USE OF A WEB BASED DASHBOARD TO IDENTIFY AND ENGAGE WITH PEOPLE WITH HEPATITIS C ADMITTED TO HOSPITAL.

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Background:

People with hepatitis C (HCV) may be admitted to hospital for other indications, giving an opportunity to engage or re-engage them in care.

Description of model of care/intervention:

People with HCV either untreated or treated with unknown outcome were identified from a HCV database and virus lab data. Using a patient unique identifier, linkage was performed with a patient management system (trakcare) to identify such patients currently in hospital. HCV nurse specialists were encouraged to access this information via a web based dashboard on a daily basis. When a patient was identified they would contact the admitting team to request any required pre-treatment bloods or check SVR bloods as appropriate. When possible, in-reach pre-treatment assessment was performed, or alternatively outpatient appointments arranged. The dashboard was not interrogated at weekends, or if nursing time/pressures did not allow.

Effectiveness:

Of 4081 patients of interest, there were 382 admissions relating to 230 (5.6%) patients in a four month period September-December 2021. Admissions were most commonly under Medicine (221 (57.8%), followed by day case admissions (62, 16.2%) and psychiatry (34, 8.9%). Excluding day case admissions, 180 patients were identified. Of these 64 (31.6%) had updated virology and 35 (19.4%) have started on treatment (33) or have a planned start date (2), as of 1st March 2022 (follow up 3-6 months).

Conclusion and next steps:

The use of a web based dashboard was effective in re-engaging patients with HCV in care during or following a hospitalisation. Approximately 1:3 patients had updated virology, and 1:5 were commenced on treatment. The dashboard will continue to be used. Pro-active alerts (via email to the appropriate hospital team), or dedicated nursing time may further improve utility.

Disclosure of Interest Statement: See example below:

Stephen Barclay has received speakers fees and advisory board fees from Gilead, Abbvie and Intercept.