

CQI Collaborative – Alice Springs

"A Care Coordination Approach to Driving Horizontal and Vertical Change Across the System for Eliminating Crusted Scabies" 20/thy skin mo October 2018



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## One Disease (at a time...)



- Dr Sam Prince: medical doctor, humanitarian, entrepreneur and philanthropist.
- Prof. Frank Bowden, the EASCP, and The Healthy Skin Mob (One Disease at a Time).
- Our Steering Committee & Board: experts in infectious disease, dermatology, Indigenous health, and business who offer their input and guidance.
- Control of communicable disease through the application of public health principles.

## One Disease (at a time...)

# Pilot Project in East Arnhem Land. Key Learnings:

- Partnership, participation, integration.
- Health literacy two ways (patient, household, family, clinic, community).
- Community based champions
- Chronic Case Management approach.
- Adding value to the systems that support self management of Crusted Scabies.

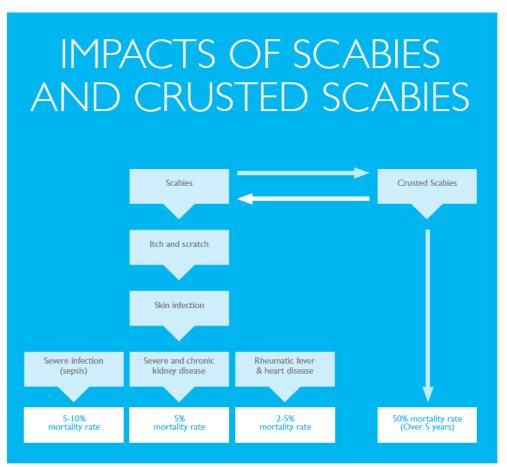
Med J Aust 2014; 200 (11): 644-648. "Crusted scabies in remote Australia, a new way forward: lessons and outcomes from the East Arnhem Scabies Control Program"



This message stick was exchanged between senior community members and One Disease.



## Why Crusted Scabies?



- Scabies has recently been upgraded by the WHO as a Category A Neglected Tropical Disease.
- Crusted Scabies is a Notifiable
   Disease, Notifiable Diseases Act
   2016 in the NT.
- People suffering from Crusted Scabies are core transmitters of scabies, spreading it to others in their household and community.
- Elimination of Crusted Scabies is the crucial first step to addressing scabies which is endemic across remote communities.

### What is Crusted Scabies?

- Crusted Scabies is a highly contagious and chronic form of scabies.
- A disfiguring and debilitating disease among individuals whose immune systems are unable to control mite replication.
- 100'000's > millions of mites
- Hyperkeratotic skin, creamy scaly plaques of skin.
- Undiagnosed and/or poorly managed Crusted Scabies can lead to recurrent infestations of scabies among close contacts.

## What is Crusted Scabies?











# One Disease aims to Eliminate Crusted Scabies from the NT by 2019, and across Australia by 2022.

Goal 1: To improve detection and diagnosis of Crusted Scabies.

Goal 2: To prevent reoccurrence of Crusted Scabies in clients who have been successfully treated, by embedding local systems, and ensuring treated clients live in a "Scabies Free Zone".



### Prevalence Audit of Clinical Files

- Clinical audit of files undertaken to determine the number of clients with a definite diagnosis of Crusted Scabies according to CARPA 6TH Edition and the CDC case definition for Notification.
- No of confirmed Crusted Scabies cases in the Top End (positive Skin Scrapings & IFD Confirmation): 84 (488)
- No of cases with another chronic disease: 79/84



## Prevalence Audit of Clinical Files

#### Findings...

- Misdiagnosis
- Timeliness of diagnosis
- Documentation of long term care
- Adherence to treatment schedules
- Scabies Free Zone

#### Learnings...

- Lots of infected sores, diagnosed as Crusted Scabies
- Education is required for effective detection, diagnosis, & management of Crusted Scabies
- Care coordination at community health level is required for long term management and preventing recurrence of Crusted Scabies infections.



# Improve detection and diagnosis of Crusted Scabies

- Misdiagnosis
  - Clinical Guidelines
  - RAHC eLearning module
  - In-services, seminars, conferences
- Timeliness of diagnosis
  - Videomicroscopy Pilot
  - Skin Scraping Procedure Video
- Documentation of long term care
  - Care Plan with recall reminders for skin checks in CIS



# Prevent reoccurrence of Crusted Scabies in clients who have been successfully treated

- Treatment Schedules
  - Development of bedside Care Pathway
  - Lorraine Brennan Centre
- Discharge to a Scabies Free Zone
  - Care Coordination
  - Notifiability (Contact Tracing &Treatment of whole of household)
  - Health Literacy
  - Health Promotion
  - Healthy Homes: Health Hardware
  - Recurrences in children

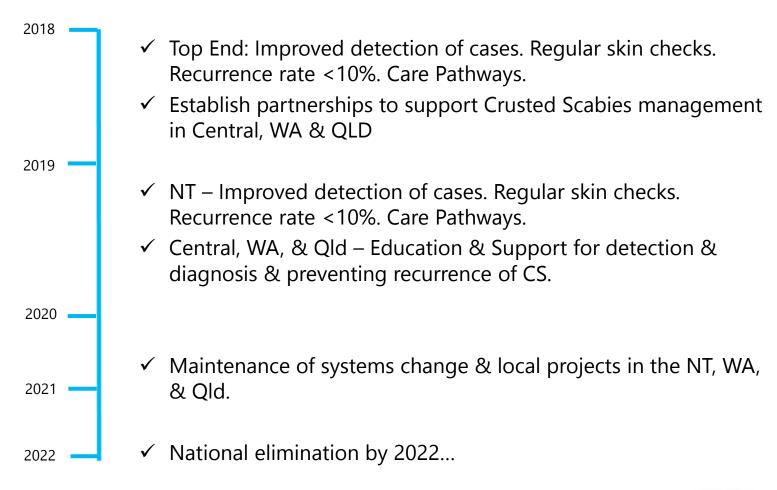


# Evaluating the One Disease Strategy

## Elimination

Criteria for Elimination Programs (from literature)	Evaluation of One Disease work in the Top End July 2018
Targeted Vertical Approach:  Additional to what control programs offer which are horizontal programs focused on strengthening primary care, improving surveillance and training personnel.	<ul> <li>Vertical:         <ul> <li>Program has well defined objectives with identified timeframe for elimination</li> <li>One single disease focus with a small population group</li> <li>Endorsement from Federal Minister for Indigenous Health Ken Wyatt</li> <li>COI results show that for every episode of CS prevented the health care system can expected to save \$31,209.20.</li> </ul> </li> <li>Horizontal:         <ul> <li>Coordination of services between specialists, hospitals and PHC</li> <li>Coordination of public health, environmental and community services and households to support scabies free zone</li> <li>Training, education, expert advice to staff</li> <li>Education and support to individuals and households</li> <li>Prevalence Audits of PHC records against case definition helps to establish accurate numbers</li> <li>Trends in recurrences are positive and treatment completion and follow-up is improving.</li> <li>Strengthening PHC systems to improve management &amp; lifelong follow-up in PHC (care pathways)</li> </ul> </li> <li>Key Challenge in the NT:         <ul> <li>Scabies free zone is difficult to sustain. Scabies endemic environments pose major risk for reinfection of treated CS patients.</li> </ul> </li> </ul>

## On track towards elimination



# Thank you!

### For more information visit

onedisease.org contact@onedisease.org

