



Walk in sexual health clinic - Fulfilling a need in rural WA



How well are we doing?

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Background

- Chlamydia Trachomatis and Neisseria Gonorrhoea are the most common notifiable sexually transmitted infections (STI)
- Classically found in the 15-29 year age group
- In consultation with key stakeholders it was identified that barriers to young people accessing STI screening and treatment included the absence of a free flexible service
- Since 2010 we have had funding for a sexual health nurse focused on health promotion and timely screening and treatment.
- So how well were we doing in responding to this need?

The Model

- Nurse led service
- Local medical back up from RMO and PHP
- Expert advice from Lewis Marshall by email – prompt
- Text messaging used to make appointments and give results



Methods

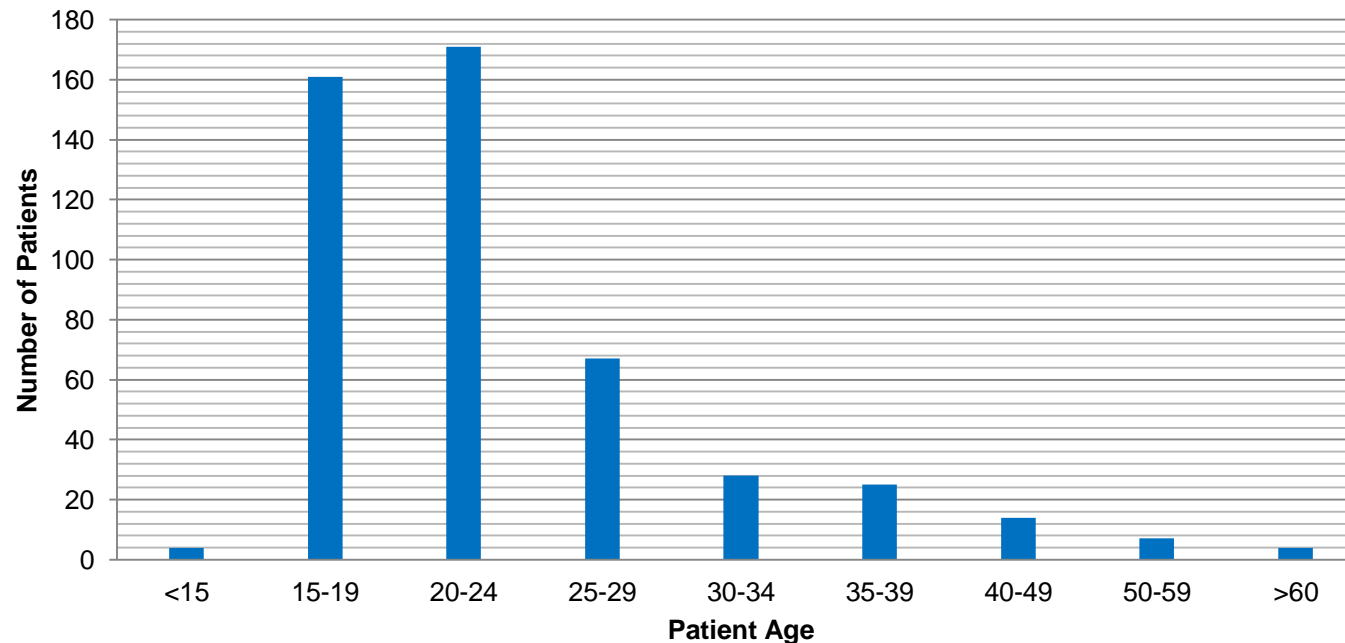
Data were collected regarding:

- demographic profile of the clients
- proportion with an STI
- proportion of those with an STI and symptomatic
- time from screening to obtaining results
- time from results to receiving treatment
- number of presentations in past year
- number of positive tests in the past 5 years for patients who were positive

