

Follow-up National Syphilis Audit 2017

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BASHH Syphilis Audit – catchup

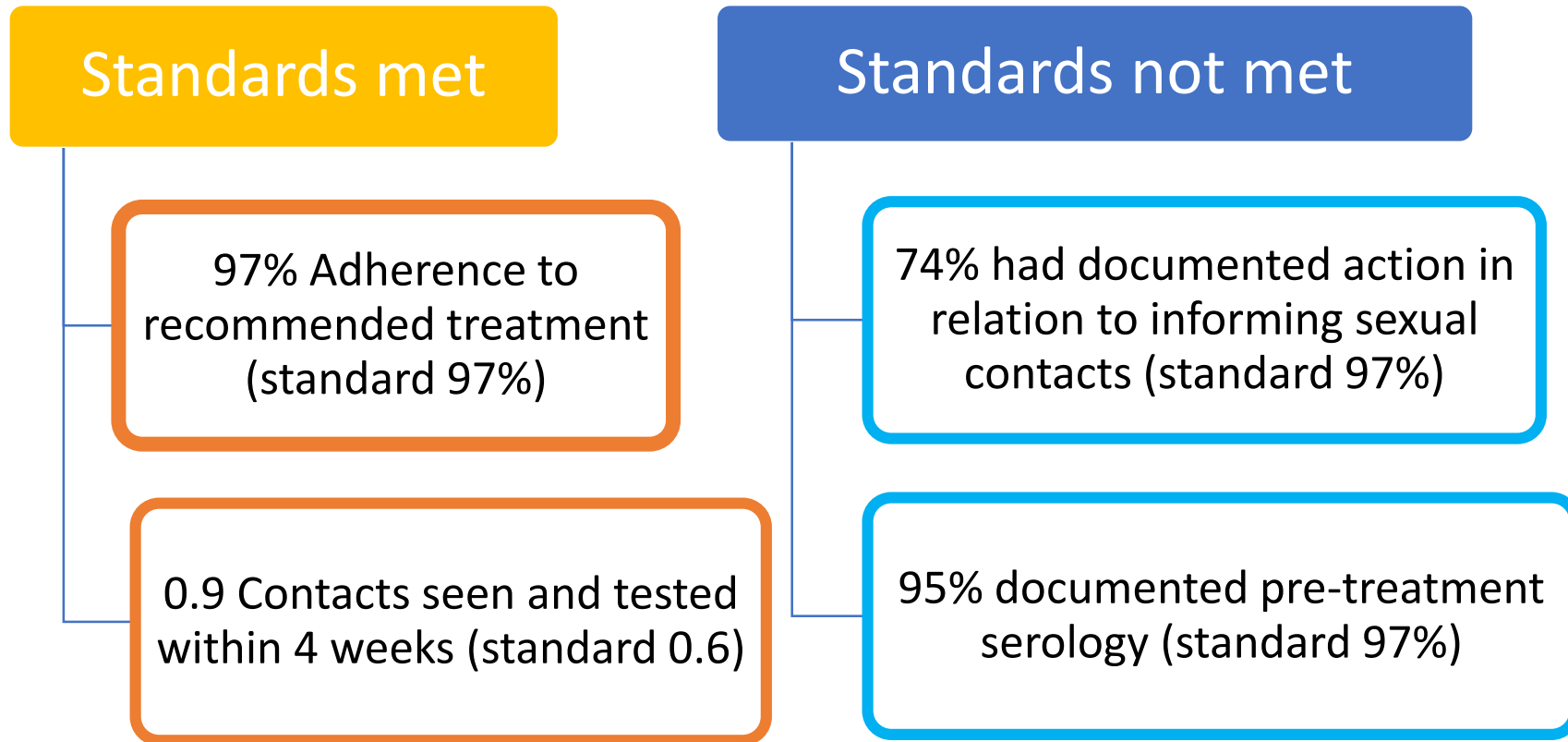
Policy

- Availability of diagnostics
- Clinic policy on repeat HIV testing
- Clinic policy on followup

Practice

- Treatment
- Policy – syphilis in pregnancy, document unlicensed medication use, consent to inform GP
- Written patient information, availability of PN

BASHH Syphilis Audit 2017-Outcomes



Clinics with formal policy on HIV testing after a syphilis diagnosis were twice likely to provide HIV test after the window period

Follow-up

Email survey sent via all Regional audit leads between January and March 2018

43/161 clinics responded (27% response rate)

Follow-up survey



PRESENTATION OF AUDIT FINDINGS IN CLINICS



AWARENESS OF PN OUTCOMES FALLING SHORT OF STANDARDS



WHETHER THIS WAS DISCUSSED WITHIN SERVICE TO MAKE CHANGES



HAS PN PERFORMANCE BEEN AFFECTED BY A DECLINE IN HEALTH ADVISOR NUMBERS



ANY CHANGES MADE TO ENSURE AN AGREED CONTACT ACTION OR DECISION NOT TO CONTACT IS DOCUMENTED



ANY CHANGES MADE TO CLINIC POLICIES/PROCEDURES REGARDING REPEAT HIV TESTING FOR HIV NEGATIVE INDIVIDUALS



Survey Findings

Presentation

- 35/43 presented their findings to staff
- 5 scheduled to present, 3 communicated via email

