CHIEF SCIENTIST OFFICE

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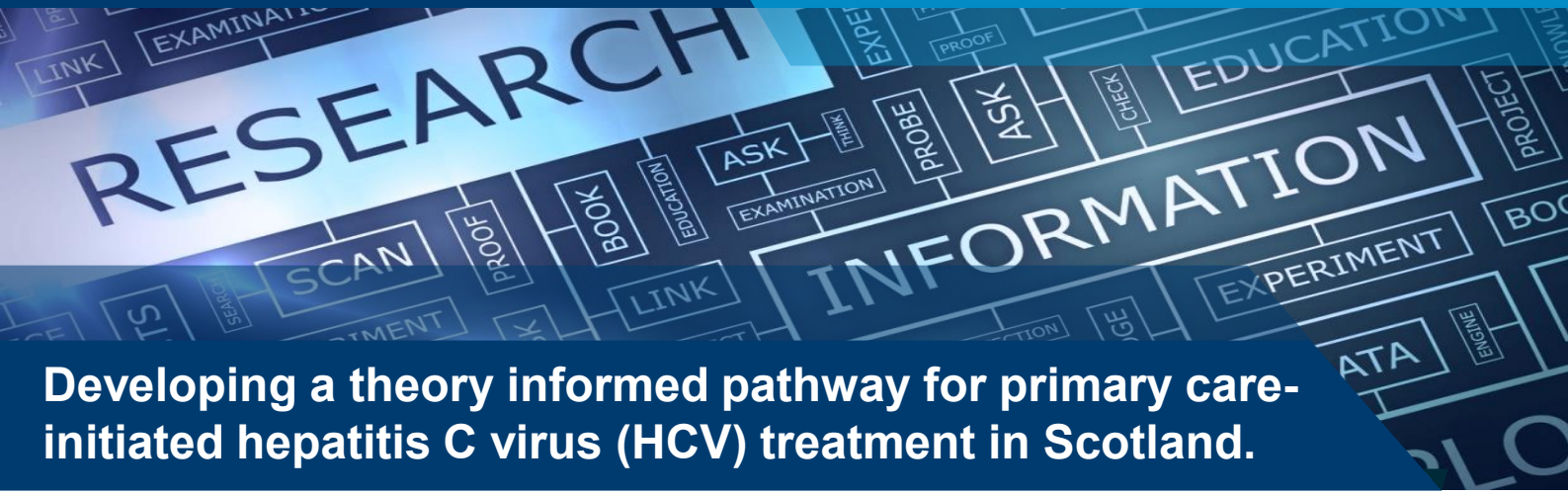
RESEARCH PROJECT BRIEFING




# Developing a theory informed pathway for primary care-initiated hepatitis C virus (HCV) treatment in Scotland.

## AIMS

Treatment for HCV was traditionally delivered from hospital-based clinics by specialist practitioners. Over the last ten years, improvements in the safety and effectiveness of HCV drugs have allowed treatment to move into the community. How primary care practitioners could best provide that treatment is currently poorly understood.

We aimed to design a pathway for primary care-initiated HCV treatment in Scotland, primarily focused on people who inject, or have injected drugs. In addition, we aimed to identify barriers and enablers that may influence the pathway's success, and make practical, theory-informed recommendations, to help embed the pathway into practice.

## KEY FINDINGS

- Barriers to primary-care initiated HCV treatment included General Practitioner (GP) capacity; the need for pre-treatment assessment of liver fibrosis; the notion that HCV required treatment by 'specialists'; and practical problems around blood-tests and drug dispensing. Enablers included models of shared care; GPs physical location in the heart of their communities; the simplicity of taking HCV medications; and the knowledge that HCV is a curable disease.

- Participants understood 'HCV treatment' to incorporate three elements: removing the virus, assessing liver health, and opportunities to improve patients' general health and wellbeing.

- The treatment pathway we developed addressed the key barriers and capitalised on the identified enablers, while ensuring these three integral elements were embedded within its structure.

- Recommendations to help pathway implementation fell into six areas: interventions aimed at enhancing relationships between key services; a focus on reducing social stigma; the co-development of protocols and health improvement interventions; practical ways to make the pathway part of 'routine' practice in primary care; and publicising the pathway.