Demographics

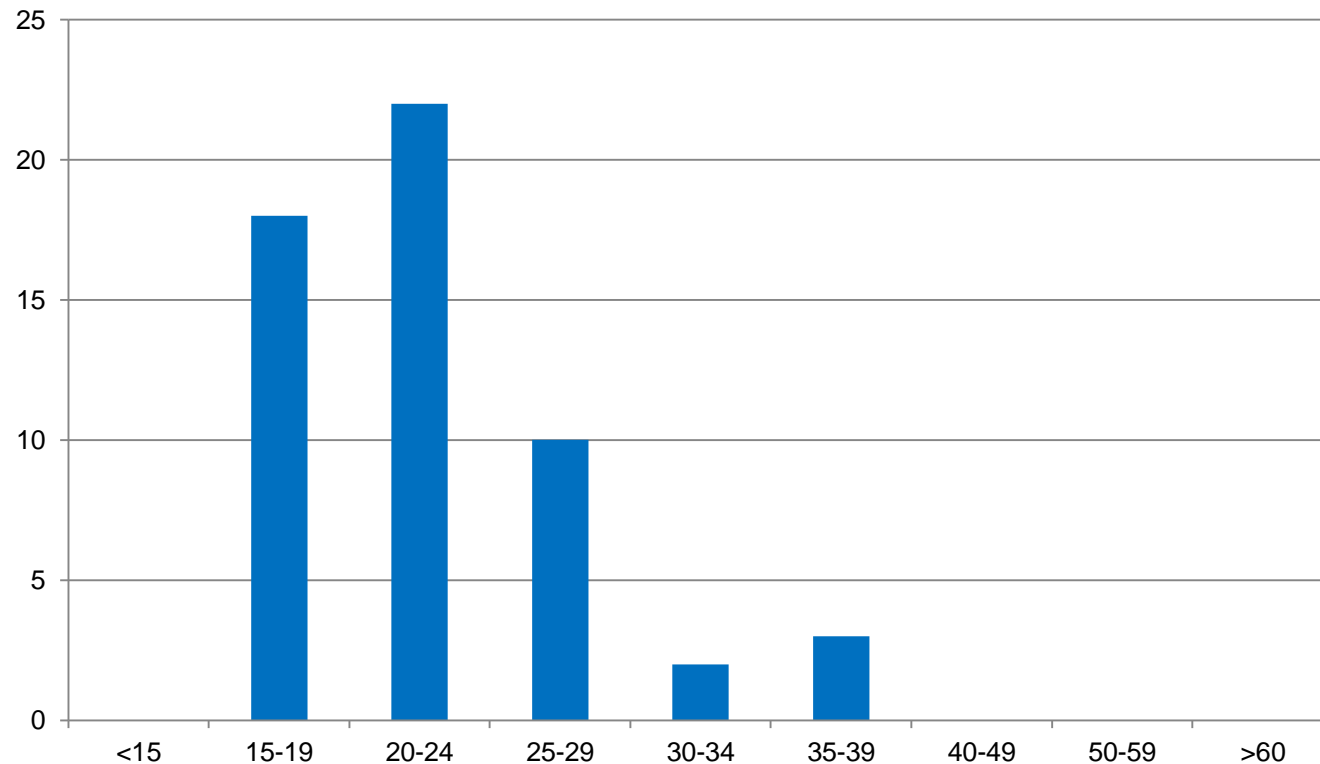
518 attendances to our service

- 82% were aged between 15-29 years old
- 63% were female and 18% were Aboriginal