Awareness of PN outcomes

- 35/43 aware of falling PN standards
- 5 clinics mentioned they met standards

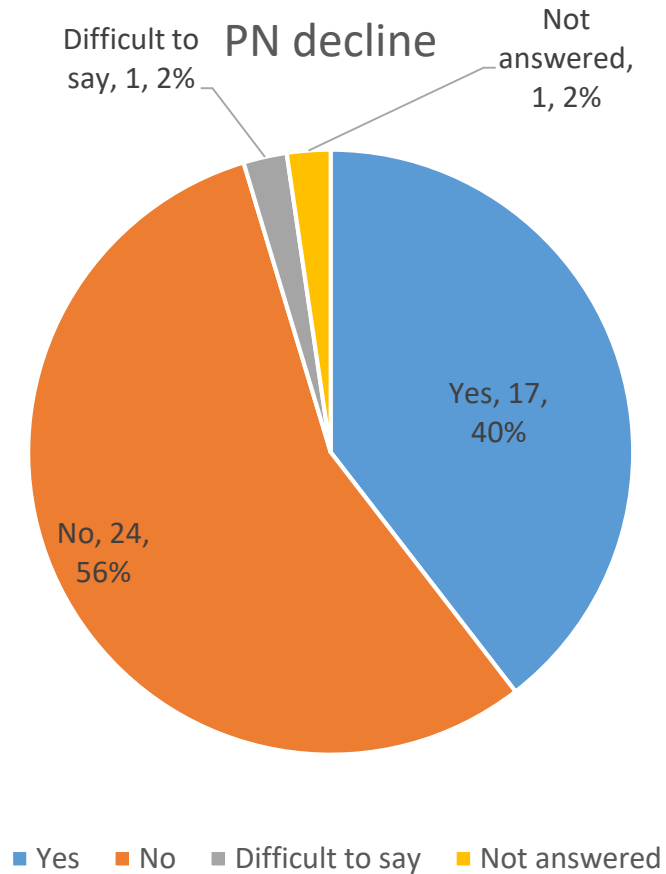
Making changes

- 33/43 discussed to make changes
- 3 clinics planning to discuss

Changes made by clinics



PN performance affected by decline in HA numbers?



No dedicated HA

Falling of HA numbers

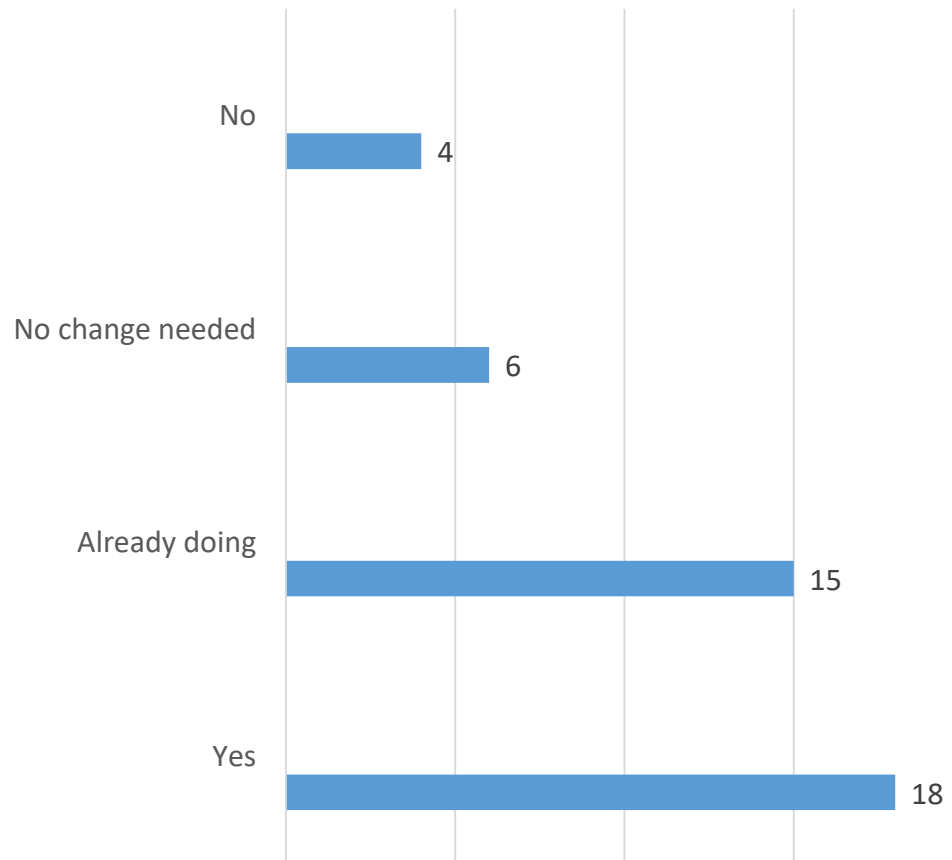
HA sessions reduced

HA do results management

HA admin time reduced

HA doing more clinical work and less PN work

Making changes in PN documentation



- Modification of clinic templates
- Ensure all patients see HA
- New PN proforma
- Using 'Task Viewer' in electronic records
- Introduction of PN proforma and robust DNA pathway
- Retraining all staff
- Local reaudit



Repeat testing in HIV

- 35/43 made changes
- Changes:
- Recall procedures
- Text reminders for patients with early STS to repeat HIV/RPR at 1 month after treatment
- Guideline for recalling at risk/defaulted patients
- Staff education
- Changes in follow-up forms

Challenges for effective PN



HA roles are amalgamated into clinical roles



'Smart world' issues – online sites, multiple partners- whereabouts not known



Chemsex, sex parties



Highlight/prioritise- importance/HA role on PN with commissioners, service specifications

Acknowledgements

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National Audit Group

thank you

