

The London Joint Working Group for Substance Misuse and Hepatitis C

Evaluation of the LJWG Pilot Sites: Preliminary Findings

Today's Presentation

1. What the pilot is trying to achieve.
2. Pilot intervention offering.
3. Pilot aim and methodology.
4. Baseline process finding – an example.
5. Midway process findings – an example.
6. Outcome findings – an example.
7. Pathway and outcome findings – one pilot site example.
8. A case for further pathway integration.
9. Concluding comments.

LJWG Recommendations: Integration of hepatitis C services

1. Drug Services.
2. Specialist hepatitis treatment services.
3. Directors of Public Health.
4. Primary Care.
5. Prisons.

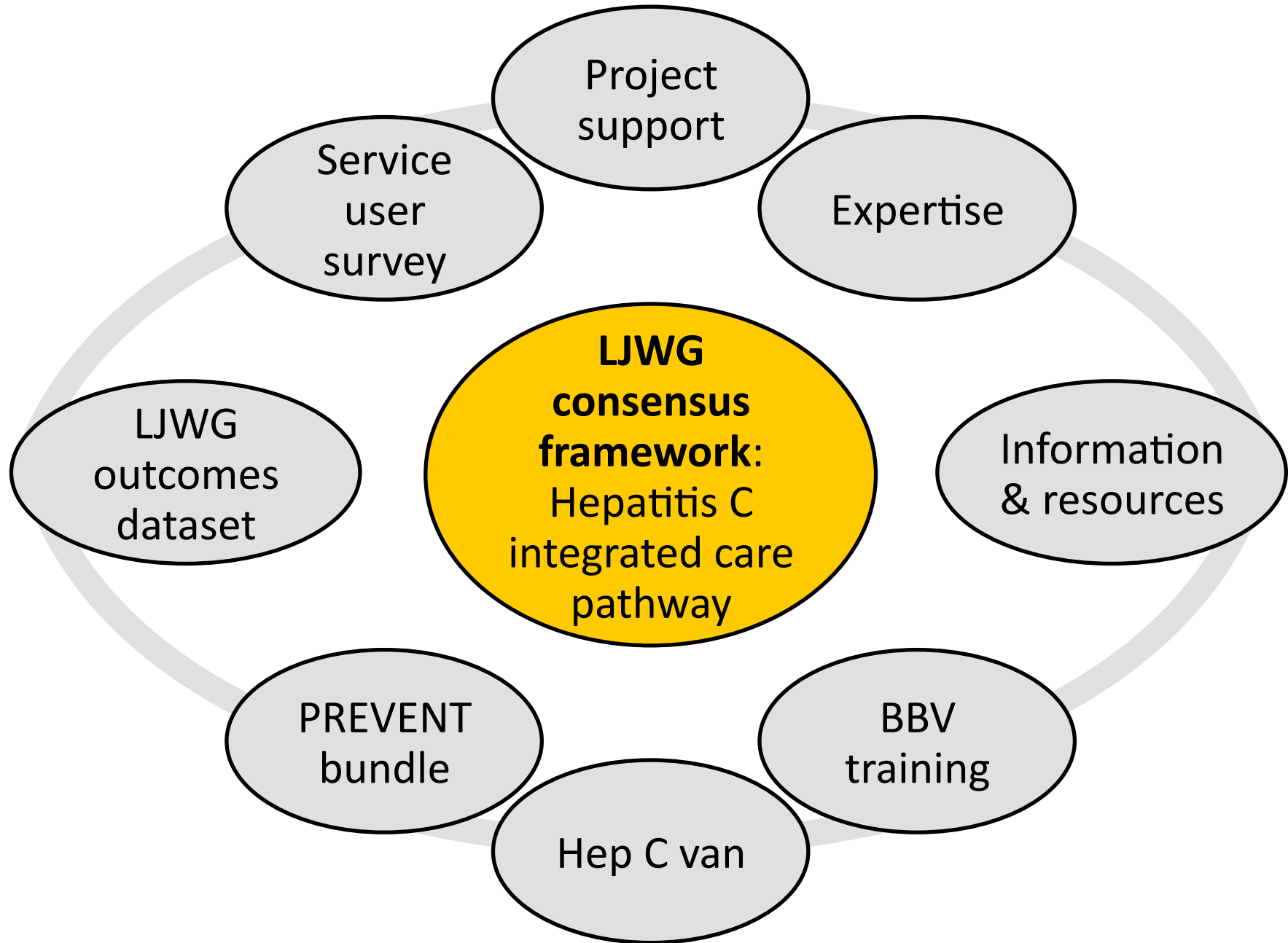
LJWG Recommendations: Future service model requirements



