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The BBV Champions model

An example of increasing testing among at-risk groups

Key points:

- The model was established in Reading, Berkshire in order to raise awareness, offer testing, and provide support to groups who are at risk from hepatitis C.
- Individuals within organisations were identified as 'BBV Champions', and were trained to provide advice and support to at-risk individuals within the substance misuse and South Asian communities.
- In the first year alone, the model contributed towards a 150% increase in the numbers of people being tested in the substance misuse community.
- There are now 60 BBV-trained key workers in Berkshire.
- The project won 'Best Diagnosis and Testing Programme' at the 2015 QiC Hepatitis C Awards.

Overview

The BBV Champions model was established in 2010 in order to raise awareness of hepatitis C among at-risk groups (principally the substance misuse community and the South Asian community), as well as increase testing among these groups and support people with the virus into and through treatment.

It involved the development and delivery of training to a number of key workers in various agencies and organisations who work with at-risk groups. The training provided an overview of blood borne viruses (BBVs), as well as information on how to deliver BBV testing and fully support people through the testing and treatment pathway. In addition to training key workers, the model also involved training individuals from the local Pakistani community to deliver awareness-raising and education initiatives, as well as deliver testing.

Aims of the project

The aims of the project were to:

- Raise awareness of the virus among at-risk groups, whilst avoiding stigmatising these communities.
- Offer testing to at-risk groups who may otherwise not access testing, and provide support to individuals through the testing and diagnosis process.



Picture courtesy of Quality in Care Programme

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- Ensure anyone testing positive was supported into the treatment pathway.
- Ensure a higher level of knowledge of hepatitis C among local key workers.

Why the project was established

The project was established, firstly, as a way of addressing the low testing rates among people who may be at risk from hepatitis C; low testing rates which can often lead to people receiving late diagnoses, and having to live with resultant liver damage.



A second catalyst was the realisation that the National Treatment Agency guidelines recommended that all service users engaged with substance misuse services should be tested annually for both HIV and hepatitis C; something that was not, at that point, being implemented locally, due to only one BBV nurse being available to carry out testing. Given that people using substance misuse services are at a significantly heightened risk from hepatitis C, failing to test them was a clear opportunity missed.

A third reason for establishing the project was the perception that awareness (and subsequently testing) levels among South Asian communities (who are also at a heightened risk from hepatitis C) were extremely low.

How the project worked

One of the key issues in Berkshire prior to the establishment of the project was that there were not enough personnel with sufficient knowledge of BBVs, testing, consent etc. To tackle this issue, a training programme, led by Dean Linzey (Viral Hepatitis Nurse Consultant at the Royal Berkshire Hospital), was developed for substance misuse key workers. Given that they were expert at engaging service users, and positioned in agencies where they had maximum opportunity for contact, it was felt that they were key to ensuring that awareness, testing and (subsequently) treatment rates were increased, and it was therefore they who were the first tranche of 'BBV Champions'.

The training programme delivered to them centred upon improving their knowledge of hepatitis C and providing them with the training necessary to not only carry out BBV tests but also provide the requisite support, advice and information to service users. After undergoing the training, the BBV Champions were expected to apply their new-found knowledge and skills in their everyday practice; engaging with service users on the issue of hepatitis C and ensuring that the number of people tested increased in their service. Crucially, backing for the programme was secured from the substance misuse agencies operating locally, as well as the council-run Drugs and Alcohol Team, and with their assistance Orasure oral swabs were acquired to be used in testing; something which significantly improved the ability of BBV Champions to test increased numbers of people.

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Each stage of the process was evaluated and subsequent trainings have evolved based on the feedback both of BBV Champions and of service users. After proving to be a resounding success in the substance misuse field, it was decided to apply the principles of the model to another service user group; those at risk in local South Asian communities.

Eight women from the local Pakistani community were identified as being potential BBV Champions, and subsequently undertook the training programme which was developed for those working in the substance misuse field (but with some amendments made, given the different cohort of at risk individuals). With their innate knowledge of their own community, as well as the knowledge of where best to target and test those at risk within that community, they have achieved significant success in challenging stigma, raising awareness, and increasing the numbers of people tested.

They have done this through running several surgeries in Reading which specifically cater for the South Asian community, and accompany these surgeries with confidential support groups and a helpline available in English, Hindi, Urdu and Punjabi. They have also established a website (<https://hepatitisfindthefacts.wordpress.com/>) providing information about their work, as well as useful resources and information both for people who may be at risk and for health professionals.

Outcomes

Increased numbers of people being tested

In the first year alone of the BBV Champions being trained, there was a **150% increase in the uptake of BBV tests in substance misuse services** in the local area, with these numbers being sustained year-on-year as the numbers of key workers trained as BBV Champions has increased.

In South Asian communities, too, the increase in the numbers of people being tested has been significant, with the **BBV Champions testing 300 people in the first 18 months of being trained** (and 8 of these people testing positive, of which 6 have now been treated and have cleared the virus).

Increased engagement among at-risk groups

Since the rollout of the BBV Champions model, service users have become more knowledgeable about hepatitis C; demonstrated both through service user feedback and through better engagement with treatment services and an increase in the number of referrals to treatment services. Thanks to the effective community-level support offered by BBV Champions, more service users are now entering treatment and adhering to it, even those who are still leading chaotic lifestyles and who may otherwise find it difficult to stay engaged with the treatment process.

Increased numbers of BBV-trained key workers

Each year, the number of substance misuse services in Berkshire putting their key workers forward for BBV Champions training has increased, and there are now 60 trained BBV Champions across the county. This means that hepatitis C testing is now being carried out in 6 different substance misuse facilities by BBV Champions, as well as a floating support service which tests in squats, car parks, and other locations in which homeless people may congregate.

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Improved staff retention and cost-savings for agencies

As well as being a highly successful model for increasing the numbers of people being tested for hepatitis C, it is also a hugely cost-effective one that is virtually cost-neutral, given that services do not have to pay for BBV training from external agencies. With most BBV Champions already being employed as key workers or volunteers, the only significant cost is the acquisition of testing equipment.

Additionally, those services which have put forward key workers for the BBV Champions training have reported improved levels of staff retention; thanks to the increased staff satisfaction which results from upskilling.

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