

BUILDING SERVICE LINKAGES FOR TREATMENT AND FOLLOW-UP IN WEB-BASED STI TESTING SERVICES

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Background:

Web-based sexually transmitted infections (STI) testing services are becoming increasingly available. While many aspects of testing can be automated, treatment for those who test positive often requires in-person visits to health providers. However, treatment pathways from web-based testing services are often not well-coordinated, contributing to treatment delays and access gaps. This study investigated clinician perspectives on building service linkages with a new, web-based STI testing service in Victoria, Australia.

Methods:

We interviewed 16 clinicians from regional and outer metropolitan areas who are part of government-funded, primary care programs to strengthen sexual health services in Victoria. Interviews inquired about: clinician attitudes, considerations for managing referrals, compatibility with clinic systems, and broader policy/healthcare system barriers and facilitators.

Results:

Clinicians were enthusiastic, perceived web-based services as complementary (not competition), and believed that local treatment pathways were important for access and patient choice. They felt that the administrative aspects of handling referrals (e.g. booking appointments, patient documentation) from a web-based service could be managed unproblematically. To ensure they had full diagnostic information to inform treatment, clinicians recommended that referral letters generated by the web-based service include a full list of all tests ordered, their dates, and complete results. Tensions were raised regarding the utility and appropriateness of including treatment guidelines, results from an automated symptom checker, and pre-prepared prescriptions in referral letters. Respondents reported that most clinics did not stock injectable antibiotics, raising concerns by clinicians about potential treatment delays and privacy challenges related to patient-led procurement at pharmacies.

Conclusion:

Our study suggests that clinicians are receptive to local treatment pathways being designed as part of web-based STI testing services. Designing these service linkages could improve access and close-to-home treatment options, particularly in non-metropolitan areas. Capacity-building efforts and additional resourcing of local partner clinics may be needed to support decentralized, patient-centred treatment pathways.

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