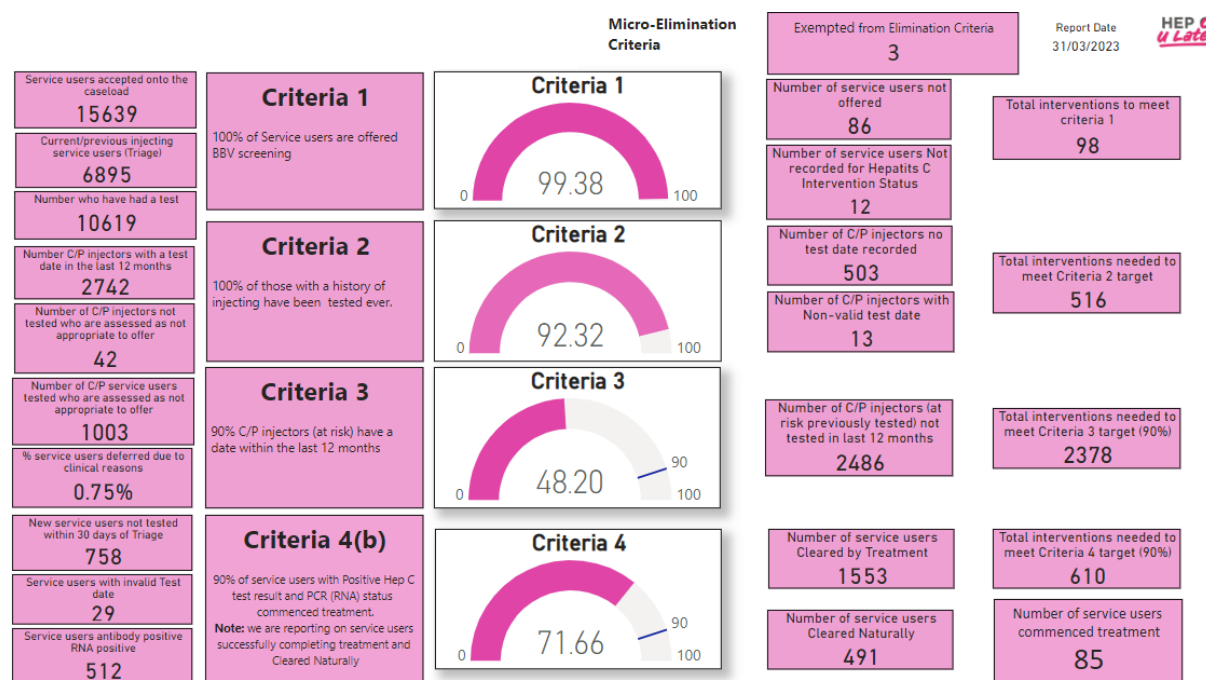


## Appendix C

### Hep C U Later/NHSAPA - Hepatitis C micro-elimination Criteria 4 Process

#### Criteria 4b:

The DOAP has now been amended to include the micro-elimination criteria 4 target and other relevant boxes.



The below information sets out the additional boxes, the calculation, definitions and processes the Hep C U Later team will use to demonstrate progress towards criteria 4. All efforts have been made to ensure the approach to criteria 4 is robust, transparent, ethical and in line with the correct clinical approach within the constraints of the NDTMS data we are working with.

The calculation for criteria 4b is as follows:

#### Numerator

- **AB +ve PLUS RNA -ve (Cleared by Treatment) OR RNA -ve (Cleared Naturally) OR RNA -ve (Never Infected)\***

#### Denominator

- **AB +ve PLUS RNA +ve OR RNA -ve (Cleared by Treatment) OR RNA -ve (Cleared Naturally) OR RNA -ve (Never Infected) OR Unknown\*\* OR Blank\*\***

The definitions behind criteria 4b are as follows:

\* Prior to CDS-P, some services used **AB +ve PLUS RNA -ve (Never Infected)** to denote **RNA -ve (Cleared Naturally)**, hence assumed to be **RNA -ve (Cleared Naturally)**

\*\* **RNA Unknown** and **RNA Blank** included for service user safeguarding (clinical good practice)

Date range = The time period applied to this calculation is the same as for all other NDTMS extract data i.e. any episode which is open during the NDTMS reporting period. This will include open episodes which were triaged before the start date of the reporting period and so will include historic data for those service users. It will also include episodes which were discharged during the reporting period

There is evidence to suggest that many service users have been given the status of *RNA –ve (cleared naturally)*, however, they have in fact been cleared by treatment. Hence the decision to include *RNA –ve (cleared naturally)* in the calculation. In addition, since the Micro-elimination Criteria are designed to show progress towards Micro-elimination of hepatitis C, not treatment, it is logical to include *RNA –ve (cleared naturally)*.

Total number of interventions required for criteria 4 target (90%):

The total number of interventions required for criteria 4 target (90%) includes those who are RNA +ve, and any who are AB +ve with an *unknown* or *blank* RNA status. It is good clinical practice to assume service users with an unknown or blank RNA status may be positive.

Coordinators will be provided with a micro-elimination booklet (spreadsheet with 2 tabs [see below and under Exemptions]) to be completed alongside services to update with drop-down options (e.g. *commenced treatment, awaiting treatment, etc.*). The Hep C U Later data leads will then use this information to update the DOAP for that service which will adjust the numbers accordingly, to indicate whether Criteria 4 has been achieved.

