

**Vaughan Gething AC/AM**  
**Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol**  
**Minister for Health and Social Services**



Llywodraeth Cymru  
Welsh Government

Ein cyf/Our ref MA/P/VG/2847/19

Dr Dai Lloyd AM  
Chair, Health, Social Care and Sport Committee  
National Assembly for Wales  
Cardiff Bay  
Cardiff  
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9 August 2019

Dear Dai,

Thank you for your letter of 25 June 2019 regarding the Health, Social Care and Sport Committee's Report on progress towards achieving elimination of Hepatitis C in Wales.

The attached document provides my formal response to each of the Report's recommendations. You will note I am content to accept, or accept in principle all of the recommendations which have been made.

Please pass on my thanks to the Committee and everyone else involved in supporting your inquiry and producing your final report.

Yours sincerely,

**Vaughan Gething AC/AM**  
**Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol**  
**Minister for Health and Social Services**

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

## **Written response by the Welsh Government to the report of the Health, Social Care and Sports Committee on progress towards achieving Hepatitis C elimination in Wales**

The Welsh Government is signed up to the World Health Organization elimination agenda for hepatitis B and C, which includes targets to reduce viral hepatitis incidence by 90% and to reduce mortality due to hepatitis B and C by 65% by 2030.

There are an estimated 12,000 Welsh residents who are either unaware they have hepatitis C or are not engaging with services for treatment (modelling for Wales is in the process of being finalised and this figure could change). In response to this challenge, a Welsh Health Circular ([WHC/2017/048](#)) was issued to NHS Wales in October 2017, which set out the framework of actions needed at a local level to support elimination.

WHC/2017/048 emphasised the importance of developing effective and sustained outreach services to engage with individuals not currently in contact with traditional services. It also emphasised the importance of improved testing and treatment delivered in settings and environments in which these individuals are familiar and comfortable with so they are more likely to attend and accept treatment.

To support the local action required, a wide range of national actions are currently being progressed to support elimination which include:

- BBV opt-out testing which was introduced in prisons in Wales in 2016.
- A national hepatitis C patient re-engagement exercise has commenced which involves re-contacting patients who were diagnosed at a time when either treatment wasn't available or wasn't well tolerated. So far in 2019, over 600 letters inviting patients for re-testing, have been issued and further letters will be issued as patient data is quality assured.
- A national specification for testing in community pharmacies has been developed and from April 2019 is being piloted in Cardiff and Vale and Cwm Taf Health Boards before being rolled out across Wales.
- A Key Performance Indicator (KPI) for Area Planning Boards, focusing on the offer of a BBV test annually to all those accessing substance misuse services, has been agreed and introduced from April 2019. A Welsh Government Task and Finish Group has been established to support and oversee its introduction and progress.
- NHS Wales has negotiated with the pharmaceutical industry to agree a new funding deal for hepatitis C treatments from April 2019.

The above actions are all essential components of an elimination strategy.

I would like to thank the members of the Health, Social Care and Sports Committee for their report on progress towards achieving hepatitis C elimination in Wales. I have set out my response to the Report's individual recommendations below.

## **Detailed Responses to the report's recommendations are set out below:**

**Recommendation 1.** We recommend that the Welsh Government produces a comprehensive national elimination strategy for hepatitis C, with clear ambitious targets, and workforce planning built in, and provides sustainable funding until elimination is achieved. This must be done as a matter of urgency, given that the current plan will end this year, and funding for dedicated posts is only confirmed until 2021.

### **Response: Accept in principle**

Welsh Government policy has moved away from very specific disease strategies because their limited focus, together with the administrative burden of a formalised strategy, create limitations. This inquiry focused specifically on hepatitis C and whilst clearly important, even within hepatitis, there are other actions, such as the need to eliminate hepatitis B (another WHO target). There are also a wide range of other diseases/health protection policy issues that do not have specific strategies and yet significant work is being undertaken in these areas without the administrative burden of a formalised strategy.

Key activity in relation to hepatitis C (and B) was previously part of the BBV Action Plan, which ran until 2015, is now part of the broader Liver Disease Delivery Plan, which is due to run until March 2021. Irrespective of its inclusion in wider strategies, it is known what is required to successfully eliminate hepatitis C: increased testing and treatment in the community.

The process to increase testing and treatment in the community is underway and we anticipate significant improvements through the introduction of the KPI for Area Planning Boards in relation to testing for BBVs in substance misuse services. Further to this, the Welsh Government will introduce formal health board hepatitis C testing and treatment targets as part of the NHS Delivery Framework for 2020/21.

Welsh Government will produce periodic Welsh Health Circulars for NHS Wales outlining progress and highlighting specific actions necessary to eliminate hepatitis C by 2030 at the latest. Performance against these requirements (including targets within the NHS Delivery Framework) will be scrutinised and monitored through existing NHS performance management arrangements.

Whilst it is agreed that key national posts will be required beyond March 2021 if we are to successfully achieve elimination, any decision for funding beyond the period for which we have a settlement will be taken around the appropriate budget planning round.

**Financial Implications:** None. Delivering the local actions required to achieve elimination of hepatitis B and C as a public health threat will be absorbed from within existing programme budgets and NHS allocations.

**Recommendation 2.** The strategy must include a targeted awareness raising campaign to reach out to at risk communities and also provide for education and training for health professionals.

**Response: Accept in principle**

Targeted awareness raising already happens in Wales through a variety of channels. Welsh Government would need clear evidence that a national campaign is effective at reaching these hard to reach groups.

Fundamental to progress, is health board investment in effective and sustained outreach services to engage with individuals not currently in contact with traditional services. Hepatitis C patients are often hard to reach, which is why a dedicated resource is needed within health boards to assist with targeted case finding in the community.

Education and training for health professionals is already available – this will be reviewed and re-communicated as part of a wider package around liver disease.

**Financial Implications:** None. Delivering the local actions required to achieve elimination of hepatitis B and C as a public health threat will be absorbed from within existing programme budgets and NHS allocations.

**Recommendation 3.** The Welsh Government must write to Local Health Board Finance Directors and Chief Executives to emphasise that national treatment targets for hepatitis C must be considered as minimum targets, to be exceeded wherever possible, if the elimination target of 2030 is to be achieved in Wales.

**Response: Accept**

The Welsh Government will write to Health Board Finance Directors and Chief Executives to confirm the formal introduction of national testing and treatment targets for hepatitis C. It will be made clear that such targets must be considered as minimum targets, to be exceeded wherever possible.

**Financial Implications:** None. Delivering the local actions required to achieve elimination of hepatitis B and C as a public health threat will be absorbed from within existing programme budgets and NHS allocations.

**Recommendation 4.** We recommend that the Welsh Government provides additional investment to improve Hepatitis C testing in Welsh prisons.

**Response: Accept in principle**

While Welsh Government is aware that hepatitis C testing rates in prisons needs to be improved, it needs to be improved for a range of diseases. An inquiry is currently underway in relation to the provision of all health and social care services in prisons in Wales and the outcome of this will be taken into account in terms of action around improved testing in prisons. The number of people screened for BBVs in prison settings is regularly monitored – and Welsh Government has recently asked for assurance around the offer of BBV screening to all those accessing substance misuse services in prisons. Welsh Government has also allocated additional funding this year to improve health services in prisons.

**Financial Implications:** Unknown at present. Welsh Government will take into account the outcome of the wider inquiry into health and social care in the prison estate – and the extent to which costs to improve the health outcomes amongst prisoners can be met from existing programme budgets and NHS allocations. This will be addressed in discussions with health boards.