Bristol & Somerset Hepatitis C ODN Newsletter December 2020

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Hepatitisnurses@uhbw.nhs.uk

Introduction

We are so sorry that the impact of Coronavirus has resulted in no Regional ODN meetings during 2020/21 thus far, and are disappointed not to have been able to catch up even virtually during this year, despite two attempts at scheduling. However, we remain extremely grateful for the continued support of all of our stakeholders (you) for the tireless work you are putting in to ensure we maintain our commitment to provide excellent care to patients with Hep C wherever possible. We do hope that you are all keeping well and staying safe in these challenging times.

In the absence of a formal meeting, we hope that this communication provides a helpful update on progress made and picks up on some outstanding actions. However, if you require further information on anything within this newsletter, or any other issues you may have, please do drop an e-mail to hepatitisnurses@uhbw.nhs.uk and we will respond accordingly.

Do stay safe - hope to see you soon.

Best wishes

Fiona

Dr Fiona Gordon, Clinical Lead, Bristol & Severn HCV ODN



Treatment Numbers 2020/21

On a positive note, despite all the problems caused by the lockdown and with grateful thanks to the hard work of all the nursing teams together with dedicated support from the outreach teams, we have after the initial shock in April still kept on treating people as demonstrated in the table below – even eventually exceeding the revised run rate numbers!

In some ways the "everyone in" system of providing housing for those who may normally be homeless actually helped to make locating patients and supplying treatment and monitoring a bit easier, and is continuing to help with focused Hep C screening sessions in the various Hotels and Hostels. For details refer to our ODN website www.uhbristol.nhs.uk/hepc under "what's on"

Network, Year and Month			Treatme		
Network	Financial Year	Financial Month	CQUIN Plan	Actual	Actual achievement against running monthly target
Bristol and Severn Hep C ODN	2020/21	Apr	12	9	75%
Bristol and Severn Hep C ODN	2020/21	May	15	13	87%
Bristol and Severn Hep C ODN	2020/21	Jun	18	20	111%
Bristol and Severn Hep C ODN	2020/21	Jul	24	44	183%
Bristol and Severn Hep C ODN	2020/21	Aug	24	37	154%
Bristol and Severn Hep C ODN	2020/21	Sep	30	40	133%
Bristol and Severn Hep C ODN	2020/21	Oct	30	32	107%
Bristol and Severn Hep C ODN	2020/21	Nov	30	25	83%
Grand Total			183	220	120%

For further information on screening, please contact Julie.wheat@uhbw.nhs.uk

Treatment Incentivisation



Following on from the previous voucher scheme and subsequent cash schemes, as discussed at the last ODN meeting we have now purchased Tesco vouchers in £5 denominations to offer as 'incentives' for treatment attendances as follows:

At screening events and first visit to a drug support agency (face to face only): £5 voucher to be offered

Post Results Engagement: £5 voucher when given results from screening event

First treatment (face to face only): £15 voucher SVR 12 visit (face to face only): £25 voucher This equates to a maximum of £50 per patient.

For further details on the scheme, including how to obtain vouchers, please contact Lorraine.tovey@uhbw.nhs.uk.

Community Pharmacy Testing

After several months of negotiations, NHS England have commissioned hepatitis C antibody testing in community pharmacies. The scheme aims to test patients who may not be engaged with other testing providers, and therefore will initially focus on community pharmacies providing needle exchange services. There has been interest from a number of community pharmacists within the Bristol and Severn Network, and Janki is working closely with the Local Pharmaceutical Committees in each area (Avon, Gloucestershire, Somerset and Swindon & Wiltshire) to identify key community pharmacies.



With the first educational session scheduled for 8th December, the ODN will initially be focusing on community pharmacies in the Avon LPC and will provide an update around hepatitis C management and treatment options followed by further sign up information.

If you know of a community pharmacy who may be interested in delivering this service, or for further details please contact hepatitisnurses@uhbw.nhs.uk.

Outreach Bus Plans

We have commenced regular bus treatment and screening clinics outside Unity House in Chippenham in conjunction with the team at RUH. So far we have held three clinics, and at each 1-2 clients were commenced on treatment and between 2- 4 clients were screened.