Positive tests

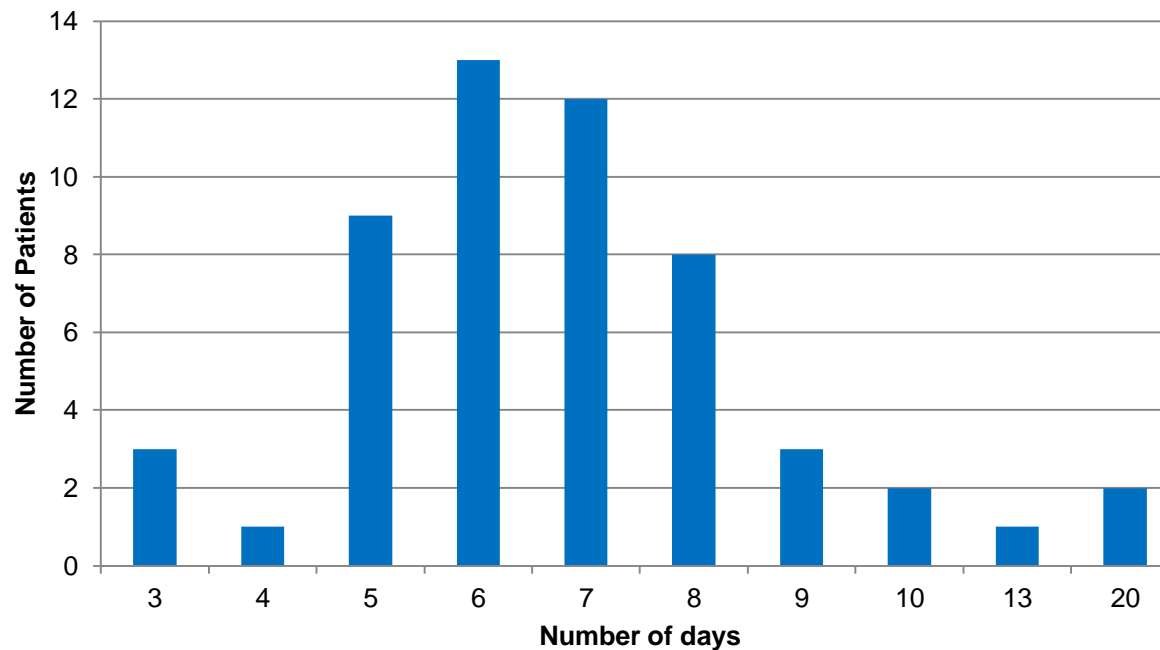
- 73% of those positive for an STI were 15-24yrs
- 67% were asymptomatic



Time to results

- 63% received results within 5-7 days
- 70% of the clients received their results in less than 1 week

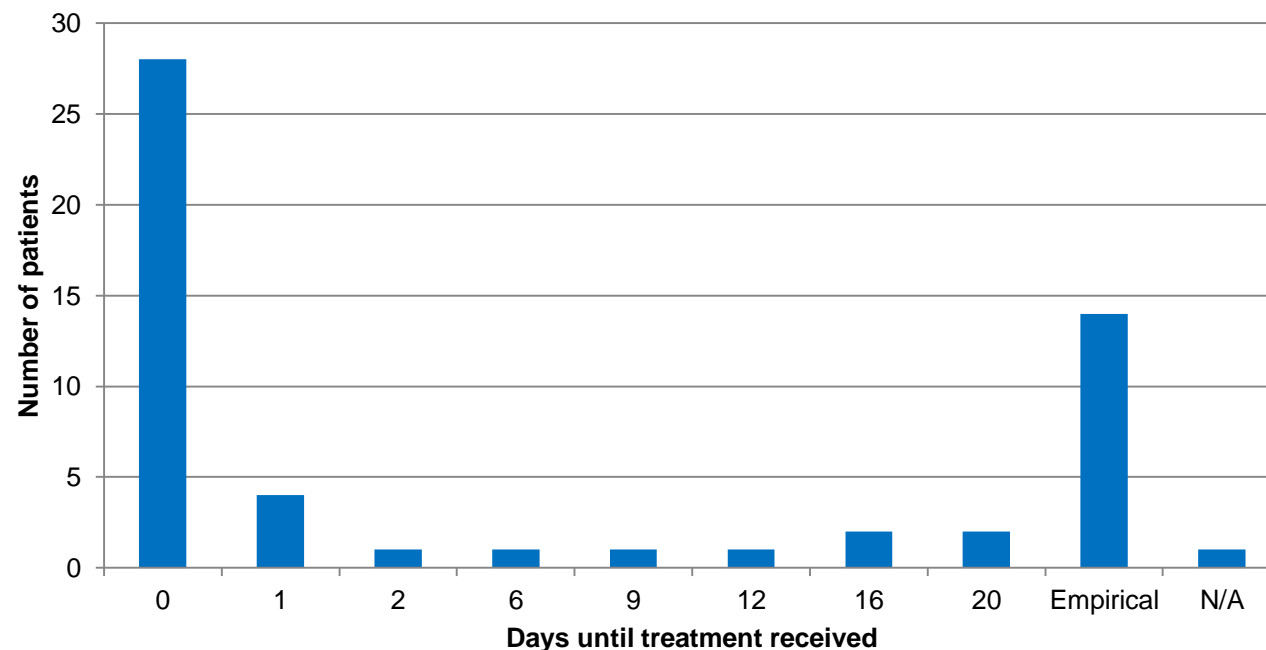
Days to patients notified of results



Time to treatment

- 23% of clients were treated empirically on day of presentation
- Majority (51%) were treated on the day of receiving results
- Only 1 patient was lost to follow up (N/A)

