

HCV VIRTUAL: THE USE OF A WEB-BASED TOOL TO ASSIST IN MANAGEMENT AND FOLLOW-UP OF PATIENTS WITH HCV

Pritchard-Jones J¹, Swift W¹, Dobinson J¹, Marshall K¹, McCaughan G¹

¹AW Morrow Gastroenterology and Liver Centre, Royal Prince Alfred Hospital, Sydney, 2050

Background:

HCV is easy to diagnosis and treat. We have developed a model of care that aims to link more people to diagnosis and treatment.

Description of model of care/intervention:

In Sydney Local Health District (SLHD) we have developed a web-based tool using REDCap (Research Electronic Data Capture) to create a multidisciplinary approach to assist HCV elimination. The REDCap HCV Virtual tool incorporates new notifications and all the positive SLHD Sydney South West Laboratory Services (SWSLab) results. HCV Virtual allows a central coordination point in our LHD where positive HCV results could be collated, reviewed, assessed and followed up by an experienced hepatology nurse on a case by case basis. The REDCap tool enables us to identify the number of contact attempts made to patients/clinicians, generate automated letters to clinicians with follow up recommendations, identify barriers and gaps in delivery of care and allows the secure storage and sharing of information.

Effectiveness:

386 new notifications and 216 (of a possible 663 HCV positive results) laboratory results have been reviewed and entered into REDCap. GPs have identified more new cases (216; 56%) than SLHD clinicians (170; 44%). Of GP notifications/cases, 124 (58%) required further follow-up: subsequently 44 (35%) have tested RNA negative, 38 (31%) have commenced treatment and 42 (32%) cases are complex and are still proving difficult to link to care. Almost 50% (106) of the 216 laboratory result cases have now been resolved.

Conclusion and next steps:

HCV Virtual is a secure and feasible central navigation program to assist in the follow-up of HCV cases. Whilst we have resolved most of the cases, REDCap has also allowed us to identify a significant number of people who are at risk of “slipping through the cracks” as their clinician or the hepatology nurse has been unable to engage them in appropriate care.

Disclosure of interest:

None