We had hoped to start a similar service at Trowbridge during the first week in December but unfortunately due to the bus needing repair, this and other some of our booked events have been postponed. However, we hope to restart these as soon as the bus is back in action, and will then continue fortnightly at Chippenham, Devizes and Trowbridge. We also have events planned in Hartcliffe and Knowle West in conjunction with BDP, and Midsomer Norton with Joe Rowan (BBV nurse, Bath). Additionally, plans are in progress to use the bus to provide a similar service at the four CGL locations in the Gloucester area, including Gloucester, Stroud, Cheltenham and Cinderford. We hope to link the service with the PSI GP data base search tool (see update below) and hold screening and treatment support clinics close to participating surgeries.

Teams can book the bus by contacting Lorraine.tovey@uhbw.nhs.uk. Lorraine will be able to book parking and assist with promotion in the locality, contacting local GPs, pharmacies and needle exchanges, and work with you to identify other relevant services in the area. The bus is available Monday to Thursday with support from either Julie Wheat or Phil Collier. An experienced driver accompanies the bus and can help with setting up equipment and engaging with clients.

For further information, please contact Julie.wheat@uhbw.nhs.uk

Capillary & Cepheid Update



Capillary: We have undertaken some capillary testing in the community which has gone very well, and are now at a stage where we will shortly be rolling this out to HMP Bristol. The benefits demonstrated thus far have been a) the results have come through within 48 hours which has an impact on clinical decisions, and b) it is less invasive for our patients/clients. We hope that in time, we will be able to roll this out to the wider region.

For further information around testing, please contact Jane.gitahi@uhbw.nhs.uk

Cepheid: The second Cepheid will be delivered to RUH Bath shortly to start casefinding. The intention from here is that it will remain in Bath for a period of time, following which it can be relocated to another spoke/agency/pharmacy etc. If you would be interested in having the Cepheid machine for a period of time when Bath have completed their casefinding, please contact hepatitisnurses@uhbw.nhs.uk.

GP PSI Tool (MSD Elimination Initiative) Update

After a pause during the covid pandemic we have continued our work engaging with GP practices to utilise the MSD GP PSI tool. The tool can indentify three patient groups based on their coded conditions: those who have a hepatitis C positive status, those who have high-risk factors for having hepatitis C and those who have low risk factors for having hepatitis C. The results of this can be compared to current ODN information to offer a first engagement or reengagement opportuinty with the ODN.

We have been lucky enough to have an opportunity to work with Dr Kate Robson, a GP based in central Bristol, and are exploring working with OneCare, an organisation which represents and supports GP practices within the BNSSG region to support us with the project.

Once identified, we hope to communicate with patients either utilising the GP practice texting system or letter to the patient to inform them of their diagnosis. Once engaged the patients can slot in to the teatment pathway at the appropriate stage. If further investigations are needed before they can start treatment the ODN teams, working closely with local drug and alcohol support agency staff, can provide support with mobile clinics to carry out routine phlebotomy and assess fibrosis status, as well as providing an opportunity for patients to engage with our peer support teams to help them through treatment.

For further information, please contact Julie.wheat@uhbw.nhs.uk

Prisons/Probation Services Update

Prisons: We have now started a new clinic at HMP Eastwood Park, where patients will be seen by the BBV lead nurse there rather than our team going into the prison or the patients being brought to us. The main advantages include a) a reduction in DNA rates, b) greater dignity for prison patients attending clinics accompanied by security officers, which resulted in some preferring not to take up treatment, and of course c) the impact of staffing shortages at the prison whereby although booked out officers were not always able to accompany patients if they were needed on-site. As an example, for one patient to attend clinic, 2-3 officers were required to support them.

Probation Services: We have received some funding from NHSE to support wider engagement with approved probation premises, and have started some preliminary scoping work. Across our patch, we have identified appropriate premises currently in both Bristol and Gloucester. The proposal from NHSE is that test and treat facilities would be set up within these premises if possible.

Additionally, we have received funds to support prison HITT activity, although of course Covid will have impacted upon any such events taking place thus far; two HITT's within Bristol prisons have already been postponed so far this year.

For further information, contact Jane.gitahi@uhbw.nhs.uk.

