

Learnings from a community outreach nurse– improving engagement and hcv care coordination for a hard-to-reach cohort in community corrections

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Background/Approach: Community Corrections offers a novel setting for hepatitis C (HCV) testing and treatment, providing outreach services to people at risk of or living with hepatitis C. Many people reporting to Community Corrections identify the motivation to commence HCV treatment upon initial conversation however are lost to follow up, or treatment becomes a competing priority with other life and social factors. A more personal and direct approach to service delivery is required.

Methods/Description: Hepatitis Queensland has been providing monthly onsite HCV testing and treatment clinics at three Community Corrections district offices. The unique model provides a one-stop-shop with access to a GP, Community Outreach Nurse providing Fibroscans, and phlebotomy services. The model offers people reporting to Community Corrections a direct pathway to access testing and treatment while supporting their willingness to engage in treatment, ongoing monitoring, and reducing rates of DAA treatment non-adherence or discontinuation. The Community Outreach Nurse supports clients through education, follow-up care, linkages to other service providers, and monitoring while on treatment.

Outcomes/Results: During the period of August 2020 – November 2021, 148 clients have engaged with the clinic. 33 clients (22%) were RNA positive, with 21 clients initiated on treatment and 6 referred to a tertiary specialist. Of the 21 clients who were initiated on treatment, 6 have successfully completed treatment and achieved cure. A key success has been the nurse's role in maintaining 100% engagement with all HCV RNA positive clients who are on treatment.

'I can't believe the help I have been given to do this. I am very grateful for it too'

Conclusion/Applications/Learnings: Nurses are well placed to reduce barriers and facilitate access to healthcare by scaling up activities focused on enhancing HCV treatment uptake and completion. This model for follow-up care demonstrates patient-centred best practice, responding to the clients' individual needs while achieving positive health outcomes.

Disclosure: This project is funded by the EC Australia Partnership through the Paul Ramsay Foundation and the Burnet Institute.

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