## QUANTIFYING NURSES CONTRIBUTION TO HCV CARE MILESTONES: FINDINGS FROM AN INTEGRATED PRIMARY HEALTHCARE SETTING FOR MARGINALISED PEOPLE

Authors: Gilliver R1, Silins E1,2, Read P1,3

<sup>1</sup>Kirketon Road Centre, Kings Cross, Sydney, NSW; <sup>2</sup>NDARC, UNSW Australia, Sydney, NSW; <sup>3</sup>Kirby Institute, UNSW Australia, Sydney, NSW

**Background:** A question posed at several recent Hepatitis conferences is: How can the substantial contribution of nurses to HCV elimination be better measured? Nurses have an essential role in the testing, diagnosis and management of people with HCV but their inclusion in datasets, and visibility in contributing to milestones in the HCV care cascade has not been measured. We aimed to remove the invisibility cloak, and quantify the contribution of nurses to six HCV care milestones.

**Methods:** Clinical database records of the episodes of care for HCV antibody, HCV RNA testing, assessment for treatment, treatment commencement, fibroscan, and SVR12 confirmation were examined by consult type (doctor/nurse) from 2016-2019. For each milestone, the proportion of consults attributable to doctors and nurses overall and per year were reported. Linear trend was investigated.

**Results:** Over the four year period, 378 treatment episodes were initiated. Nurses provided the majority of episodes of care across each of the HCV care cascade milestones (antibody testing 70%, RNA testing 56%, assessment for treatment 71%, treatment commencement 66%, fibroscan 78%, SVR12 confirmation 63%). Analysis by year demonstrated that the contribution of nurses to all but one milestone significantly increased from 2016, for example nurses accounted for 61% of assessments for treatment in 2016, rising to 83% in 2019 (p<0.001). Similarly, the proportion of fibroscans performed by nurses rose from 62% to 90% over the same timeframe (p<0.001). Treatment commencement was the exception, for which nurses' contribution remained substantial (63-72%) over the period.

**Conclusion:** Findings shine a light on the substantial contribution of nurses to HCV care milestones and on their increasing role over time. Supporting and broadening the scope of practice for nurses is essential for workforce development. In striving for HCV elimination, nurses are well placed to identify and treat hidden populations.

**Disclosure of Interest Statement:** PR has received research funding from Gilead Sciences, as well as institutional and individual honoraria from Gilead Sciences, Abbvie and MSD.