



13-15 October 2024 | Maison de la Mutualité, Paris

HCV-Free Cities: Best Practices and Strategies

Danny Morris, The Hepatitis C Trust, Birmingham, UK









How I got here, the impact of HIV, and evolving healthcare delivery...





OUR FOCUS

We champion the right of every person at risk of hepatitis C in the UK to receive effective testing, treatment and care.

We achieve this by empowering people with lived experience, influencing policy and practice, and working with healthcare and treatment services to deliver support and raise awareness about hepatitis C



THE HEPATITIS C TRUST IS DEDICATED TO ELIMINATING HEPATITIS C IN THE UK BY 2030 •

WORKING ALONGSIDE OUR PARTNERS, WE ARE COMMITTED TO ENSURING THAT NO ONE IS LEFT BEHIND ON THE ROAD TO ELIMINATION •

FOLLOW ME

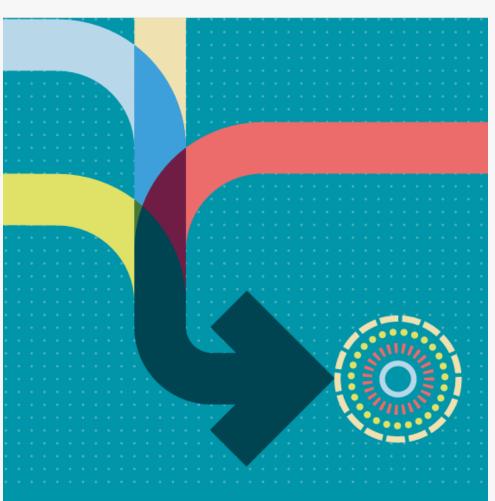
Developed to provide support to people with little access to health care, or those who may find it difficult to navigate traditional HCV treatment pathways.

The core components are peer led:

- Engagement and awareness raising
- Prevention, advocacy & education
- Testing and support to treatment







Global health sector strategies on, respectively, HIV, viral hepatitis and sexually transmitted infections for the period 2022–2030



ELIMINATING HEPATITIS C...

Key challenges in the UK:

- Marginalised populations, excluded from healthcare
- Stigma and discrimination
- Can be asymptomatic for decades
- Curable, but treatment needs 2+ months' of daily tablets

UK elimination centrally about equity – programme includes moving services to community; routine testing in D&A, ED, prisons; local treatment targets; underpinned by peers

Peers: people with relevant lived experience – criminal justice, injecting drug use, homelessness

WHAT DO PEERS DO?

Prevention & training: Train partner staff; educate communities; harm reduction; conduct outreach

Clinical support: BBV testing (POCT, Cepheid, phlebotomy), liver elastography (FibroScan), medication delivery, contact tracing; MDTs

Treatment support: appointment reminders, accompanying to appointments, general support



PEER IMPACT

- Impacts observed at individual, group, cultural & system level
- Increases to individual service engagement, volunteers move on to work, gain skills
- Changed culture stigma, awareness, peer workers as professionals
- Peers can increase service reach and capacity, this is well received by patients
- Integrated teams change healthcare worker views of their patients and engagement / treatment challenges
- Peers can bring a new perspective into health systems generating innovation



"There is an ex-prisoner who goes into prisons with Hep C Trust, it's really good cos she knows what she's talking about, but also shows us that you can make something of your life after." (Prisoner, EP:IC Consultants' UKHSA Inclusion Health Report)

UK MODEL - INTERSECTION, COLLABORATION, MULTI- STAKEHOLDER



AND MORE...

Community, civil society, people affected by viral hepatitis are an essential key stakeholder in all European Countries reaching elimination.

Elimination will not be achieved without an integrated, collaborative, multi disciplinary stakeholder approach with people affected at the center.



THE YEAR IN NUMBERS (2023/24)

49,238 people engaged through hepatitis C awareness sessions or conversation in the community

30,904 people in the community tested for hepatitis C

3,191 supported into community treatment

1,200

14,749 people in prison tested for hepatitis C at High Intensity Test & Treat events

people supported to start treatment while in prison



VOLUNTEER DEVELOPMENT



We couldn't do what we do without The Hepatitis C Trust peers and our peer volunteers. Through lived experience, they are able gain the patient's trust and help them to engage with our service."

