**REAL WORLD EXPERIENCE IN HCV AWARENESS, TESTING, CARE AND KNOWLEDGE TRANSFER IN LA RONGE, SASKATCHEWAN**

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**Background:** Unpublished public health statistics suggest that more than 10,000 people in Saskatchewan live with HCV. La Ronge Medical Clinic is a primary care clinic with 14 physicians on site, catering to a population of 20,000, including four First Nations. Surveys indicate that a minority of patients were tested (238) and/or treated (n=5) and that the majority (74%) did not engage into care. The purpose of this project was to study the impact of a structured approach on testing, treatment and care.

**Methods:** A team of front-line clinicians applied LEAN practices to address the problem. Visiting specialists transferred crucial knowledge to local clinicians. The practice of linking patients immediately to RN case managers promoted engagement, investigations and follow up. A policy of selective referrals to the specialist was revised to referral of all HCV RNA + patients for assessment. The concept of age cohort testing was introduced to the clinicians to complement risk based testing. The team redesigned patient flow and introduced an efficient system of fibro-scanning and vaccinating. A “one-stop” lab visit eliminated the prior practice of 3 lab visits to ensure complete testing. A weekly HCV peer support group was initiated.

**Results:** The number of patients initiated on treatment increased from 5 to 30 during the four month project. Specialist clinic productivity increased from 14 to 28 clients daily. Patient no shows reduced from 52% to 9%. Patient attrition from diagnosis to specialist appointment decreased from 74% to 65%. Patient awareness of a cure for HCV and it’s availability in La Ronge, increased.

**Conclusion:** The introduction of a program of RN outreach, streamlined assessment with specialist consultation resulted in improved follow up and uptake of HCV treatment. The replication of this model in northern health regions is being planned to improve access to HCV care in the Province.

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