NEW Simplified Referral Pathway

We have generated a new, simplified referral pathway, which I will share with you independent from this newsletter.

The main benefits/objectives/changes are:

- Ability to be able to treat patients on just a positive PCR test for some patients for example, patients under 30 years without other health problems and no other risks of fibrosis.
- Use of Fib 4 to reduce need for fibroscan for many patients.
- Facilitates outreach prescribing in the community.
- Shortened time from diagnosis to treatment.

We will be circulating the process chart to you very soon, and will also make it available on the ODN Website at www.uhbristol.nhs.uk/hepc.

BDP update

BDP has collaborated with THT and Unity in Bristol to offer incentivised BBV testing to people made homeless during the pandemic. We have visited 12 venues including 4 hotels repurposed to accommodate people who have become homeless during the pandemic and tested 200 people for HIV, hep B, Hep C and Syphilis with the option of Gonorrhoea and Chlamydia NAAT testing. A full report will be published in the new year.



BDP has set up a BBV self-test scheme. DBST kits are posted with instructions to service users who complete the test at home and then post it to the lab. So far we have diagnosed three Hep C+ through postal testing, and have a 60% completion rate.

BDP has made 85 referrals to Hepatology for Hep C treatment since June 2020. Testing face to face by BDP continues where it is safe to do so.

For further information, contact Jess.oke@bdp.org.uk or Jessica.oke@nhs.net.

Peer Support Update



We want to celebrate that we've now been established for a year. I'm glad to say we have started to develop promising working relationships and referral pathways across the NHS trusts in the ODN. These relationships have also extended to all the key services in every major town that has a need for screening and treatment. I'd like to thank the nursing teams and service providers for being so welcoming.

Within this year we have been lucky to recruit 15 peers/volunteers across the ODN, and maintain a high proportion of retention. Currently we have 11 active peers/volunteers who are all equipped with phones and provide remote support to patients and clients. To introduce you to some:



Hailey Hunter (Bristol)



Jason Dean (Bristol)



Jeff Gibbs (Bristol)



Paul Jones (Bristol)



Rob Chambers (Gloucestershire)



Andy Wild (Yeovil)



Alisha Gaylard (Yeovil)

We also have Rachel

England and Anthony

Martell in Bath ©



David Lee (Weston Super Mare)



Martin Hopkins (Weston Super Mare)

Since the beginning of 2020 "The Follow Me peer support program" has engaged with over 300 individuals requesting information or test either at screening events, clinics or in outreach settings.

In a testing capacity we've been involved in screening 123 people, in our supporting role we've had 115 referrals for patient's pre, on and post treatment to SVR 12 that we've helped or are helping.

Finally our educational role has provided training to 97 professionals and our peer educators helping deliver our "Hep C Awareness Training" (HAT) or had meaningful conversation/ intervention with 259 service clients and members of the public. We are still able to operate in outreach settings under The Hepatitis C Trust's COVID outreach policy and procedures and risk assessments. The tasks that we can carry out include collection of patients for appointments, accompanying patients to blood rooms/ clinics, delivery of medication, screen with antibody, DBST or Capillary test.

During Covid we supported the nursing team's efforts throughout Bristol's screening of emergency homeless hostels. Our peers were involved in promoting screening, health benefits, harm reduction and supporting starting or on treatment. We've also maintained our ability to hold education and training groups online through zoom. This can be arranged for anyone on request. We are happy to take new referrals for support from services and GP's. You can get people to contact us directly or send a referral to the secure email phil.collier@hepctrust.cism.net.

We'd also encourage you to sign post new peers and volunteers to become members of our team. We offer equal opportunities and will welcome anyone with willingness to help, so we can give those the opportunity to use their experience positively. Please contact us for more information or promotional materials.

Phil Collier (07495703945) or contact me on Phil.collier@hepctrust.org.uk or for secure email phil.collier@hepctrust.cjsm.net

Postal Testing (Jackie Webley)

Change, Grow, Live (CGL) implemented a new BBV testing option to all its Drug & Alcohol services on 6th August following a reduction of onsite testing during the first lockdown. This option allows CGL services to send a dry blood spot test directly to an individual for self-completion, once it has been identified as safe and appropriate to do so. To date (as at 20.11.20) CGL services nationally have sent 2,099 tests to individuals and are starting to see a good return rate. Locally in Gloucestershire CGL have sent 41 tests and are increasing their efforts in the second lockdown, alongside continued onsite testing when it is safe and possible to do so.