EMMA ARNOLD, LEAD CLINICAL NURSE SPECIALIST, UNIVERSITY HOSPITALS LEICESTER



38% of our volunteers go on to full time employment

THE HEPATITIS

LEAVE NO ONE BEHIND

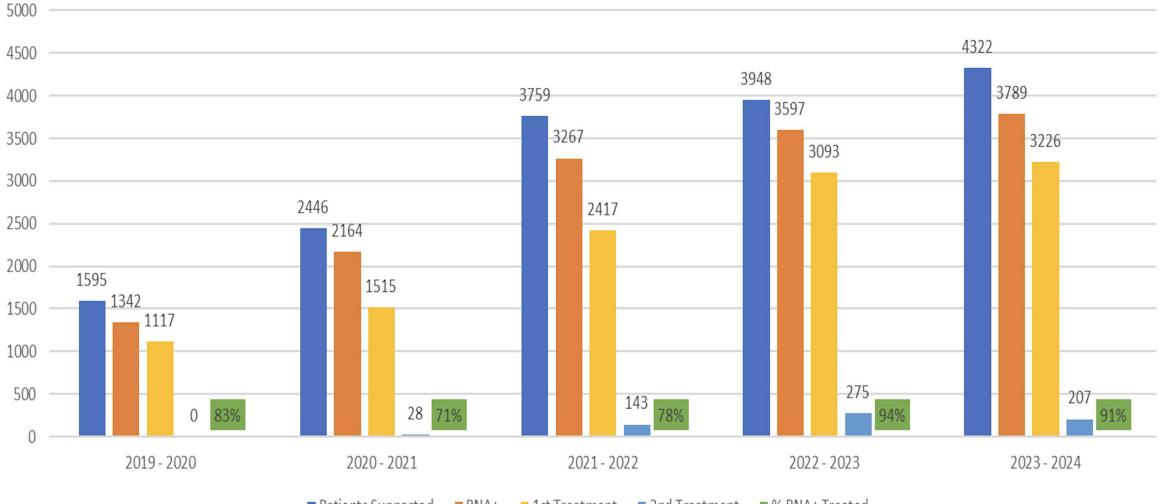
ENGAGING AND EMPOWERING PEOPLE IN HEPATITIS C CARE AND TREATMENT THROUGH PEER SUPPORT



66 It was the first time I'd actually completed anything in my life. My confidence built up a little bit, speaking to people. Through the support of Rachel and Imran I've become a peer myself. It's fantastic, the journey, you couldn't make it up. It's been amazing. 🤊

> Sophie, who was supported on the 'Follow Me' programme

BUILDING ON SUCCESS...



■ Patients Supported ■ RNA+ ■ 1st Treatment ■ 2nd Treatment ■ % RNA+ Treated

BIRMINGHAM FAST TRACK CITY + SIGNING CEREMONY



5TH OCTOBER 2022

FAST-TRACK CITIES+

ACTION

FAST-TRACK CITIES+ BIRMINGH XM

A BOLDER HEALTHIER BIRMINGHAM

PLAN

Birmingham City Council

FTC+ ACTION PLAN

Project overview

FAST-TRACK CITIES+

Birmingham has signed up to the Fast-Track Cities+ (FTC+) Initiative. FTC+ aims to strengthen existing programmes and focus resources to accelerate locally coordinated, city-wide responses to end bloodborne viruses (BBVs) including HIV and viral hepatitis (Hepatitis B and C), as well as Tuberculosis (TB), as major public health threats by 2030 and 2035 respectively. The initiative also aims to strengthen communities and ensure timely provision of services that support the population living with these conditions, without prejudice and stigma.

Project objectives and targets

The main objectives of the programme are to:

- Strengthen existing programmes and accelerate locally coordinated responses to end blood-borne viruses including HIV/AIDS and viral hepatitis (Hepatitis B and C), as well as Tuberculosis (TB), as major public health threats by 2030.
- Strengthen communities and ensure timely provision of services that support the population living with these conditions, without prejudice and stigma.

The project aims to target the following groups:

- Young People aged 13 to 25
- Women of reproductive age
- BAME Communities (particularly individuals from African, Caribbean and South Asian ethnic backgrounds)
- Older people aged 50+ years
- LGBT Communities
- Men who have Sex with Men (MSM)
- People Who Inject Drugs (PWID)
- Sex workers (both male and female)
- Homeless people, including rough sleepers and those living in temporary accommodation
- Refugees and asylum seekers

Encompassing a whole-city approach, the initiative offers a more joined-up effort to eliminate and eradicate new transmissions of BBVs and TB.