	A	B	C	D	E	F	G	I
1	APA Name	Service	CLIENT ID	Current Episode	Current NDTMS PCR(RNA) status	Current PCR(RNA) status Details	Report Date	
2	APA Member 1	Service A	1 A101		PCR(RNA) status Positive		1/01/2023 00:00	
3	APA Member 1	Service A	2 A102		PCR(RNA) status Unknown	awaiting treatment	1/01/2023 00:00	
4	APA Member 1	Service A	3 A103		PCR(RNA) status Positive	commenced treatment	1/01/2023 00:00	
5	APA Member 1	Service A	4 A104		PCR(RNA) status Positive	completed treatment – awaiting SVR test	1/01/2023 00:00	
6	APA Member 1	Service A	5 A105		PCR(RNA) status Unknown	status unknown awaiting update from ODN	1/01/2023 00:00	
7	APA Member 1	Service A	6 A106		PCR(RNA) status Unknown	service user discharged	1/01/2023 00:00	
8	APA Member 1	Service A	7 A107		PCR(RNA) status Unknown	service user lost to follow up	31/01/2023 00:00	
9	APA Member 1	Service A	8 A108		PCR(RNA) status Positive		31/01/2023 00:00	

The drop down options are as follows:

- awaiting treatment
- commenced treatment
- completed treatment – awaiting SVR test
- status unknown – awaiting update from ODN
- service user discharged
- service user lost to follow up

Escalating issues:

If there are issues in receiving updates from the ODN this will be raised with NHSE and Gilead Sciences by the Hep C U Later coordinators or Lead.

Exemptions

Rationale for exemptions:

We envisage that exemptions would only be used in rare circumstances and quantities would be single digits for each service. They can be used only when every reasonable attempt has been made to engage the service user in testing/treatment. The quantity is shown in the exemption box on the DOAP for transparency and this will be regularly reviewed. This process is fully auditable.

The process for agreeing proposed exemptions is:

1. Service is close to achieving micro-elimination (criteria 4b close above 80% for example)
2. Coordinator reviews those service users falling outside ME criteria with the lead for the service
3. Micro-elimination booklet (Exemption tab) spreadsheet is completed – Client ID (or Episode ID for services using pseudo-Client IDs) is recorded along with the reason for exemption
4. Exemption spreadsheet is presented to Hep C U Later team huddle for review – exemptions are agreed as valid or not

External use:

NDTMS AGENCY	ClientID	Exemption Reason	Exempted
Agncy1	1	Reason 1	Yes
Agncy1	2	Reason 2	Yes
Agncy1	3	Reason 3	Yes
Agncy1	4	Reason 4	Yes
Agncy1	5	Reason 5	Yes

Internal use:

A	B	C	D	E	F	G	H
NDTMS AGENCY	ClientID	Episode	Exemption Reason	Rewiew meeting date	Review meeting outcome	Action required	Exempted
Agncy1	1	1	Reason 1				Yes
Agncy1	2	1	Reason 2				Yes
Agncy1	3	2	Reason 3				Yes
Agncy1	4	3	Reason 4				Yes
Agncy1	5	1	Reason 5				Yes

Guidance of reasons for exemptions:

4. Service user under palliative care
5. Service user under care of hospital/severe illness
6. Service user at risk of disengaging from drug and alcohol service

### Data Anomalies/Data Quality Check

Hep C U Later believe it is best practice to check data anomalies and omissions to ensure that data quality is upheld and service users are not missed.

Hep C U Later complete a number of checks on data anomalies as follows:

1. Service user must have an open episode during the reporting month
2. HCV status and test results must be recorded for all current or previous injectors – i.e. Not offered and blank results are invalid
3. HCV test date must be recorded if HCV status is set to *Offered & Accepted - had a Hep C test* **OR** any HCV test results are set **OR** HCV referral is set

4. If HCV test date is recorded then HCV Status must be set to *Offered & Accepted - had a Hep C test* **AND** test results must be set OR HCV status must be set to *Offered & Accepted – awaiting test*
5. HCV test results of *Unknown* are valid for up to 30 days from HCV test date
6. If RNA result is recorded then AB test result must be set
7. If RNA is *+ve* **OR** RNA *-ve (Cleared by Treatment)* **OR** RNA *-ve (Cleared Naturally)* then AB test result must be *+ve*
8. HCV Referral must be recorded if RNA *+ve*

Hep C U later also plan to continue to build in the following data quality checks (checking previous episodes):

1. Last valid HCV status
2. Last valid HCV test date
3. Last Valid HCV AB status
4. Last valid HCV RNA status
5. Last valid HCV referral status
6. Last CIR date within past 180 days
7. If HCV status is recorded as *Assessed as not appropriate to offer* then HCV test results must be set to *AB -ve* **OR** *AB +ve PLUS RNA -ve (any)*
8. Check for duplicate clients
9. Last valid Injection status

## We value your feedback!

We are always seeking to improve what we do - If you have any feedback to help us make this guide better, have any ideas about future resources we can develop to help you, or if want support with your service, please get in touch:

[HepC.ULater@mpft.nhs.uk](mailto:HepC.ULater@mpft.nhs.uk)