

Cynulliad Cenedlaethol Cymru
Y Pwyllgor Iechyd, Gofal Cymdeithasol
a Chwaraeon
Ymchwiliad i Hepatitis C
HSCS (05) HT1
Ymateb gan Bwrdd Iechyd Addysgu
Powys

National Assembly for Wales
Health, Social Care and Sport
Committee
Inquiry into Hepatitis C

Evidence from Powys Teaching Health
Board

HEALTH, SOCIAL CARE & SPORT COMMITTEE INQUIRY INTO HEPATITIS C

Thank you for your request for evidence in relation to the inquiry on Hepatitis C. I hope the following is useful to you.

The action being taken to meet the requirements of the Welsh Health Circular published in October 2017 and subsequently meet the World Health Organization target to eliminate Hepatitis Band Hepatitis C as significant public health threats by 2030

Welsh Health Circular 2017 (048) has two broad areas for action; identify individuals who are currently infected with Hepatitis C (HCV), and test and treat individuals currently infected with HCV or Hepatitis B (HBV) who are actively engaged in behaviours likely to lead to further transmission.

In relation to identifying individuals currently infected with HCV, PTHB is a member of the Wales Implementation Group to Co-ordinate a National Hepatitis C Patient Re-engagement Exercise. Coordinated by Public Health Wales, this group is leading a national re-engagement exercise to encourage into treatment patients with a previous diagnosis of HCV who have no record of successful eradication of the virus. As an active partner in this process, PTHB is currently checking the details of individuals to confirm if they are currently known to services, as well as working with Blood-Borne Virus (BBV) nurse teams in neighbouring health boards to provide individuals with a point of contact to facilitate entry into treatment. This work is in progress, and will continue into 2019/20.

In relation to the testing and treatment of individuals currently infected with HCV who are actively engaged in behaviours likely to lead to further transmission; all clients accessing substance misuse services in Powys are screened for HCV upon entry, and then routinely re-screened at least twice a year. PTHB is also part of an all Wales needle exchange scheme which makes injecting packs for specific injecting behaviours available from community pharmacies and substance misuse service bases across Powys. PTHB is also working more broadly with partners to implement 'Working

Together to Reduce Harm: the Substance Misuse Strategy for Wales 2008-2018' and the 'Substance Misuse Delivery Plan: 2016-18'.

Finally, PTHB is also working with partners via the All Wales Viral Hepatitis Sub-group of the National Liver Disease Implementation Group to develop a model of testing and treatment in community pharmacies for roll-out across Wales.

How the knowledge and awareness of the public and health professionals of the Hepatitis C virus can be increased

Based on local staff and stakeholder engagement, a number of key factors have been identified that may support an increase in the knowledge and awareness of the public, including:

- Providing support for people with Hepatitis C to talk about their experience, through case studies and peer support, to help "normalise" communication about Hepatitis C and to reach people who may be at greater risk (e.g. injecting drug users) through peer networks and trusted voices;
- Continuing to promote access to general/public sources of health information where information about Hepatitis C is available (e.g. NHS Direct Wales) so that people can access information on their own terms and in their own time;
- "Making Every Contact Count" through services that work with people who may be more at risk of infection (e.g. substance misuse services for injecting drug users, maternity services for maternal transmission);
- Consider, at a national level, options for targeted on/line advertising and search engine optimisation (SEO) (e.g. people who may be searching online for information about risk-associated behaviour); Identifying approaches that helped overcome barriers to access to services (e.g. rural communities can face particular challenges in accessing specialist services for support or advice due to factors such as travel and transport, fear of being recognised when accessing services, perceptions of confidentiality).

The scope to increase community-based activity e.g. the role of community pharmacies

Community pharmacy BBV testing services have recently been piloted in parts of Cwm Taf UHB, where difficulties in successfully engaging with target groups was identified as a significant issue. C&V UHB is developing and piloting a BBV testing enhanced pharmacy service which is planned to be adopted nationally. The delivery of a BBV testing service via community pharmacies in Powys presents both opportunities and challenges. Community pharmacies are uniquely accessible and established as

providers of harm reduction services, but difficulties associated with pharmacist recruitment and resource availability will need to be addressed if delivery is to be robust. There are currently 9 pharmacies distributed across Powys that provide a needle and syringe service and PTHB will seek to agree the provision of a BBV testing service from some or all of these.

Feedback from areas of the UK where pharmacy BBV testing services operate successfully indicates that the integration of pharmacies into local BBV testing and treatment pathways is vital to this success. This will need to be addressed as a matter of priority in anticipation that the national pharmacy service will be available. In addition to this, the treatment pathway for patients identified via pharmacy services will need to be robust and have sufficient capacity to meet increased need.

The long-term viability of treatment programmes

PTHB does not directly provide specialist HCV treatment programmes and Powys residents are treated by BBV teams in neighbouring health board areas. As such, the Health Board does not have a strong view on the long term viability of treatment programmes as it is not involved in the day to day operation of these specialist services. However, reflecting the complexity of referral and treatment pathways for Powys residents, PTHB would endorse the continued existence of national planning and oversight groups such as the All Wales Viral Hepatitis Sub-group to help to ensure consistent levels of service are offered to individuals with HCV across Wales and that service planning takes place in a coordinated manner.

I hope the information is of use to the Committee. Please do not hesitate to get in touch for any further clarification.