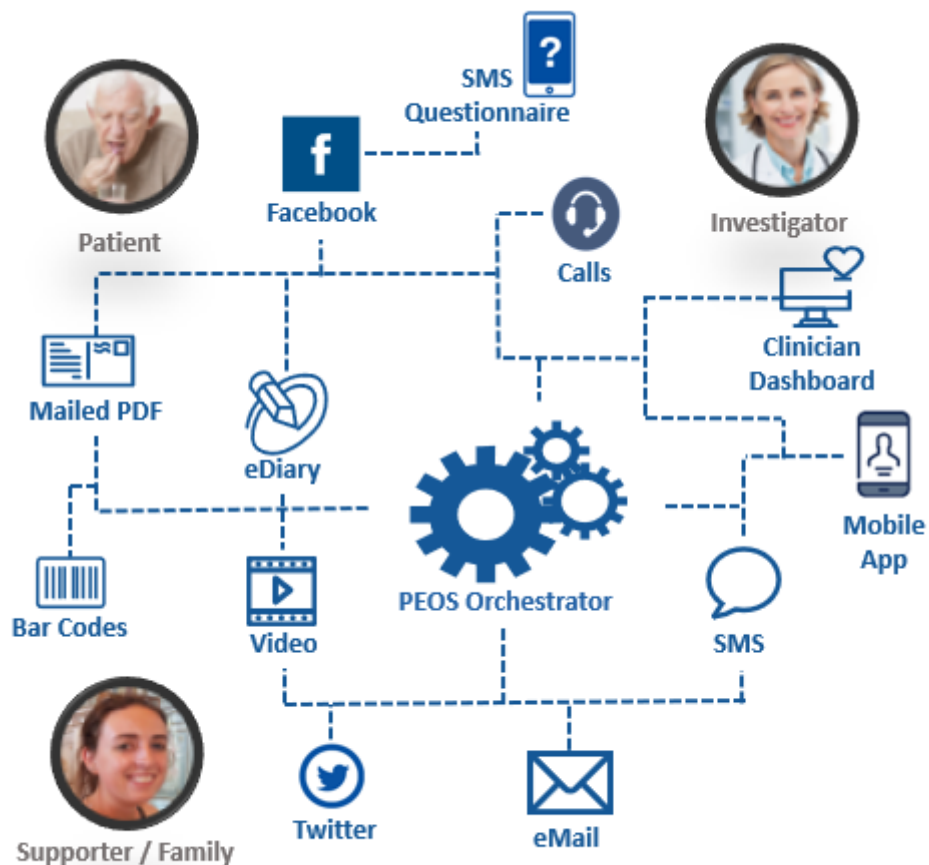


PEOS

Powering Patient Engagement in Hepatitis C treatment in Community Settings.



INTRODUCTION

Hepatitis C is a liver infection caused by the hepatitis C Virus which can result in inflammation and fibrosis of the liver tissue, and sometimes significant liver damage.

There is currently no vaccine to prevent hepatitis C, however new treatments using drugs known as Direct Acting Antivirals (DAAs) offer a cure for hepatitis C in over 90% of hepatitis C patients.

DAAs are expensive, complex treatments, dispensed based on clinical diagnosis, over an 8-24-week period. DAAs require stringent patient adherence and multiple HCP consultations. The average cost price of DAA treatment is €45,000.00 per patient.

OBJECTIVE

In 2015 the HSE established a National Hepatitis C Treatment Programme to ensure 'everyone in Ireland infected with the virus has access to treatment and it aims to make hepatitis C a rare disease by 2026.'

CHALLENGES

It is estimated that between 20,000 and 30,000 people in Ireland are infected with hepatitis C.

The highest incidence of hepatitis C infection is in homeless and injecting drug using communities where one in three people are infected with hepatitis C.



Standard treatment protocols focus on delivering DAA hepatitis C treatment exclusively in hospital settings making it largely inaccessible to homeless and drug injecting patients.

Homeless people and/or injecting drug users are a hard to reach patient cohort generally unwilling to attend hospital-based clinics. Due to the chaotic nature of their lifestyles they need the support of key workers, family and friends to attend appointments and adhere to treatment.

To actively engage homeless and/or drug injected Hep C patients, their support workers, family and SafetyNet HCPs in the eHealth Ireland sponsored DAA Hep C Treatment a Patient Engagement strategy was needed.

*"Look at the profile of people with hepatitis C, they are vulnerable populations.
They do not and will not come to the hospital.*

*The best way to access hepatitis C treatments is to go to them, and not have
them come to the hospital centres. There really needs to be better partnerships
between secondary and primary care"*

*Dr. Lambert, infectious disease specialist at the Mater and Rotunda hospitals in
Dublin*

THE SOLUTION

Safetynet Primary Care is a charity that delivers medical care to those marginalized in society including homeless people, drug users and migrants.

Safetynet treats hepatitis C infected patients who are referred by Dr. Jack Lambert of the Mater Hospital in a primary care setting. These are patients who may struggle to engage in and adhere to any prolonged treatment in a hospital setting.

Safetynet required a Patient Engagement strategy specifically designed to engage homeless patients in the patient's own environment using the patients preferred communications channels.

3rd Pillar Clinical's innovative Patient Engagement Operating System, PEOS, enables Safetynet, on a pilot basis, to successfully deliver Dr Lambert's, Mater Hospital DAA Hepatitis C treatment to homeless and/or drug injected patients in the Homeless Community Clinic in the Granby Centre, Dublin 1.

3rd Pillar Clinical's Patient Engagement Operating System, PEOS, enables Safetynet primary care physicians and key workers to actively engage homeless patients using their preferred communications channel in hepatitis C treatment in a community setting.

This initiative is funded on a pilot basis by eHealth Ireland through their [QIC Digital Programme](#).

BENEFITS

PEOS is an innovative, cloud based, multi-channel, secure, real-time Patient Engagement platform which connects the HCP, the patient and their support workers to ensure maximum adherence to the complex, expensive and highly effective DAA hepatitis C treatment in a community setting.

PEOS presents 'at a glance' real-time aggregated metrics and KPIs on all programmes running in community settings without compromising patient privacy or security.

PEOS provides patients with timely personalised SMS appointment reminder messages and alerts to drive maximum patient participation.

PEOS provides patient's supporters and key workers with real-time treatment advisory messages maximising patients adherence.

PEOS provides Safetynet HCPs with a single, real-time dashboard which captures the individual and patient group journey throughout the treatment.

PEOS streamlines the enrolment, adherence and compliance reporting in one real-time dashboard reducing the administrative burden for the HCPs.



NEXT STEPS

The National Hepatitis C Treatment Programme plan for 2017-2019 is to continue the provision of treatment to patients based on clinical need, expand the clinical treatment criteria and explore feasibility of developing shared models of care across community and acute hospital settings.

3rd Pillar Clinical hopes to work with the HSE to successfully roll-out and extend the provision DAA treatment of Hep C in community settings nationally.

CONCLUSION

PEOS believe it can power the engagement of every patient infected with the hepatitis C virus in Ireland in funded DAA treatment and help make hepatitis C a rare disease in Ireland by 2026

PEOS can be deployed to facilitate the roll-out of any funded DAA hepatitis C treatment in community settings nationally and can enable increased identification, enrolment and treatment of hepatitis C patients in DAA treatment in community settings nationally.

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