LJWG Recommendations: Outcomes

1. Improved rates of access to HCV testing, referral, assessment & treatment.
2. Clear integrated hepatitis c care pathway in place.
3. Improved workforce & service user awareness of hepatitis C & the pathway.
4. Developing patient focused services.

Pilot “Intervention Offering”



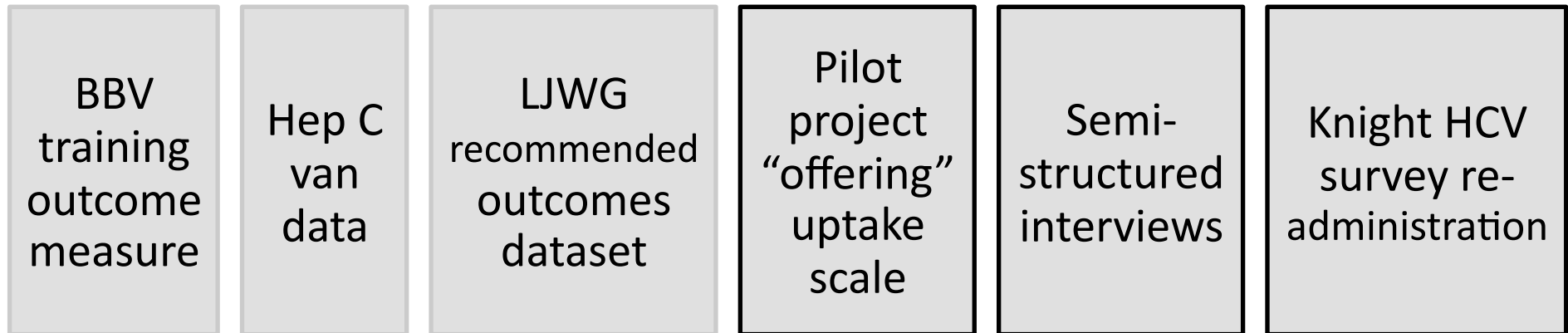
Pilot aim and methodology

Aim: Assessment the implementation of the LJWG consensus framework into practice amongst pilot sites.

Methodology: Quantitative and qualitative methods with initial baseline, moving into longitudinal design.

Sample: Croydon, Haringey, Islington and Lambeth.

Data Collection:



Analysis: Descriptive and thematic analyses.

Baseline Process findings: Engaging sites in the pilot



Croydon

- Pathway in development
- Outcome data being collected
- Generic service user survey in situ



Haringey

- Informal pathway in situ
- Outcome data limited
- Seeking suitable service user survey



