



A Community Partnership Model to achieve universal HCV Rx access for marginalised people

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How it all started:

- Established in **1987** in response to a recommendation of the NSW Select Committee of the Legislative Assembly Upon Prostitution
- ‘... Problems could be overcome by establishing a centre with ...**flexible outreach ...drop-in services** ... fully **accessible** and **acceptable** to...’ [sex workers].
- ‘...Centre not be solely identified with an STD clinic ...would offer **general health care, counselling** and a **range of other relevant services**’ (Rogan Report 1986)

Service aims

- To prevent, treat and care for HIV/AIDS and other transmissible infections among :
 - ‘At risk’ young people (< 25yrs)
 - Sex workers, and
 - People who inject drugs



Harm reduction framework

- Committed to principles of **health promotion** (Ottawa Charter, 1986) & community development
- **Non-judgemental**, respectful of clients' chosen lifestyles but emphasis on ensuring these are fully informed
- **Client-focused**, promoting self-determination and empowerment
- Eclectic and **flexible** approach, operating along the continuum from harm reduction to abstinence

Service model

- **Population** (not disease) focused, consistent with public health approach to public health issues
- **Holistic**, recognising that ‘health’ encompasses physical, emotional and social wellbeing
- **‘One-stop-shop’** integrated health service delivery model recognised by WHO as ‘best practice’
- Provided by a **multi-disciplinary team**, with blurring and extension of roles, working under a ‘professional’ model

Service model cont.

- **Anonymous and confidential** (no Medicare card needed)
- **Free-of-charge** (including limited pharmacy)
- **Drop-in** (or by appointment)

KRC services cont.

- Assessment and management of general health issues
- Sexual health screening, treatment of sexually transmitted infections and sex worker “check ups”
- HIV antibody testing (incl. rapid) / pre and post test discussion
- Assessment and treatment of HIV and AIDS-related conditions, with access to antiretroviral therapies
- Hepatitis A and B testing and vaccination
- Hepatitis C testing and monitoring of liver function
- Healthy Liver/Specialist Hepatitis C Clinics: fibroscans + DAAs
- Women’s health checks including Pap smears and breast examination
- Contraception, pregnancy testing, counselling and referral
- Crisis and ongoing counselling; Mental Health clinics

KRC services cont.

- Drug and alcohol assessment, referral to drug detox and rehab
- Pharmacotherapy Access Program – ‘low threshold’ methadone and suboxone Rx; harm reduction focused; case management approach
- Social welfare information e.g. housing, income, education, training and legal advice
- Client groups e.g. Itha Mari health and healing, nutrition, X cooking
- Health promotion ‘calendar’
- Projects: Aboriginal, Youth, Homelessness and Take-home Naloxone
- Needle syringe program: 3 primary NSP sites (KRC, C180 and KRC South); 12 secondary NSPs; 8 vending machines and 7 dispensing chutes
- Needle clean up service

= the most integrated targeted PHC service of its kind documented in the world scientific literature to date

Clinic 180

@ 180 Victoria Street, Potts Point

RAPID HIV TESTING

Fast results without needing to visit again

CONFIDENTIAL

Confidential and anonymous (no Medicare card needed)

FREE

Sexual health screening, STI and HIV treatment and condoms also available

EASY

Monday - Friday
1.30pm til 9pm
Drop in or make an appointment

ACCESSIBLE

Clinic 180
T: 9357 1299 / 9360 2766
180 Victoria Street,
Potts Point



Health
South Eastern Sydney
Local Health District

HIV TESTING

KIRKETON ROAD CENTRE
KRC

Clinic 180

@ 180 Victoria Street, Potts Point

7 Days a Week: 1,30pm - 9pm

- Needle syringe program
- Condoms

Monday to Friday: 1,30pm - 9pm

- Sexual health screening
- HIV and hep C testing, hep B testing and vaccination
- First aid and wound care
- Counselling and social welfare assistance
- Drug and alcohol assesment and referral

Ring KRC on 9360 2766 or 9357 1299 for more information
Anonymous, free and drop in (no Medicare card needed)

