

Elements of successful community-based models for treating hepatitis C virus in Australia



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Putting people first

Background: While community-based models are widely recognised as having the advantage of reaching a greater number of people who require treatment, little is known about their organisational and operational elements. This study aimed to identify the key organisational and operational elements of community-based models for treating HCV and the feasibility of their implementation within Australian primary health care settings.

Methods:

- ◆ A questionnaire based on a framework for community-based models for treating HCV including 13 elements identified from a systematic review
- ◆ A two round online Delphi method with clinical and policy experts
- ◆ 33 participants were asked to rank the elements based on 5-point scale for importance and feasibility and suggest additional elements we may have missed.
- ◆ Consensus were reached when the sum of agreement of categories 1 and 2 or 4 and 5 of 5-point Likert scale reach 70% or greater.



Results: 47% of participants were healthcare providers. Most participants were female (54.5%), 36.4% were in 40-49 age group and 45.5% from Queensland.

- ◆ All elements were rated higher than somewhat important (score 3) except for “*financial/non-financial incentives for health care providers*”.
- ◆ Eight elements reached consensus.

Importance and feasibility of elements of community-based models for treating HCV in Australia identified in Delphi survey

Elements of community-based models for treating HCV in Australia

- On-site screening and assessment
- Peer support Psychological assessment and support
- Linkage with or providing outreach services
- Social assessment and support
- Multidisciplinary team
- Safe and enabling environment
- Open referral policy
- Linkage with HCV infection tertiary services and specialists
- Financial or non-financial incentives for healthcare providers
- Treatment adherence support
- Person-centered approach
- Training and support for healthcare providers
- Linkage with dispensing pharmacy
- Linkage or collocation with harm reduction services
- Linkage or collocation with drug and alcohol services
- Having peers as champion of treatment

Elements	High importance/ Most important (n, %)	Usually/ Always/ Very feasible (n, %)
Safe and enabling environment	31 (93.9)	19 (57.6)
Training and support for healthcare providers	30 (90.9)	26 (78.7)
Open referral policy	29 (87.8)	25 (75.8)
Person-centered approach	27 (81.8)	22 (66.7)
Linkage with or providing outreach services	27 (81.8)	6 (18.2)
Linkage or collocation with harm reduction services	24(72.7)	17 (51.5)
Linkage or collocation with drug and alcohol services	24 (72.7)	10 (30.3)
On-site screening and assessment	24 (72.7)	5 (15.2)

Conclusion: Elements for providing extensive support for patients and health care providers and facilitating service delivery are highlighted. Further substantial work is required across policy and health service planning to integrate highly rated elements in primary care.