Urgent results management by a dedicated nurse rather than the ordering clinician saves money and improves client care: A cost-effectiveness and time efficiency analysis.

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Background/Purpose:

Efficient and timely management of test results for sexually transmitted infections (STIs) is an essential component of STI control. We conducted an evaluation to estimate the cost and time efficiencies of utilising a specialist results nurse (RN) to manage all urgent results on behalf of the ordering clinician at Sydney Sexual Health Centre (SSHC).

Approach:

We analysed time stamp for all urgent results managed by the RN over 12 months in 2019 to determine average time to client notification and treatment. As a control group, a range of clinicians were tasked with managing five of their own urgent results and a time efficiency analysis undertaken. Clinic activities were estimated based on rostering and staff interviews. Activity based costing was applied to estimate the annual operating costs for both models.

Outcomes/Impact:

9624 urgent results were managed by the RN, which included all positive STI results and other pathology requiring urgent action according to SSHC protocol. The most common results were Chlamydia (3058, 32%), Gonorrhoea (2378, 25%) and Syphilis (1739, 18%). Seventy-four percent of results were provided on the day they became available, with one day median time to treatment. In the Ordering Clinician (OC) model, 41% of results were provided on the same day with four days median time to treatment. The RN model demonstrated significant time efficiencies due to the centralisation of duties and provided an annual health system savings of AUD 121,524. These savings were driven by the cost effective nurse-led approach which also decreased the weekly workload of other clinicians by 20.1 nurse hours, 9.9 junior medical officer hours and 3.3 senior medical officer hours allowing for more time seeing patients.

Innovation and Significance:

This study demonstrates the success of a nurse-led results model in terms of improved time to client notification and treatment, and health system savings. In an era where optimising healthcare costs and improving outcomes for healthcare consumers is considered essential, these findings contribute to literature showcasing the effectiveness of nurse-led models

Disclosures of interest:

None