

Acceptability of a new patient management tool to support primary care clinicians' delivery of best practice care for bacterial stis

Authors:

Rose SB¹, Garret SM¹ and Pullon SRH¹

1. Department of Primary Health Care and General Practice, University of Otago, Wellington, New Zealand

Background:

Bacterial sexually transmitted infection (STI) rates remain unacceptably high in many parts of New Zealand. Best practice sexual health guidelines including partner notification are not always systematically followed for those diagnosed in primary care practices. This study aimed to develop an easy-to-use electronic STI management tool designed to support primary care clinicians' delivery and documentation of best practice care for patients tested for, and diagnosed with chlamydia and gonorrhoea.

Methods:

The tool (a MedTech Advanced Form) was designed to sit within the clinic patient management system. It was developed in consultation with seven primary care clinicians, and included different tabs for use during the STI care pathway (testing, treatment/advice/partner notification and follow-up). The tool was trialed over three months by 19 clinicians in three Wellington primary care clinics – two Youth Health Services and one Student Health Service. Outcome measures: i) frequency of use, ii) completeness of fields related to best practice care and iii) clinician acceptance of the tool (assessed in focus groups).

Results:

The tool was used for approximately one in four patients tested during the trial period, with 'forgetting' the most common reason for non-use. Clinician views towards the tool were favourable, most indicated they would continue using it and would recommend it to colleagues. When used, documentation of best practice care was excellent. Fields to record reasons for testing, discussion of sexual history, provision of treatment and advice were used for the majority of patients for whom the form was completed.

Conclusion:

Inclusion of this STI management tool in the patient management system improved primary care clinicians' delivery and documentation of best practice sexual health care at a practice level. Wider utilisation of this tool (with strategies implemented to promote its use by default) would facilitate more comprehensive best practice management of bacterial STIs.

Disclosure of Interest Statement:

This project was funded by a Lottery Health Research grant (LHR-2019-99246), and a grant-in-aid from ISTAR Ltd. The funders played no role in the design, implementation or interpretation of the research.