CGL have a toolkit available for all other organisations who may wish to replicate this postal option or offer something similar: https://www.changegrowlive.org/about-us/resources/bbv-toolkit For other information or support, email: Jackie.webley@cgl.org.uk

Hep C Covid Innovations (Louise Hansford Hep C U Later/Danny Morris, Hep C Trust)



Hep C U Later Coordinator (South) Louise.Hansford@mp ft.nhs.uk

Hello. I'm Louise and I'm the Hep C U Later Coordinator for the South. Having waited 2 years for this project to start you can imagine how frustrated I was when COVID hit. However never one to miss an opportunity I have focused my efforts on meeting people virtually and supporting some of my services to do patient auditing. Along with this I have been involved in several testing events across the region as below.

I have worked in substance misuse for over 14 years and I am passionate about empowering people to make changes and tackling discrimination.

I bring my experience of setting up hep c peer to peer schemes, delivering training and applying for innovation project funding to the Hep C U Later mission. I am also in recovery and had my own experience of hepatitis c which I will freely share to empower others. I'm excited to be part of the once in a lifetime opportunity to eliminate hepatitis C, and would say to anyone working in this field, persevere it is very rewarding and you never know when your intervention will sink into place and the person will take action.

Screening at the Holiday Inn in Bristol, behind the masks are L - R :Jack Wilkinson BDP, Louise Hansford from Hep C U Later and Jess Oke from BDP



I'm looking forward to the day that I can tell my grandchildren what my part was in a worldwide quest to eliminate hepatitis.

Join us and like, share or retweet our posts on social media channels to raise awareness. You can also promote your hepatitis c elimination activites by tagging us and using the hashtag

#HepCULater, ☑ @HepC_U_Later ☐ Hep C U Later, www.hepculater.com.

Hep C U Later is an initiative of the NHS Addiction Provider Alliance (APA).

The reach of the APA extends to over 46,000 service users who are in contact with community addiction services in 78 Local Authority areas and Prison Services across the country. These services have contracts which align with 17 of the 22 Hepatitis C Operational Delivery Networks (ODNs) in England. The 2,133 staff and volunteers of APA members provide addiction services to approximately 35% of all drug and alcohol service users engaged in the English treatment system, and there are strong links between providers.

The HCV Operational Delivery Networks (ODNs) are key partners for Hep C U Later.

A second key partner for Hep C U Later is Gilead. Hep C U Later is working jointly with Gilead to identify and facilitate access to treatment for large numbers of hepatitis c patients within APA member Trust services.

A third key partner for Hep C U Later is the Hepatitis C Trust. Throughout the country where APA member Trust services are, teams of Hepatitis C Trust trained peer volunteers – people with lived experience – are helping to identify and test high risk individuals for HCV. They engage with them, and provide them with the support and help they need to access effective HCV treatment.

Danny Morris, Hep C Trust

The first lockdown presented all us with unprecedented and multiple challenges. Working alongside NHS colleagues and other partnership agencies, our peer projects readily learnt to adapt to safe working in restrictive environments while ensuring that the needs of people living with hepatitis C, and specifically those from homeless and more marginalised communities, continued to be supported. Since March, our peer projects nationally have found 1220 patients of which to date 991 have been identified as PCR +ve and 690 have successfully started treatment. This activity clearly demonstrating the significant contribution peers are having in improving access the hep C treatment and care.

The increasingly close partnership working between the Hepatitis C Trust Peer Support Project, ODN colleagues, Hep CU Later, BDP, DHI, local services and affected communities across the ODN during this challenging period has notably contributed to these achievements. And, as we look forward, I'm delighted to announce that we recently recruited Abigail Sellick as a second Peer Support Lead to work alongside Phil and ODN colleagues, building on achievements and growing our peer programme capacity throughout the ODN region. Abi will be starting on the 7th December and Phil will be arranging introductory meetings with you all over the coming weeks.

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

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