Gilead Hepatitis C Drug Treatment Services Provider Forum Achieving Elimination Through Collaboration

This material is intended for health care professionals and stakeholders involved in hepatitis C elimination in the UK & Ireland.

## Drug Treatment Service (DTS) Hepatitis C Micro Elimination Criteria for People in Structured Treatment Within the Defined Population

This document sets out the detailed criteria for Micro Elimination of Hep C within a DTS that has been collaboratively established through an extensive and careful review process, and by consensus agreement from the HCV DTS Provider Forum partners. It is important to note that there are caveats around the criteria, and that the criteria are not intended to be a definitive definition of elimination, but to serve as aspirational targets to local and individual DTS as we work towards our shared ambition to achieve Hep C Elimination in DTS, in England and globally.

Before setting out the criteria for Micro Elimination, it is important to note that:

- 1. The criteria refer to a sub-set of the total client population. It is acknowledged that the criteria will not include all clients and only applies to active clients in structured treatment.
- 2. It is intended that the criteria are to be reviewed and refined on an ongoing basis and not serve as a definitive definition of elimination in an area and/or service.
- 3. It is expected that as part of any definition of elimination, services undertake a robust quality assurance process which includes reporting against numbers of clients excluded from the definition.
- 4. Reassurance should be provided by the service that clarifies ongoing and future work to address the needs of clients excluded from the definitions.
- 5. Date of meeting the criteria would be reported, and review against the criteria is expected on a 6monthly basis in order to maintain elimination status.

6.	There are three different me	ethodologies that may	be selected by an	organisation to measure criteria 4.	
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	Definition				
Criteria 1	100% of clients in structured treatment are offered a Hep C test.				
Criteria 2	100% of clients in structured treatment who have a history of injecting and have been triaged more than 30 days ago; have a valid Hep C Test Date (equal or prior to Reporting Month End date) and result recorded (ever).				
Criteria 3	90% of clients* <sup>§</sup> in structured treatment, who have a history of injecting (and are deemed to be at risk), and have been triaged more than 30 days ago, have a Hep C Test Date (in the last 12 months up to the Reporting Month End date) & result recorded.				
Criteria 4	<ul> <li>a) 90% of clients* in structured treatment with Positive Hep C test result PCR (RNA) status (recorded at the last CIR if present or triage) have commenced treatment or achieved sustained virological response (SVR)<sup>†</sup></li> <li>OR</li> <li>b) 90% of Service Users with positive hepatitis C AB status and PCR (RNA) status are cleare of hepatitis C.</li> <li>OR</li> <li>c) 90 % of clients* in structured treatment with Positive Hep C PCR (RNA) status ever have commenced treatment or have completed it.</li> </ul>				
	* 2% tolerance is permissible § Excluding assessed as not appropriate to test/retest † Accountability for patient starts and reporting patient starts sits with the Operational Delivery Network. The service will commit to ensuring a robust referral mechanism and support stakeholders in seeking and implementing a local and/or national mechanism for obtaining and reporting accurate patient start data based on a patient start date defined as date of prescription. Scan the QR code for the full microelimination criteria, definitions and supplemental guidance				
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THE HEPATITIS

TURNING POINT