## WHAT DID THE STUDY INVOLVE?

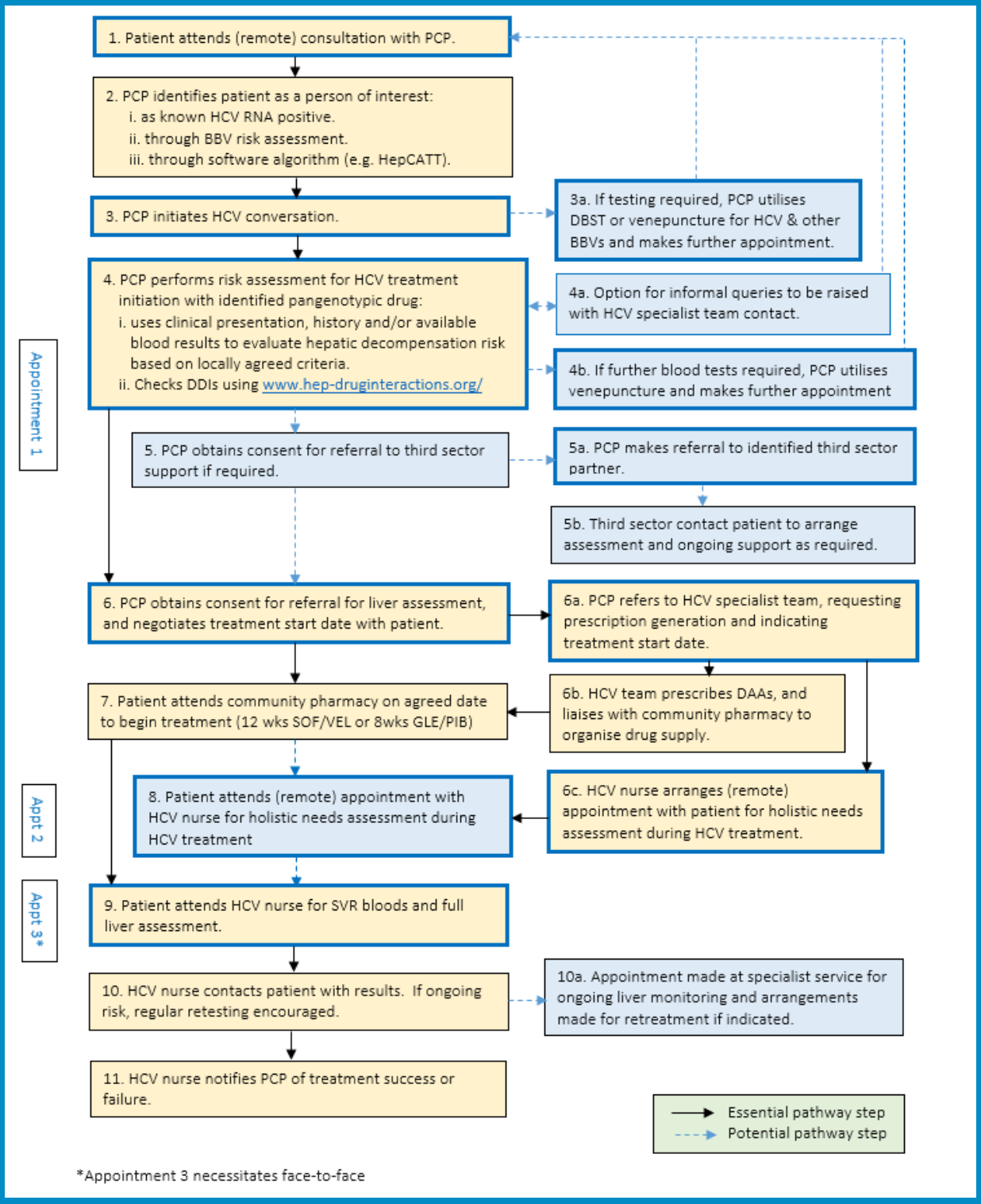
1. From October 2019 to January 2021, we conducted interviews with 38 key stakeholders focused on the provision of HCV treatment in primary care. These stakeholders comprised people living with HCV, GPs, hospital-based HCV specialists and people working in the third sector currently providing support for those living with the disease.
2. The interviews with people living with HCV were planned and conducted by peer researchers engaged through the Scottish Drugs Forum user involvement programme.
3. The interviews shaped the structure of the pathway, and identified specific barriers and enablers that may influence its success.
4. We then used the interview data and established behaviour change theory to generate specific recommendations that could help embed the pathway into primary care.
5. These recommendations, and the pathway itself, were then sense-checked and pretested by three focus groups of stakeholders, drawn from the groups of people identified above.