Islington

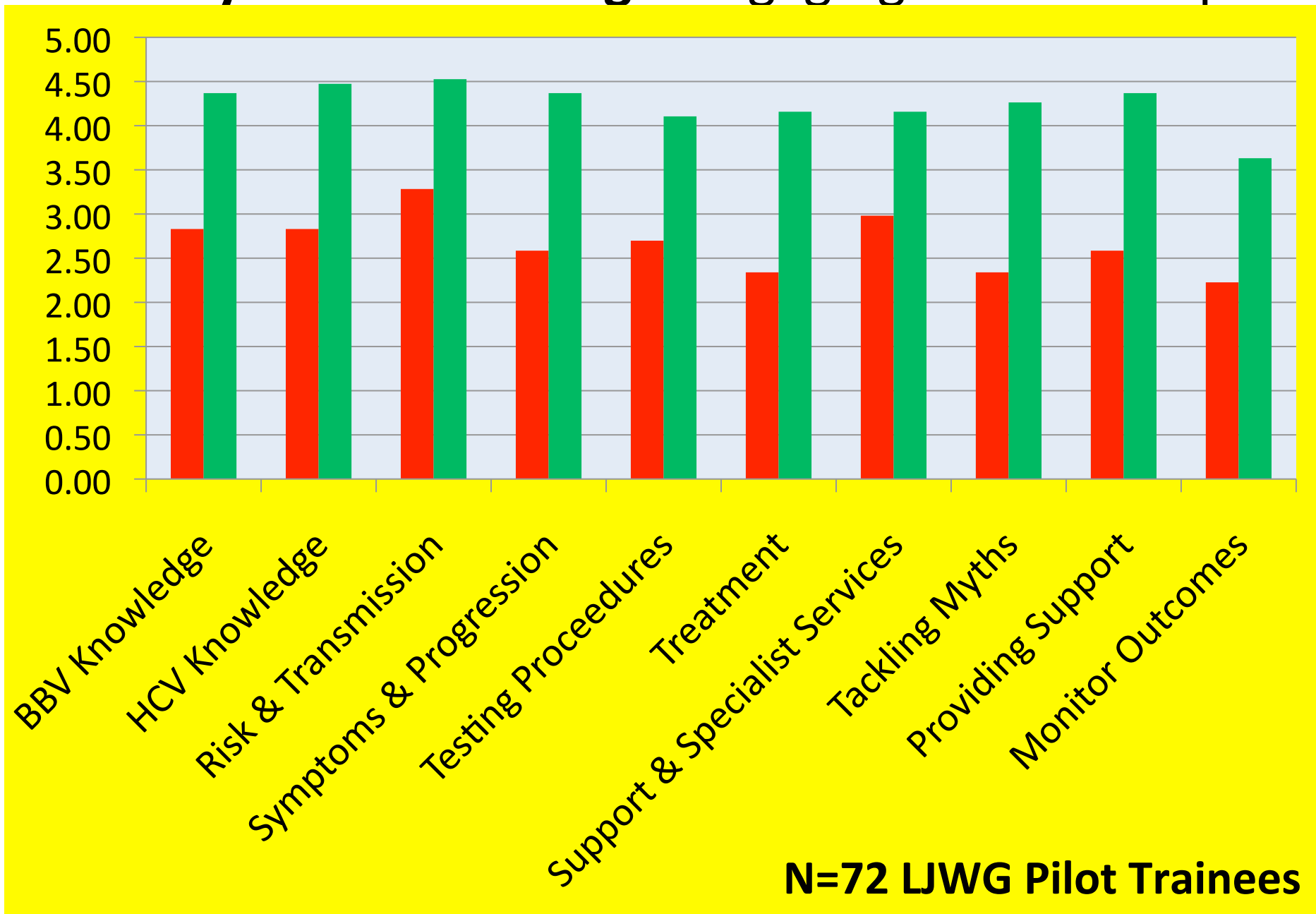
- Informal pathway in situ
- Outcome data established
- Service user survey in process



Lambeth

- Formal pathway in situ
- Outcome data established
- Specialised service user survey in situ

