

Published November 2016

ROADS @ Bristol Drugs Project

An example of improving access to testing

Key points:

- ROADS (Recovery Orientated Alcohol & Drugs Service) @ Bristol Drugs Project began the current service contract in November 2013. At the time, very few people who agreed to a hepatitis C test were going on to be tested.
- At assessment, those service users who agree to a test are tested by the assessor. Tests are carried out in a variety of settings where people with a history of injecting come into contact with ROADS staff, in order to ensure as many people as possible receive a test.
- When ROADS took over the service, under 12% of clients assessed as appropriate to be tested for hepatitis C went on to actually be tested. By 2016, 95% of those deemed eligible to be tested (those with a history of injecting) went on to receive a test.

Overview

The Bristol Drugs Project is based in Bristol, which has high numbers of people with hepatitis C, with around 12,000 people estimated to have the virus in the South West of England. The city has high levels of homelessness and people who inject drugs (PWID) compared with other cities in England. Of the 12,000 people in the South West estimated to have hepatitis C, roughly 7,000 are unaware that they have the disease.

Why the service was established

When ROADS @ Bristol Drugs Project took over the service in November 2013, fewer than 12% of people who were offered and accepted hepatitis C tests actually went on to receive them. There was no drug service blood borne virus (BBV) nurse in post and very few BBV tests being conducted.

This meant that despite working with at-risk individuals, the numbers of diagnoses were low, meaning fewer people engaged in the care pathway.

Bristol ROADS made a concerted effort to increase the number of people receiving hepatitis C tests by better coordinating services and finding ways to address the complications that prevented people who had agreed to be tested for hepatitis C from actually receiving the test.

How the service works

At initial assessment, all service users with a history of injecting drugs and men who have sex with men (MSM) are offered a hepatitis C test. If they accept, they are then tested by the drug service workers immediately. If they accept but aren't willing to be tested there and then and are needle exchange clients, a note is put on their file for them to be tested at their next exchange, thereby ensuring that the test is actually carried out. Service users are made aware, at the time of the test,

Published November 2016

that ROADS share the results with the service user's GP, which ensures continuity of care. Needle exchange clients may choose not to have their results sent to their GP.

As well as tests being conducted at initial assessments, ROADS also carry out tests at the Bristol Drugs Project advice centre, on the project's harm-reduction truck in three parts of the city, and on outreach at hostels and dry houses throughout the city. Tests are also conducted by Treatment Team workers and by the Bristol Specialist Drug and Alcohol Service.

Service users are made aware that the onus is on them to return for their results – as frequent changes of accommodation and loss of phones can make it difficult for the service to contact them.

All results are checked and needle exchange staff and other key workers are asked to remind the service user to get their results. Several workers have received extra training to allow them to give positive results in an appropriate manner. Service users who have tested positive are also offered details of Bristol Hepatitis C Support, who offer telephone support and accompany people to hospital appointments, helping to ensure that people stay engaged in the care pathway.

Individuals receiving their first positive result are offered another test to confirm and then, once confirmed, are offered referral by the ROADS Hepatitis Nurse Specialist to the specialist hepatology service at Bristol Royal Infirmary. If the service user needs help booking their hepatology appointment, they are encouraged to bring the booking letter into the service and staff facilitate the phone call.

An 'All You Ever Wanted to Know About Blood Borne Viruses' training session is run twice a year, which members of the ROADS @ Bristol Drugs Project team and volunteers can book onto if they require an update. Erik Hills, Hepatology Clinical Nurse Specialist, also presents to ROADS workers twice a year on hepatitis C treatments and current access to treatment. Kat Wolf, Hepatitis Nurse Specialist at ROADS @ Bristol Drugs Project, shadows the hepatitis C treatment team at the Bristol Royal Infirmary twice a year, in order to ensure the organisation is up to date with treatment options.



Testing at ROADS @ BDP



Members of the ROADS @ BDP Assertive Engagement Team

Published November 2016

Case study:

Joe made an appointment with ROADS, having been advised to get tested for hepatitis C after reporting liver pain and feeling unusually lethargic. He had a history of injecting and had been through rehab nine months before being tested for hepatitis C. Joe was tested with a dry blood spot (DBS) test by ROADS' Hepatitis Nurse Specialist, Kat, during her outreach work at the dry house Joe attended. Having tested positive, he was then re-tested to confirm the diagnosis.

Two weeks later, Joe was informed about the diagnosis. Reflecting on receiving the news, Joe said: "Obviously it was a bit of a shock, but because I had been suffering, it was also a bit of a relief – in the sense that I knew what it was, and it meant I didn't have to go through other tests". Following his diagnosis, Joe was referred by Kat to the hepatology department at Bristol Royal Infirmary.

Joe said that support was always available at the Bristol Drugs Project's HQ or via telephone: "Kat was at the end of a phone if I needed to talk to anybody and within, I think it must have been a week or ten days, I was at the hospital actually seeing Dr Gordon, the Consultant at the BRI. So it all seemed to follow on quite nicely and I was actually ready to do it".

Outcomes

In 2016 95% of service users who were assessed as appropriate to be tested for hepatitis C went on to be tested. This was compared with fewer than 12% when ROADS took over the service in 2013.

Testing for hepatitis C is now a priority for everyone in ROADS. Everyone from commissioners through to volunteers is dedicated to ensuring that they offer the best service in the country.

For more details, please contact:



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