National Chlamydia Screening Programme (NCSP)
Chlamydia Care Pathway

The Chlamydia Care Pathway provides commissioners and providers with a supported and systematic approach to evaluating local chlamydia activities with the aim of improving outcomes for users and services.

What is the Chlamydia Care Pathway?

The Chlamydia Care Pathway describes the individual steps which, taken together, represent comprehensive case management for an episode of chlamydia testing, diagnosis and treatment as recommended by the NCSP. The Chlamydia Care Pathway will allow local areas to explore and review local chlamydia activities and to create and instigate data driven action plans to improve service provision and outcomes.

Fig 1: The Chlamydia Care Pathway

To support the application of the Chlamydia Care Pathway the NCSP team in Public Health England (PHE) have developed a Chlamydia Care Pathway Tool. This tool presents the relevant data for each component of the Chlamydia Care Pathway and will be used as the basis for discussions with local areas. Applying the pathway will help users to identify the areas of programme delivery where implementing change may lead to improved outcomes for all.
Why and how has it been created?

The Chlamydia Care Pathway was created in response to requests from commissioners and providers around England asking the NCSP team for help with improving the detection rate indicator. A Theory of Change approach was used to define the necessary steps involved in delivering comprehensive chlamydia case management. For each step specific outcomes and indicators have been defined in order to help highlight steps where more attention may be required. This will help guide local action planning and allow those using the care pathway to benchmark and measure the impact of all changes made.

What is being offered?

The NCSP team with local PHE Centre teams are offering facilitated workshops or one to one meetings between members of the NCSP team, commissioners and providers. At these sessions, the Chlamydia Care Pathway approach to evaluating local chlamydia control activities will be applied to your local area.

Who should attend?

The workshops are designed for local authority sexual health commissioners and the main providers to attend together with, wherever possible, their local data managers. These day long workshops will take place across the country over the course of the next six months. Prior to the workshop, the NCSP team will prepare individualised Chlamydia Care Pathways for each area attending the workshop. This will be done using CTAD data and data from national audits. Where data is missing, the attending teams will be asked to collect the necessary data using existing audit tools with support from the NCSP team at PHE. To find out more about this process please contact Erna.Buitendam@phe.gov.uk. The local data will need to be submitted to the NCSP team prior to the workshop.

Care Pathway Programme:

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.30-11.00</td>
<td>Welcome</td>
<td>• Overview of care pathway and the workshop</td>
</tr>
<tr>
<td>11.00-11.30</td>
<td>Introductions</td>
<td>• Delegates to introduce teams, outline delivery model, challenges and desires for programme/ the day</td>
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<tr>
<td>11.30-12.30</td>
<td>Test Uptake</td>
<td>• Introduction to components 1 and 2</td>
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<tr>
<td></td>
<td></td>
<td>• Team work to look over local data</td>
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<td></td>
<td></td>
<td>• Teams feedback to others</td>
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<tr>
<td></td>
<td></td>
<td>• Summing up Test Uptake</td>
</tr>
<tr>
<td>12.30-13.15</td>
<td>Lunch</td>
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</tbody>
</table>
13.15 – 14.00
45 minutes
Detect Infections
- Introduction to component 3
- Team work to look over local data
- Teams feedback to others
- Summing up Detect infections
As above

14.00 – 15.00
1 hour
Treatment
- Introduction to components 4 and 5
- Team work to look over local data
- Teams feedback to others
- Summing up Treatment
As above

15.00 – 15.15
Coffee

15.15 – 16.15
1 hour
Partner Management
- Introduction to components 6 and 7
- Team work to look over local data
- Teams feedback to others
- Summing up Partner Management
As above

16.15 – 16.30
15 minutes
Final summing up session and feedback

16.30
End

What are the main benefits?

Effective application of the chlamydia care pathway:

- provides a concise review of the effectiveness of local chlamydia activities
- clearly identifies where improvements can be achieved informing decision making on how to make best use of finite resources
- supports the wider sexual and reproductive health system: this is a supportive process both for commissioners and providers which we hope will support partnership working locally
- is a standardised approach that can be used in any sexual health or primary care setting
- ensures participants receive intensive support from the NCSP team in preparing for the workshop, planning improvements, implementation of action plans, and evaluation

What support will be provided from the NCSP team?