Mid-way Process findings: Engaging sites in the pilot

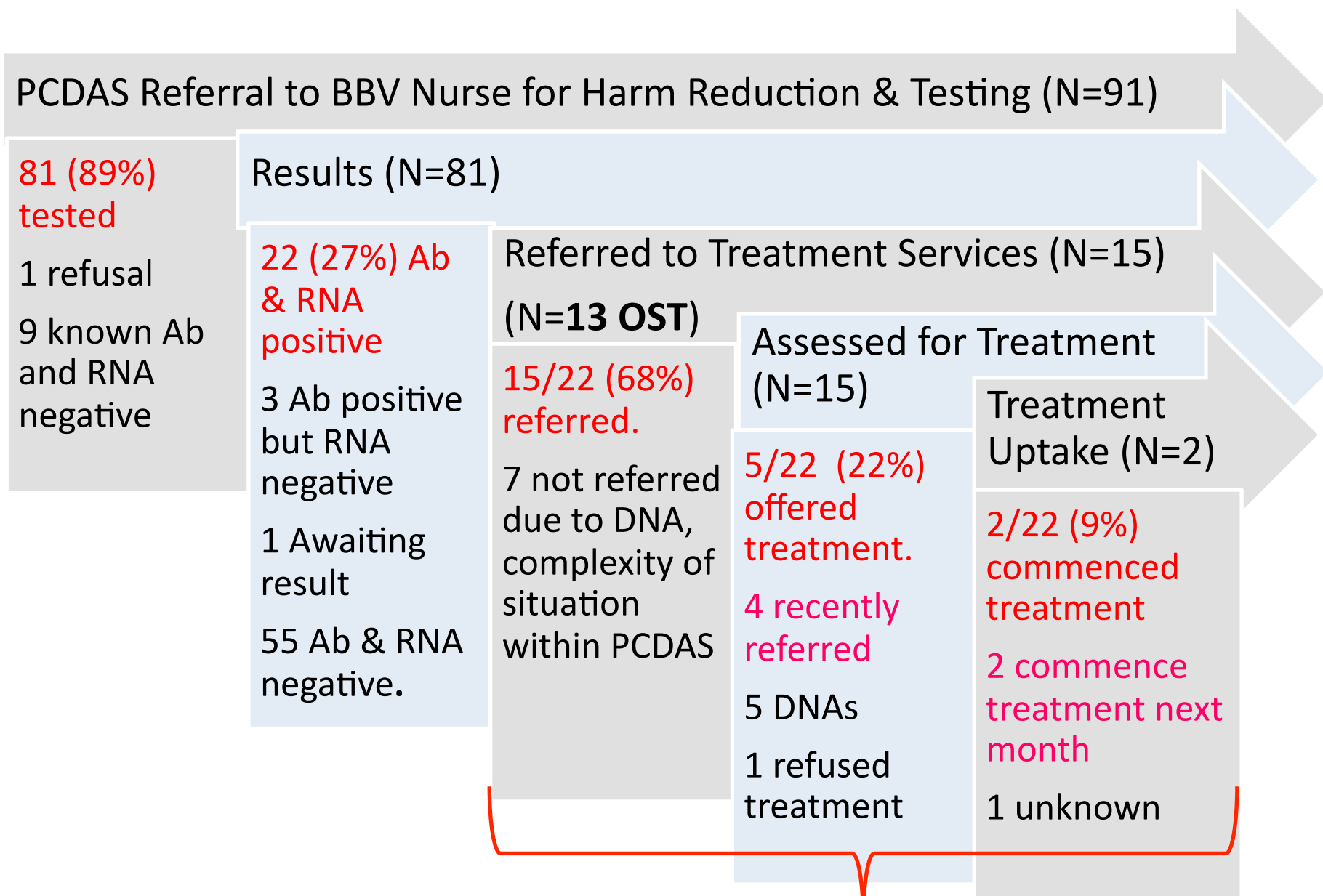


Outcome findings: Engaging sites in the pilot

Activity.	Croydon (3 Visits)	Haringey (2 Visits)	Islington (1 Visit)	(1
Tests Offered	38	33	09	
Tests Performed	24 (63%)	24 (73%)	03 (33%)	
Positive Results.	03 (13%)	6 (25%)	01 (33%)	

