**CHANGEING THE PHARMACOTHERAPY EXPERIENCE FOR PEOPLE WHO USE ILLICIT DRUGS**

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**Background**: Opioid agonist treatment (OAT) is a recognised tool in Hepatitis C prevention. Across Australia, OAT is seen by consumers as punitive and unresponsive. In response to these perceptions and challenges, the NSW Users & AIDS Association developed the CHANGE program at Rankin Court aimed at improving treatment access through peer-supported consumer engagement in service delivery. Rankin Court is an inner-city service with high visibility clients - a large proportion of whom are poor and homeless and have been referred through courts or correctional systems. This paper will examine the CHANGE model and how it can impact on the access of vulnerable clients to medical care.

**Method**: A review of CHANGE peer support worker client contact records (April – June 2015, 10 x 6 hour sessions) were examined.

**Results**: A total of 63 contacts were recorded, about one per hour. A high proportion (48%) had more than one drug of immediate concern with 90% discussing opioid use and 22% concerned with methamphetamine use. The majority of contacts were concerned with OAT program delivery and clinic access with 27% dealing with homelessness and 14% dealing with prison transition. Several clients have become directly involved in the CHANGE project and with a number of positive outcomes through peer support.

**Discussion/Conclusion**: The peer support worker service is accessed readily by clients, primarily to discuss issues around OAT. Clients often perceive clinic staff as un-empathic and perfunctory, resulting in many clients dropping out of treatment altogether. . One key outcome of the CHANGE project is assigning clients a casework team so there are fewer gaps in client access to formal support. Peer support is key to improving clinic access for marginalised people. The CHANGE project is an important opportunity for OAT clients to improve the quality of clinical care and treatment outcomes.