The NCSP team will facilitate the use of the Chlamydia Care Pathway by:

- demonstrating the use of the pathway with real local data for commissioner-provider teams
- regular meetings for commissioners and providers in one to one meetings with NCSP facilitators to explore local care pathways and support and evaluate action planning
• creating individualised care pathway reports for local teams ahead of workshops and one to one meetings. The reports will contain the relevant data and highlight potential areas to initially focus on. These will form the basis for discussions on how to improve outcomes and for local action plans that will be further explored at workshops and meetings

• the NCSP team will support the creation of local action plans based on the application of the pathway and insights gained from other workshops around the country

• where data for the care pathway components is not recorded in the CTAD data, we will support local areas to use existing audit tools to collect information prior to workshops and one to one meetings

• continued support and follow up to help trouble shoot problems with implementing action plans and monitor key outcomes post implementation

How will the Chlamydia Care Pathway be evaluated?
An evaluation framework has been created for the Chlamydia Care Pathway. As the main aim of the Chlamydia Care Pathway is to help support local areas, the key indicators in the evaluation include:

• identifying keys areas for change and developing a clear local action plan based on these

• successful implementation of the action plans to improve local outcomes

In order to help evaluate the Chlamydia Care Pathway, the local PHE Sexual Health Facilitator will be in regular contact with local teams after the workshops and one to one meetings in order to gather relevant information. Lessons learnt from the evaluation of the Care Pathway will help us to make relevant changes and improve the pathway and its application.

How can I attend one of these events?

If you would like to attend one of these workshops or arrange a one to one session please contact your local PHE Sexual Health Facilitator:

East of England: Wendy.Elliott@phe.gov.uk
East Midlands: Deborah.Shaw@phe.gov.uk
London: Meroe.Bleasdille@phe.gov.uk
North East: Sharron.Ainslie@phe.gov.uk
North West: Dianne.Draper@phe.gov.uk
South East: Glyn.Pritchard@phe.gov.uk
South West: Norah.O'Brien@phe.gov.uk
West Midlands: Simon.Walker@phe.gov.uk
Yorkshire and Humber: Sharron.Ainslie@phe.gov.uk

Examples of feedback from Pilots.

The NCSP team have been running pilots of the workshops and one to one meetings over the last few months.  Below is some of the feedback from the areas who took part
“I was really impressed with the care pathway methodology – Was actually really useful in taking an approach that didn’t primarily focus on DRI/Number and lends itself to a number of QI type projects to continue progression locally. I’m convinced we have scope to improve on core areas, so this is really helpful. We have some work to do locally around drilling down into our available lab produced data. We have some further work to do in terms of identifying positivity by sexual orientation and ethnicity (alongside age and gender) which hopefully should assist in more meaningful targeting.”

(Provider Lead Health Advisor)

“Many thanks... It was a reported to me universally how useful and interesting a meeting it was. We really appreciate your support; the meeting really grabbed everyone's interest and has generated some very practical solutions from staff.”

(Provider Lead Clinician)

“Your presentation was excellent and has really helped to focus our action plan. Already there is a renewed energy amongst staff with several ideas on how we can step up our screening to help us work towards the diagnostic target.”

(Provider Health Promotion Specialist)
“I really appreciated the opportunity to sit down with our provider and look at a range of options presented by an independent body. I think it gave me a different understanding of how the programme has had an impact in (our local authority) and some of the things we can try going forward. I was particularly interested to see the impact of the drop off in testing for GPs and would like to explore this further at the (our local authority) district Sexual Health Network in future, perhaps dedicating one meeting to this agenda and looking at the cascade presentation as a whole group. I know there were a couple of ideas that (our service provider) were going to try and put in place, patient call back and influencing screening in Primary Care but I still need to … to look at this in detail.”

(Sexual Health Commissioner)

“Was very useful from my point of view, chlamydia has always been a tricky one to monitor. Any offer of support, is always welcomed. As with another similar approach piece of work we are involved with (examining option of an integrated tariff for sexual health), it’s useful to clearly define what is within the gift of the provider and commissioner to do &/or influence, then bring these together, since we’re really 2 sides of the same coin focussed on the same national targets.”

(Sexual Health Commissioner)

“I found the process very useful — having just taken on the new contract which included delivery of the chlamydia screening programme, we are still learning and developing how to run the screening programme in the most cost effective and efficient way. I found the session useful — you listened to where we were up to and gave really good suggestions to help us drive forward with improving the uptake as we are aware that the transition has been slow. I think services which are similar to ours and recently taken on the responsibility of the screening programme, without any staff coming from the previous provider, would welcome having some time with yourself. I also think the regional meetings are useful for that too. I find it useful to use an action plan approach and that is what I expected to need to do after the session. I don’t think there are any other changes needed as I am sure you will adapt as you need to depending on the providers situation. I saw this as a good supportive measure.”

(Provider Service Manager)