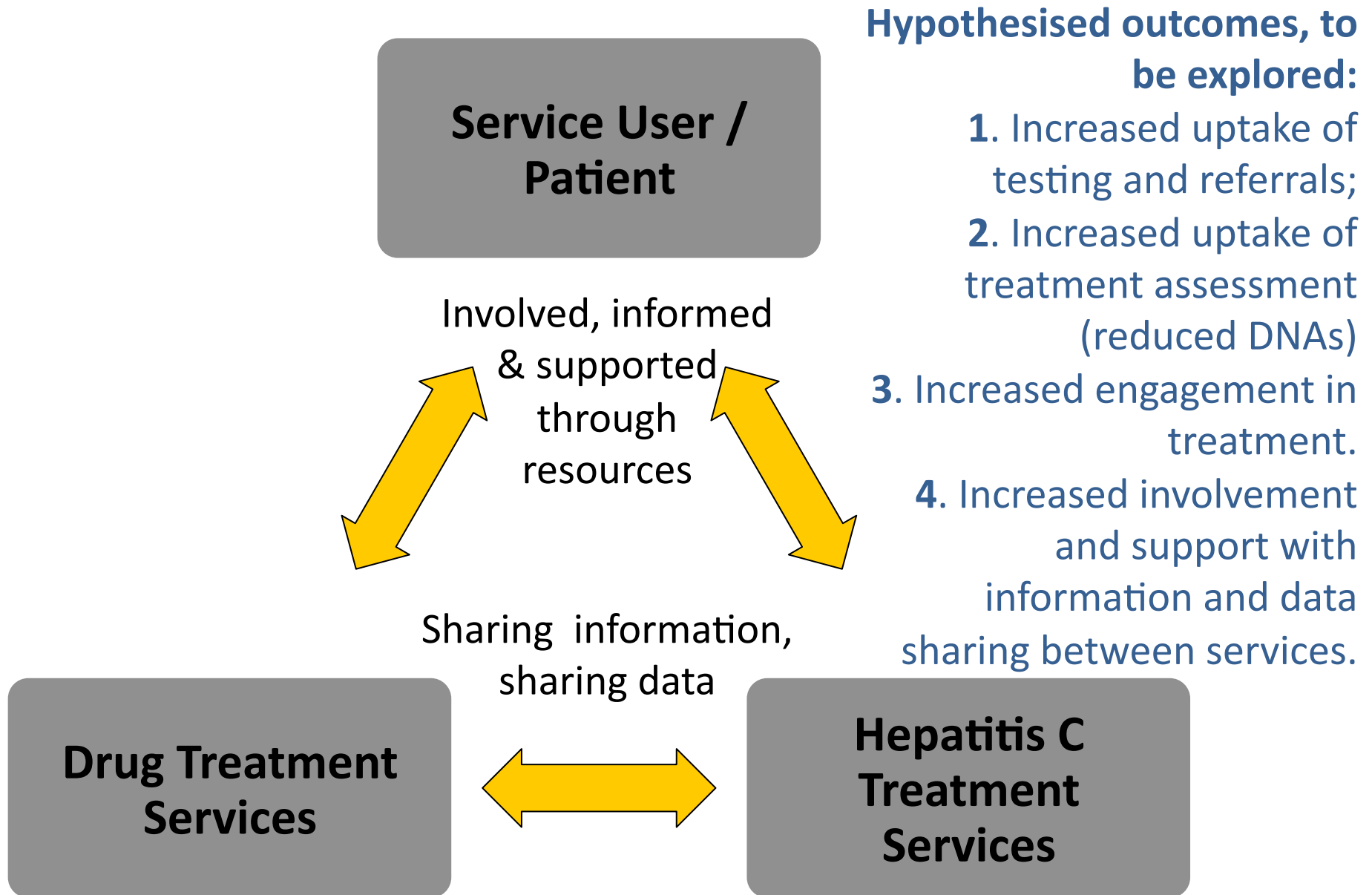
The Hepatitis C Trust Van Visits to Pilot Sites

Pathway & outcome findings: Islington (Q1)



1/3 of patients referred did not attend their hospital appointments...

Outcome Findings: A case for further pathway integration?



Concluding Comments: Future integrated pathways?

1. Tentative findings are encouraging, demonstrating positive pilot engagement to date, with plans to develop upon pathways, better understand barriers and facilitators of treatment engagement.
2. Interviews and data collection completion, analysis and write-up planned for November.
3. On-going partnership work with Dr Harris (LSHTM) and pilot sites.
4. **Gilead Fellowship:** Innovative technology, using an app to fully integrate patient treatment approaches, information and data sharing between primary care and hospital based services.

Acknowledgements

- Pilot sites, including service users, patients, pilot leads, BBV nurses, staff, managers and commissioners.
- Kosh Agarwal and team for sharing the service user satisfaction survey and the PREVENT team for resources.
- Gilead UK, Janet Catt, Victoria Leenders, Terry Orr & Prof Rosenberg.
- The Hepatitis C Trust and Addaction for sharing resources.
- The Hep C Van staff.
- **Dee Cunniffe**, Claire Munro, Abigail Knight & David Badcock.