



**South East Health**

*Good Health Care*

*Better Health*

# **Hepatitis C Strategy**

**South East Health**

**2000 to 2003**

## ACKNOWLEDGEMENTS

The Hepatitis C Strategy was prepared by the South East Health HIV/AIDS & Related Diseases Unit in conjunction with the Hepatitis C Advisory Committee (See Appendix C for membership).

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## FOREWORD

The *Hepatitis C Strategy South East Health 2000-2003* documents the way forward for the Area in responding to the emerging challenge of hepatitis C infection. Based on the high rates of notifications of hepatitis C infection in SEH and the anticipated morbidity associated with chronic infection, health services in the Area will be increasingly affected by hepatitis C.

The Strategy has been developed within the framework set by the *SESAHS Communicable Diseases Strategic Directions Statement* and accords with the guiding principles of the *National Hepatitis C Strategy 1999-2000 to 2003-2004*.

The Strategy was developed by the HIV/AIDS and Related Diseases Unit under the guidance of the Area Hepatitis C Advisory Committee with considerable contribution from Area service providers and the NSW Hepatitis C Council. Thanks are extended to those involved.

I commend this document to you and extend my support in ensuring that the objectives of the Strategy are achieved.



**Deborah Green**  
**Chief Executive Officer**

November 2000

## EXECUTIVE SUMMARY

The South Eastern Sydney Area Health Service (SESAHS) has the highest rate of notifications of hepatitis C virus (HCV) in NSW. It is expected that a large cohort of people with chronic HCV infection and HCV related cirrhosis will significantly increase demand on health care services in the Area.

The Hepatitis C Strategy 2000 to 2003 presents approaches to the emerging need for effective and efficient services for our residents and service users. This document addresses the objectives outlined in the *South East Health Communicable Diseases Strategic Directions Statement, 1999-2002*. In addition, the plan responds to the recent state and national policy developments that have occurred since the Area produced the *Communicable Diseases Strategic Directions Statement*.

The *Communicable Diseases Strategic Directions Statement* established a framework for the future of communicable disease prevention and management in the Area. It provided a local context to national and state service policy and strategic frameworks, and in particular, to the 3<sup>rd</sup> National Strategy for HIV/AIDS, released in December 1996. The national strategy noted the overlap between HIV/AIDS, hepatitis C and sexually transmitted diseases and proposed the strengthening of each program by drawing together and making use of the overlapping and complementary components of HIV/AIDS, hepatitis C and sexually transmitted diseases.

Key components of the Communicable Diseases Strategic Directions Statement include:

- the development of a framework for an integrated, coordinated and comprehensive approach to the planning, provision and evaluation of services.
- the establishment of a standard data set and database.
- financial accountability.
- the reduction of the burden of illness.
- non-discrimination.
- commitment to excellence within the provision of services.

In response to the Communicable Diseases Strategic Directions Statement, the Area established the Hepatitis C Advisory Committee in 1999 chaired by the Area Director of Communicable Diseases.

The national policy framework is outlined in the *National Hepatitis C Strategy 1999/2000 to 2003/2004*. The document describes guiding principles in the national response to HCV including non-partisan political support, a partnership approach, the

involvement of affected communities, an enabling environment and harm minimisation.

NSW Health has undertaken a review of Care & Treatment services for HCV and has released the *NSW Hepatitis C Strategy Discussion Paper, September 1999*. Key strategies in the proposed NSW Hepatitis C Strategy include:

- Prevention strategies: expansion of the Needle and Syringe Program; establishment of a trial medically supervised injecting room; continuation and increasing peer support programs; implementation of Skin Penetration and Infection Control guidelines; provision of health promotion programs in correctional settings and increasing personal and public awareness.
- Treatment, care and support strategies: development of the Hepatitis C Care and Treatment Plan; development of planning principles for the planning, funding and provision of services; provision of primary health care through general practitioners; expansion of the role of specialists in private practice, leadership and coordination role of hospital based services; development of protocols for laboratory services; provision of public health service; Non-Government Organisations services; provision of corrections health; funding for hepatitis C and minimum service guidelines.
- Training and education for health care workers.
- Conducting social research projects and implementation of Australian Hepatitis C Surveillance Strategy.

The response to hepatitis C is occurring in parallel with developments in both commonwealth and state strategies dealing with injecting drug use. These developments within the drug and alcohol sector will relate to hepatitis C services, particularly the expansion of methadone places, the proposed injecting room trial, shared care programs with general practitioners and core data set development.

## Planning Process

The HIV/AIDS & Related Diseases Unit and the Area services involved in hepatitis C have been actively participating in the national and state hepatitis C planning activities over the past year. The Unit has referred to the submissions provided by Area services to these activities in developing the Area Hepatitis C Strategy. Furthermore the Unit completed a mapping exercise for hepatitis C care and treatment services in 1999.

In addition, a process of consultation was undertaken with services involved in health promotion and education. In particular, the Area's Needle and Syringe Program services have assisted with the planning process.

The South East Health Hepatitis C Advisory Committee guided the planning process and considered the key planning issues and recommendations.

## Aims of the Plan

The Hepatitis C Strategy aims to incorporate a health outcomes framework and to be consistent with the goals, objectives and strategic directions of South East Health, in particular the Communicable Diseases Strategic Directions Statement.

The strategic aims of the South East Health Communicable Diseases Directions Statement are to:

- Provide best practice standards of surveillance, health promotion, prevention, clinical care and treatment for communicable diseases to all patients.
- Ensure health care providers and the community are informed regarding the most effective available treatments and approaches
- Ensure the cost-effective delivery of health promotion, prevention and treatment services

The aims of South East Health Hepatitis C Strategy are:

- To ensure effective surveillance and reporting of hepatitis C infections for guiding service planning and evaluation.
- To reduce the transmission of hepatitis C in South East Health by developing and implementing a comprehensive health promotion strategy.
- To improve and maintain the quality of life of people living with hepatitis C in South East Health.
- To develop and implement a training and education strategy for health care workers.
- To provide accessible, equitable, effective, efficient, appropriate and safe hepatitis C services.
- To ensure that hepatitis C services are integrated and coordinated with related services including HIV/AIDS and Drug and Alcohol services.
- To support and involve general practitioners in the assessment and management of hepatitis C.
- To encourage and support research and teaching.
- To develop a partnership approach with service providers and people living with hepatitis C in service development, implementation and evaluation.