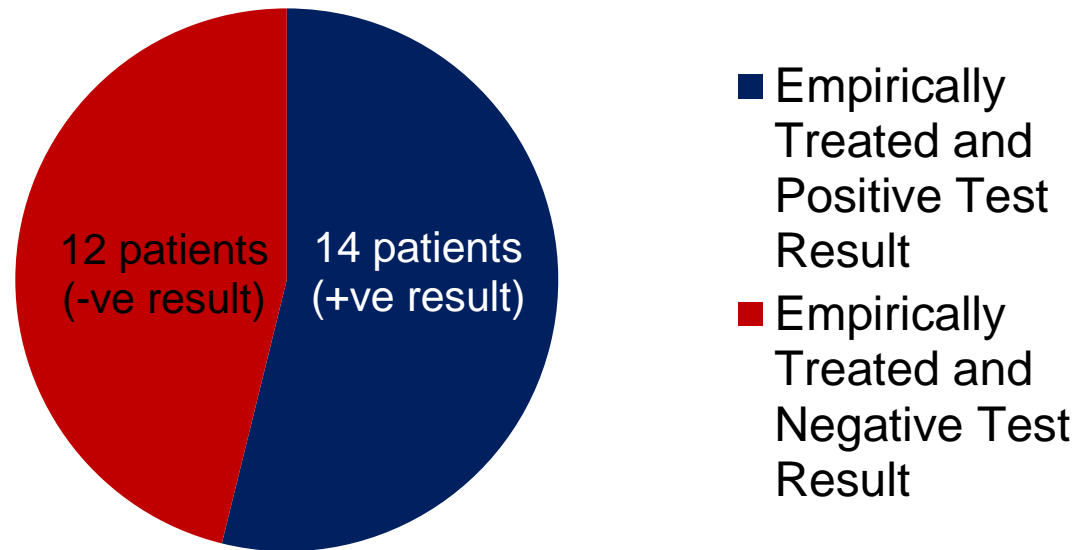
Days from results received to treatment



Empirical treatment

- 46% of patients treated empirically returned a negative test

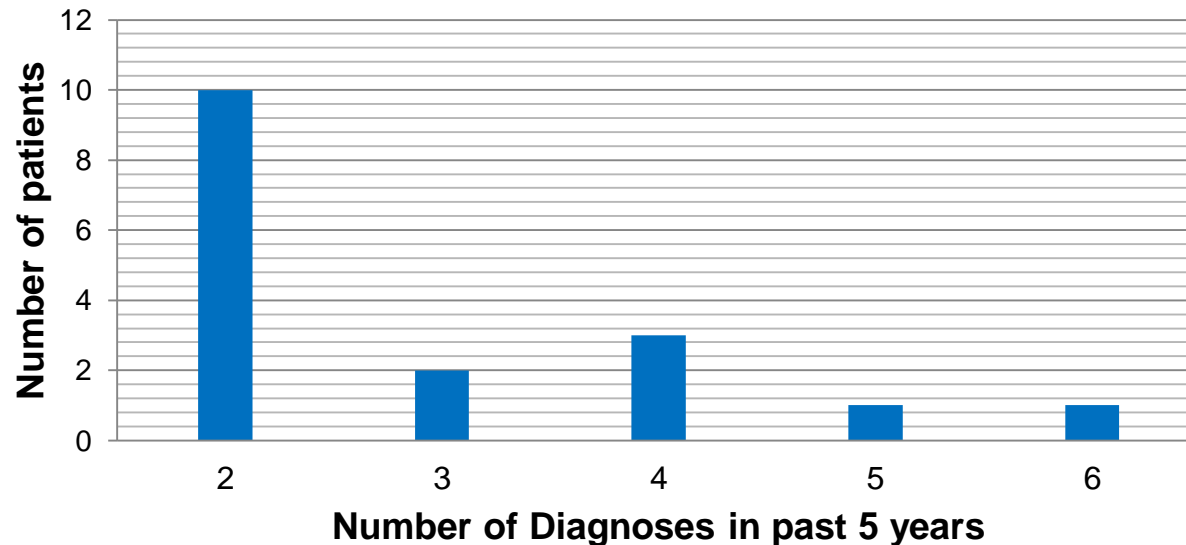
Patients Treated for STI



Empirical treatment provided; symptomatic, contact, on request

Frequent Flyers

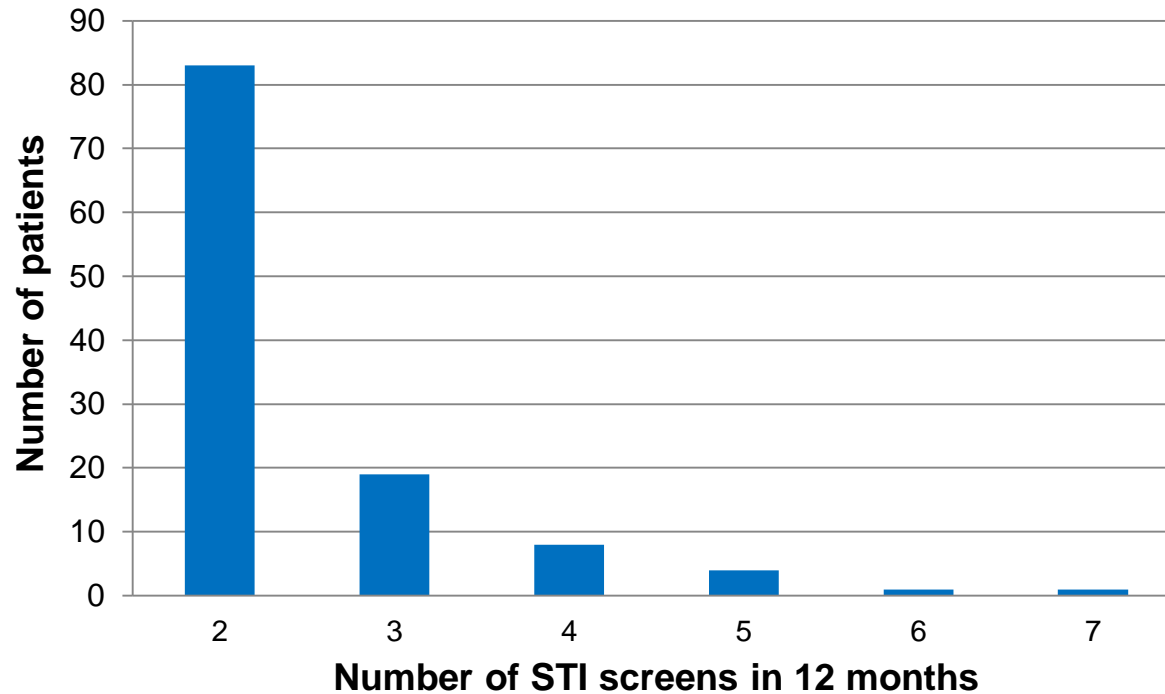
- 29.5% of patients who were positive had been positive for an STI in the previous five years
- 83% of these were within the ages of 15-29, and 39% had been positive on more than 2 occasions
- 61% of these were female and 39% were Aboriginal





Frequent Flyers

- 31% of patients screened at the clinic in 2017 had been screened 2 times or more in the 12 months prior to their presentation





Conclusion

- We are providing a service to the most at risk group.
- Asymptomatic presentation is common.
- The low proportion of returning patients within 6 months indicates a concern to be addressed
- The recommendation to re-screen +ve clients makes sense.
- A review of empirical treatment is required.

So What?

- Evaluations such as these are critical to directing service delivery.
- Monthly reporting regarding time to treat and empirical treatment will commence.
- Primary health care providers need to be more opportunistic in screening 15-29 year olds presenting to their service.
- Until the pool of positive individuals in the community is reduced we will continue to see high rates of STIs in our community.