A BOLDER HEALTHIER BIRMINGHAM

DISEASE SPECIFIC TARGETS

HIV

- 95% of people living with HIV (PLHIV) knowing their status
- 95% of people who know their HIV-positive status on HIV treatment
- 95% of PLHIV on HIV treatment being virally suppressed
- Zero stigma and discrimination

Hepatitis B

- 90% reduction in new cases of chronic Hep B infections by 2030 (compared to 2015)
- 65% reduction in deaths from Hep B by 2030 (compared to 2015)
- 90% childhood Hep B virus vaccination coverage (3rd dose coverage)
- 100% Hep B virus birth-dose vaccination coverage or other approach to prevent mother-to-child transmission
- 90% coverage of vaccination in prisoners, eligible sexual health clinic clients, homeless individuals, sex workers, contacts of Hep B infected cases, asylum seekers, new migrants and people who inject drugs (PWID)

Hepatitis C

- 90% reduction in new cases of chronic Hep C infections by 2025 (compared to 2015)
- 65% reduction in deaths from Hep C by 2025 (compared to 2015)
- 100% of injecting drug users report adequate needle and syringe provision for their needs
- 90% of those living with Hep C diagnosed
- 90% of eligible persons with current Hep C infection started treatment



BIRMINGHAM PEER PROJECT ALIGNED ACTIVITIES

Hepatitis C

90% reduction in new cases of chronic hepatitis C infections by 2025 (compared to 2015)

65% reduction in deaths from hepatitis C by 2025 (compared to 2015)

100% of injecting drug users reporting adequate needle and syringe provision for their needs

90% of those living with hepatitis C diagnosed

90% of eligible persons with current hepatitis C infection started treatment

QEHB Connected

Birmingham ODN is the largest in England,

coordinating hepatitis C care across 14 local authorities across the West Midlands Region, via 11 NHS Trusts. The West Midlands ODN area has a largely diverse population of 6 million – over 10% of England's population - and with notable levels of deprivation across most areas. NHS

Queen Elizabeth Hospital Birmingham

Part of University Hospitals Birmingham NHS Foundation Trust

City of Birmingham

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population of 1.1 million; 5500 opiate users in drug treatment; **3511 opiate users unmet** need (NDTMS 2021/22)

Birmingham ODN Treatment Numbers 2023/24

Actual													
	2023/24 2023/24 2023/24 2023/24 2023/24 2023/					24 2023/24	2023/24	2023/24	2023/24 2023/24 2023/24 2023/24 Grand Total				
Trust	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
GEORGE ELIOT HOSPITAL NHS TRUST	2	1	0	2	1	3	1	0	0	1	3	0	14
SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST	1	3	3	0	0	0	2	5	1	3	4	3	25
THE DUDLEY GROUP NHS FOUNDATION TRUST	1	5	5	1	4	1	1	5	2	2	6	0	33
THE ROYAL WOLVERHAMPTON NHS TRUST	8	10	9	9	5	2	7	9	4	5	3	0	71
UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST	39	49	52	40	32	30	35	44	35	38	49	13	456
UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST	10	7	10	8	11	5	11	5	3	2	7	3	82
UNIVERSITY HOSPITALS OF NORTH MIDLANDS NHS TRUST	18	14	7	13	6	11	15	11	10	5	9	3	122
WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST	9	13	17	16	12	9	13	10	8	5	6	3	121
WYE VALLEY NHS TRUST	5	0	1	3	0	1	3	1	1	0	1	0	16
WALSALL HEALTHCARE NHS TRUST	1	1	3	5	0	5	2	2	6	0	2	0	27
THE SHREWSBURY AND TELFORD HOSPITAL NHS TRUST	6	5	11	2	3	0	3	6	3	3	1	1	44
SOUTH WARWICKSHIRE UNIVERSITY NHS FOUNDATION TRUST	1	1	2	2	1	1	4	1	0	0	2	0	15
BIRMINGHAM WOMEN'S AND CHILDREN'S NHS FOUNDATION TRUST	0	0	0	0	0	0	0	0	0	0	0	0	0
Grand Total	101	109	120	101	75	68	97	99	73	64	93	26	1026

Birmingham Follow Me Peer Project April 2023 – September 2024

2460 antibody tests
3695 dried blood spot tests (HBV/HCV/HIV)
509 Cepheid/GeneXpert tests

785 antibody +ve
255 HCV PCR +ve
369 treatment starts

151 treatment completions
102 SVR12

* 9 Hep B +ve / 19 HIV +ve/ 4 HIV/HCV co-infection (2024 only)





INTO THE FUTURE...



















THANK YOU

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