HEPATITIS B & C PHARMACY TESTING PROJECT PROTOCOL

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For support and information on any aspect relating to hepatitis C:
Helpline: 0845 223 4424 10.30 to 4.30 Monday to Friday
Email helpline@hepctrust.org.uk
Web: www.hepctrust.org.uk

Promoting Event:

People living in the local area will be invited to attend the pharmacy for hepatitis B and C testing through PR activities.

Posters will also be displayed in the pharmacies.

Promotion will highlight the main risk factors related to hepatitis C so the general public can ascertain whether they may have been at risk of the disease in the past and would benefit from testing.

The local key stakeholders e.g. DAT, GUM, General Practitioners, BBV services and secondary care specialist services will be informed about the pilot project and warned about the possible increase in referral related for newly diagnosed hepatitis B and C and requests for hepatitis B and C screening as a direct knock on effect of the project.

Pharmacy staff preparation / training

Those pharmacists undertaking the blood spot testing will:

- Need to attend a training day to prepare them for the role. A training pack including copies of relevant literature will be given to each pharmacist for reference. Further copies of all materials necessary will be posted to the each pharmacy.
- Need to undergo a super accelerated course of hepatitis B vaccinations (if they are not already vaccinated) at 0, 7 and 21 days with a follow up blood test to ensure adequate antibody levels have been achieved. If necessary, pharmacists can be given a letter to take to the practice nurse at their GP practice to arrange the vaccinations. The Hepatitis C Trust will reimburse fees for the vaccinations (contact jane.allen@hepctrust.org.uk for a letter or reimbursement if required).
Testing

When a client attends the pharmacy requesting testing staff will:

- Introduce themselves to client and give them a copy of the at risk check list to read
- If the client informs the pharmacist that they feel they have been at risk from hepatitis B and C the client will then be escorted to the private testing room *(clients with no obvious risk factors should be advised that testing is not required)*.

Pre test discussion:

The staff will carry out a pre test discussion with the clients taking 10 – 15 minutes.

This discussion will:

- Assess the possible risk factors the clients may have that could indicate that they have been exposed to the hepatitis B or C Virus in the past *(clients with no obvious risk factors should be advised that testing is not required)*.
- Give a copy of the pre – test leaflet to the client
- Outline the blood spot test to the client.
- Advise on what will occur if the client is tested positive for either hepatitis B or C. The procedure for results giving will be explained and a mutually convenient follow-up appointment will be made at the pharmacy 2 weeks later.
- Explain that positive test results may have implications on life insurance and therefore mortgages as is common with many chronic (long term) illnesses.
- Ascertain if the client would be happy to receive a reminder email or letter if they fail to attend their follow up appointment to receive their results.
- Explain that the test is confidential and that the information that they choose to give the staff will be covered by data protection act.
- Explain that information will be written on an individual record for each client for reference and audit. Client’s personal details / information will only be accessible by staff undertaking the testing, analysis and for audit purposes. This information will be kept securely in order to maintain strict confidentiality. This information will not be shared with the clients GP without their consent. Audit information will be compiled but this data will be anonymous.
- The staff will answer any questions the clients may have.

Consent:

The staff will confirm that the client is happy to give their consent to be tested.

The client will be asked to sign and date the consent section of the written testing record.
They will also be asked to give consent to a letter being sent to their GP if they are tested positive for either hepatitis B or C.

No letter will be sent to the GP if the client is tested negative for both hepatitis B or C.

**Room / equipment:**

**Testing Room**

The testing room will need to be private and will have hand washing facilities.

The room will be prepared by the pharmacy staff.

**Equipment:**

- Disinfecting spray
- Paper towels / tissues
- Surgical gloves (provided by The Hepatitis C Trust)
- Cotton wool swabs (provided by The Hepatitis C Trust)
- Blood spot testing kits (including safety lancet, blood spot testing cards, plastic/paper sleeve and prepaid envelope, alcohol swabs, waterproof plaster).
- Sharps containers
- Plastic waste disposal bags for incineration

**Blood spot test:**

- The staff will wash their hands.
- Surgical gloves will be worn.
- The client’s thumb will be swabbed with an alcohol swab.
- The thumb will be pricked with a safety lancet from the testing kit.
- X 5 Blood spots will be placed onto the testing strip of the blood spot card.
- The clients thumb will be swabbed with a cotton wool ball and secured with a waterproof plaster.
- The testing card will be correctly labelled with client’s details or identification number for those wishing to remain anonymous.
- The blood spot must be allowed to dry before they are placed into the plastic sleeve.
- The blood spot testing card will then be placed in a plastic sleeve.
- The sleeve will be placed in the prepaid envelope and posted at the end of the day.
- The test will also be recorded on a testing log for reference and audit.
- The lancet will be safely disposed of in the sharps container.
- Cotton wall balls, surgical gloves and all other equipment will be placed in plastic waste disposal bag for incineration.
- The documentation pack will be completed and the pharmacist will check again that the client knows when they need to attend the pharmacy again to receive their results and that they have all the written information they require.
- The documentation pack will be kept in a safe place until the test results are returned and then the documentation pack will be completed. It will then be posted back to The Hepatitis C Trust in a pre-paid envelope.
The area of testing will be disinfected with disinfecting spray and prepared for next test

**Analysis:**

The prepaid envelope containing the testing strips will be transported to the laboratory at end of day.

Results will be returned to the pharmacy within 2 weeks by post.

**Follow – up:**

Clients will be seen at a pre arranged follow-up appointment to receive their results 2-3 weeks later.

If the client fails to attend the follow-up appointment for results they will be contact by post to encourage them to contact the pharmacy in order to schedule another mutually agreeable appointment time.

Results should whenever possible be given by the pharmacist who undertook the test for continuity.

Those patients tested positive for hepatitis C will be given all test results together including antibody result, PCR and genotyping.

**Positive Results:**

Advice and information will be given to clients tested positive for hepatitis B and/or C and their questions will be answered with reference to post test leaflet.

Advice on how to prevent passing hepatitis B or C to other people will be given, with reference to post test leaflet.

With the clients consent a letter will be sent to their GP with the results (with a copy of the laboratory result) and advising referral to the local secondary specialist hospital based service.

The client will be given a copy of the letter sent to their GP to take away.

If the client is positive but does not attend their follow-up appointment and does not respond to the reminder letter, a letter with the diagnosis should be sent to the client’s GP (provided the client signed a consent form allowing this when they had the test).

**If the client is hepatitis C positive:**

The leaflet from the lab containing basic information on the relevance of different genotypes on the length of treatment required and the chances of viral clearance is should be given to clients.

Clients should be encouraged to see their GP to get a referral to a specialist consultant who will give more information on the relevance of genotypes and may give further tests.
If the client is hepatitis B positive:

Family members will need testing and vaccination these include sexual partners, children living at home and any other family members living in close proximity with the client. This will be arranged by GP once they receive referral letter.

Advise use of barrier methods of contraception / condoms until their sexual partner has been tested and vaccinated or to use condoms if not currently in a permanent sexual relationship.

Negative Result

Recommend re-test if they have been at risk recently (3 month window period).

Give advice on how to prevent catching hepatitis B or C in the future, with reference to pre test leaflet.

If they remain at risk from hepatitis B, recommend a course of vaccination. They can contact the practice nurse at their GP surgery to arrange vaccination.

Audit:

Recorded for audit will be:

- The number of clients accessing the service
- Client’s demographics
- How they heard about the project
- The number of hepatitis B and C positive test results
- The number of clients who where advised that testing is not required (worried well)
- General feedback from pharmacy staff about project