## WHAT WERE THE RESULTS AND WHAT DO THEY MEAN?

- The interviews revealed multiple barriers and enablers to primary care initiated HCV treatment. Barriers included GP capacity; the pre-treatment assessment of liver fibrosis; a notion that HCV could be treated solely by 'specialists'; and practical problems around blood-tests and drug dispensing.
- Enablers included models of shared care; GPs physical location at the heart of their communities; the simplicity of taking HCV drugs; and the knowledge that HCV is a curable disease.
- In addition, the interviews exposed an understanding of 'HCV treatment' as incorporating three distinct elements: removal of the virus, assessment of liver health, and opportunities to improve patients' general health and wellbeing. We have published these findings in the Journal of Viral Hepatitis.
- These findings informed the structure of the pathway, which aimed to address the barriers, capitalise on the enablers, and maintain the essential elements of HCV treatment. The resulting pathway is shown on the next page.
- The physical structure of the pathway was then complemented by the generation of specific recommendations to help address remaining barriers and embed the pathway into primary care. These recommendations focused on eliciting behaviour change in particular people at certain points in the pathway, and fell into six areas:
    - interventions aimed at nurturing and enhancing relationships between key services at different points in the pathway.
    - a focus on reducing social stigma to encourage engagement.
    - the co-development of treatment protocols at a local level.
    - the development of educational interventions focused on fundamental elements of HCV care and the benefits of dried blood spot testing.
    - practical interventions to make the pathway part of 'routine' practice in primary care such as prompts in IT systems
    - And finally, ways of publicising the pathway to people living with HCV.

## THE PATHWAY

### A sequential pathway for primary care-initiated treatment of HCV.



## WHAT IMPACT COULD THE FINDINGS HAVE?

- The Scottish Government's HCV strategy explicitly calls for eclectic models of HCV care to be adopted. This pathway provides a blueprint for primary care to become an integral component in the drive towards HCV elimination.
- This pathway offers an additional point of entry to HCV treatment, complementing existing community-based treatment pathways, and expanding access for people who use, or have used drugs and are living with HCV.
- The initiation of HCV treatment by non-specialist practitioners reduces the need for multiple pre-treatment appointments, simplifying the patient pathway and improving treatment uptake.

## HOW WILL THE OUTCOMES BE DISSEMINATED?

- We held an online event in September 2021 for interested parties from primary care, 'specialist' care, policy and the community. The event incorporated a presentation of the pathway, with subsequent roundtable discussion.
- We have published some of our findings in a high impact academic journal, with another publication underway to present the final pathway. In addition, we are generating awareness and interest through the publication of opinion pieces and editorials in leading primary care journals and magazines. We also presented the study at an international conference in October 2021.
- We will extend our findings to the Hepatitis C Trust and members of the Scottish Hepatitis C Parliamentary Champions Group, in addition to using existing networks with the British Liver Trust and Royal College of General Practitioners to facilitate dissemination.

## CONCLUSION

This study has designed and pre-tested a pathway for HCV treatment initiation by non-specialist practitioners in primary care. In addition, we offer recommendations for implementing, integrating and normalising the pathway into existing practice.

**Next step**: To secure funding to assess the feasibility of introducing the pathway into primary care

## RESEARCH TEAM & CONTACT

Dave Whiteley, Elizabeth Speakman, Lawrie Elliott, Katherine Davidson, Helen Jarvis, Michael Quinn, Paul Flowers

Department of Nursing & Community Health; School of Health and Life Sciences; Glasgow Caledonian University

david.whiteley@gcu.ac.uk

+44 (0) 141 331 3004

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