Outreach services

Using a multi-disciplinary, multi-agency & partnership approach

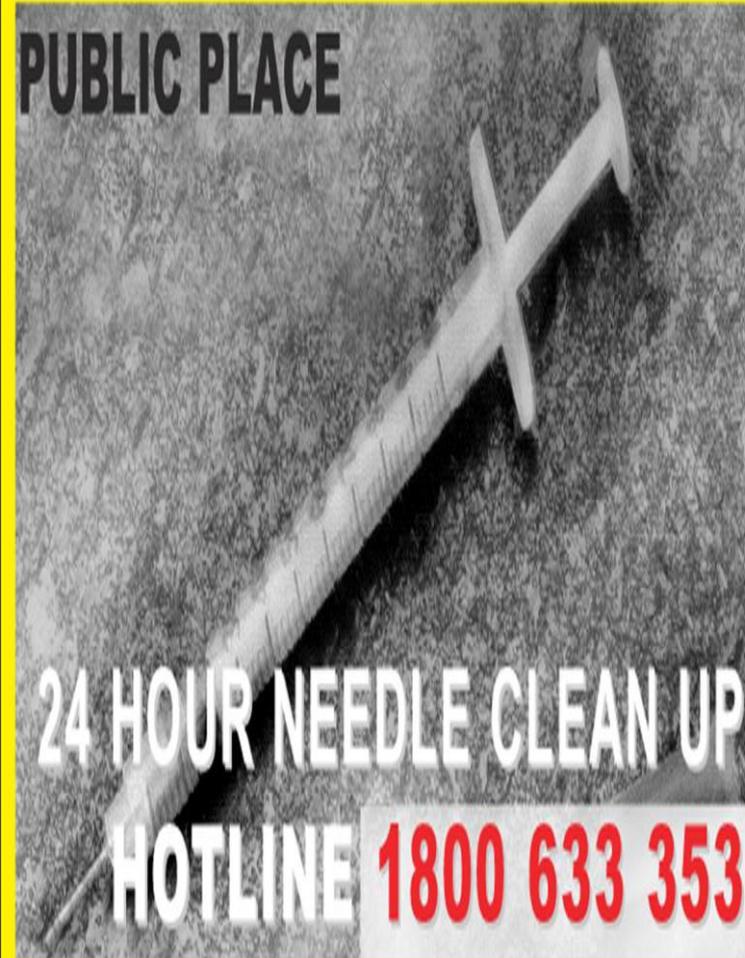
- The 'Group Room' at KRC
- Foot outreach: evenings to KX streets, parlours, clubs
- The Bus: nightly in East Sydney, Woolloomooloo
- Youth clinics: weekly at the Wayside, Oasis & 2010
- Hepatitis C clinics: NUAA, MSIC, Matthew Talbot, Edward Eager



Foot outreach

WHOTOCALL

IF YOU FIND A **NEEDLE** IN A
PUBLIC PLACE



**24 HOUR NEEDLE CLEAN UP
HOTLINE 1800 633 353**



Outreach Clinics



Community events & workforce development



Training and research

- Training programs in PHC, NSP & Outreach for healthcare workers, and Sharps Management for commercial organisations
- In-house public health research capacity through SLA with UNSW's Kirby Institute (KI) enabling evaluation of interventions and dissemination of findings in a timely way, thereby also ensuring an evidence based approach to the evolution of KRC's service development
- KRC is also a sentinel surveillance site to monitor national trends in illicit drug use (NDARC/IDRS) and HIV and HCV infection (KI) among PWID

study background

- The Australian government funded Direct Acting Antivirals (DAAs) without restrictions in early 2016
- Immediate response: > 10% initiated into treatment within months
- To ensure universal access and potential public health benefits of HCV Rx marginalised populations needed have access to liver assessment
- KRC, NUAA and MSIC have been in regular contact with the most marginalised PWID in inner Sydney for many years

methods

- **KRC developed a ‘community partnership model’ with NUAA and the MSIC**
- **KRC provided fibroscan and HCV serology assessments at nurse-led clinics at KRC, NUAA & MSIC and other relevant NGOs**
- **NUAA’s clinic included peer support**
- **Demographic info and results were extracted from KRC clinical database**

results

From 2014 – Aug 2016:

- 1 476 clients assessed in all settings
- Mean age: 39 years; two thirds male
- 19% Aboriginal and/or TSI

- 684 fibroscans conducted: 388 at KRC, 80 at NUAA, 58 at MSIC, 155 elsewhere
- 819 HCV tests, 659 PCR tests: 40% chronic HCV

- 25% first engaged in outreach settings

conclusions

- KRC is well positioned to provide liver assessments to a large number of marginalised people through its ‘community partnership model’ (NNEDC, Mar 2016: NSW 40%; SESLHD 53% KRC 70%)
- KRC’s engagement with current injectors, accessible medical and psychosocial support capacity including its low threshold OST program – is well able to connect those assessed as needing HCV Rx to appropriate care at KRC, with its potential to also achieve public health benefits through secondary (‘treatment as) prevention’

acknowledgments

- Dr Phillip Read, KRC
- Rosie Gilliver, KRC
- Dr Karen Chronister, KRC
- Dr Mary Harrod, NUAA
- Dr Marianne Jauncey, MSIC
- Clients and other staff, KRC, NUAA and MSIC