

Getting your chlamydia care online: Qualitative study among users of the Chlamydia Online Clinical Care Pathway (Chlamydia-OCCP), in a proof of concept study



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Background: Online clinical care was offered to people receiving positive chlamydia results, following testing in Genitourinary Medicine (GUM) clinics or through six National Chlamydia Screening Programme areas' online postal self-sampling service ('Checkurself'), in a proof-of-concept study, in London, UK.

Objective: describe views and experiences of people who chose to seek treatment online, following a positive chlamydia result. We focus on elements of the care pathway shown by shaded boxes in the figure below.

Methods: 40 in-depth telephone interviews, following completion of care. Purposive sampling by gender, age, study arm, care pathway use.

Sample description (n=40)

- 21 females, 19 males; age 18-35; heterosexual; ethnically-diverse
- 13 with previous STI diagnosis; 27 previous STI testing
- 30 had treatment authorised by Chlamydia-OCCP & collected treatment from pharmacy;
- 7 reported symptoms/allergy online & treated in clinic;
- 3 dropped off Chlamydia-OCCP through choice & treated in clinic

FINDINGS

COMPLETING THE ONLINE AUTOMATED CLINICAL CONSULTATION

Some completed the online consultation straight after receiving their results

'I had my phone there, I could do it really quickly, I **didn't have to** kind of **leave my desk**' *Woman, 25-29*

'...the bus is pretty quiet ... the writing's pretty small on the phone, I can't imagine people would like be bothered about trying to read what I was reading...' *Man, 30-35*

Others completed it a short while later, at home

'I **didn't have internet access** ... I had to wait 'til the next day' *Woman, 20-24*

'...just, you never know (laughs) **who could look over your shoulder**' *Man, 20-24*

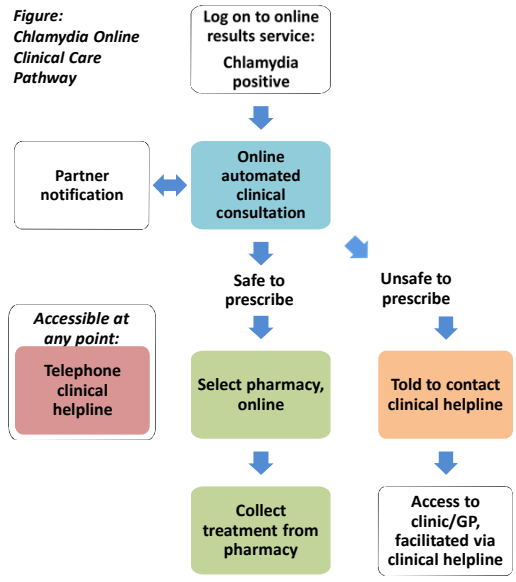
Described as straightforward and quick to do

'...really easy, and really quick, like it took me five minutes...' *Woman, 25-29*

Data security: rarely mentioned; few, minor reservations were expressed

[NB: All interviewees had chosen online care]

'...on the internet, it's just that **fear** of maybe **someone else is going to get the information**... Was that a concern for you? No, no, er, no, actually cos I do a lot of things on the internet, so I **actually trust the internet**. A lot.' *Man, 20-24*



FINDINGS, continued

BEING TOLD TO ATTEND CLINIC, AFTER ALL

If certain symptoms, allergies, etc. were reported, the patient could not proceed online.

They were told (online) to call the helpline to arrange access to clinic/GP, and followed up by phone-call.

Participants described varied reactions

'...that was a bit **annoying**. And it made me feel like I shouldn't have answered that question the way I did.' *Man, 20-24*

'...I didn't know if that meant I had something more, something more serious ... so it had me **anxious** up until the appointment.' *Woman, 20-24*

'...obviously then they test you for everything [at clinic] ... it was then **peace of mind** to know that you don't have anything else.' *Woman, 20-24*

Helpline contact reassured

'...it's always **nice to have someone** to kind of **look after you** and make sure that everything is fine.' *Woman, 25-29*

VIEWES ABOUT CHLAMYDIA-OCCP AS A WHOLE

Perceived as easier, more convenient and less embarrassing than attending clinic/GP for treatment

'I have to either book an appointment [at clinic], which is also not gonna be easy cos of my working hours, or get there really, really early ... when I saw it, an online option to do it, I thought this is much - probably gonna be **much easier**' *Man, 25-29, clinic user*

'...definitely a much more, sort of, **less embarrassing** way to go about it, without, you know, having to worry about seeing anyone you know' *Woman 20-24, no previous clinic use*

Diverse views on avoiding a face-to-face consultation

'...no one there to give you their opinion straight away, or even kind of make a gesture that would suggest their opinion, it's just **easier** ... You can be **more honest** than if you go to a clinic' *Man, 25-29, received treatment in pharmacy*

'I, I felt **more relieved**, like, **talking to someone** ... even though I knew, you know, I had all the information before ... I think I was looking for a bit of comfort, I'd say' *Woman, 30-35 - dropped off online care pathway & treated in clinic*

Sources of trust in Chlamydia-OCCP

Link with known, trusted services: 'I knew that I did order the [home-sampling] kit and I knew that the kit was from the NHS*. I, I just trusted everything that came with it, so I trusted the text, the link, and my results. I also trusted the treatment.' *Woman, 20-24 [*NHS: UK National Health Service]*

Information provided: 'I couldn't say I was fully confident, but quickly I saw that er, that what I had was really a common problem so, so it was fine. It was, well it was well-known, the treatments are well-known, so it was totally okay to just get the treatment online' *Man, 25-29*

OBTAINING TREATMENT FROM COMMUNITY PHARMACY

Acceptable in principle, and can work well

'I found a pharmacy which is about a mile or so from my house, which could have the treatment delivered to it ... I thought, "Well, **this couldn't really be much easier**, could it?"' *Man, 20-24*

But some issues in practice

Pharmacy staff's lack of knowledge of procedure: 'They didn't understand what I was talking about. They had to wait for the manager to come, I think two days after?' *Man, age unstated*
Lack of privacy appropriate to STI care: '...three or four people sat about a metre behind me ... I don't think [pharmacy staff] clicked that it was something I didn't really want to be shouting about. [They said] "No, I don't get - I don't know what you're on about!" Erm, just "shh", you know...' *Woman, 20-24*

Reasons for delays in attending pharmacy (also barriers to prompt clinic access)

Busy work schedules and travel: 'I was [working] a bit far from London and I wouldn't have been able to see a professional and order the treatment before the next week' *Man, 25-29*
Caring: 'looking after my [ill] mum, so I didn't get to the chemist [until] just over a week after' *Woman, 25-29*

TELEPHONE CLINICAL HELPLINE

Helpful and reassuring for some

'I probably knew what to do, but it's just because I was a bit **overwhelmed** about everything. I thought **I need to speak to someone** (laugh) um, to clarify.' *Woman, 30-35*

Non-users also valued it

'... it was **so easy**, I **didn't have to call the service**, I didn't have to make the call. But I think [the helpline] **should be available** for some people that would need it.' *Man, 25-29*

CONCLUSIONS

- Participants expressed satisfaction with using the online consultation and helpline to obtain treatment discreetly and conveniently.
- The helpline was perceived as a source of reassurance, information and support.
- Despite extensive training and monitoring of study pharmacies, logistical and privacy issues in obtaining treatment from these settings negatively impacted on some patients. However, accessing treatment this way was perceived as acceptable in principle, and as quicker and more convenient than attending clinic.
- Through further evaluation, the pharmacy process could be optimised, further improving time-to-treatment and satisfaction.