



Nottingham University Hospitals

NHS Trust

# From Frying pan to Fire?

Have cuts in sexual health services affected A&E?

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# Background

- Pre 2015:
  - Walk in Service in parallel with appointment system
    - 20 -25,000 'walk-in' patients per annum
- October 2015
  - Discontinued walk-in appointments for adults over the age of 18

# Background

- Post 2015
  - Nurse-delivered triage to identify those needing emergency appointments (PEPSE, Sexual assault, HSV, emergency contraception and under 18s)
  - Otherwise ‘walk-ins’ discouraged.
  - Patient are asked to make an appointment or can ring in for ‘on the day’ appointments.

# Questions:

- 1) Did A+E see an increase in attendances following the change in sexual health services?
- 1) Are patients who attend A&E for sexual health problems managed appropriately?

# Methods

- Retrospective review of all A&E attendees aged >14 years coded with Sexual health related code
  - November 2014-2015
  - November 2017-2018
- Single sexual health clinician reviewed A&E EPR and removed:
  - Incorrectly coded patients
  - Patients attending with genuine 'accident/emergency' (e.g. testicular torsion, trauma)
  - Patients who required admission

# Methods

- A&E EPR reviewed for 3 key factors:
  - 1) Was a sexual history taken?
  - 2) Was STI screening of any sort undertaken?
  - 3) Was the patient referred formally or informally to Sexual health?
- Sexual Health EPR reviewed
  - 1) Did they attend sexual health for that same episode?

# Common codes in A+E

- Vaginal infection
- Sexually transmitted disease
- PEPSE
- Sexual assault
- Genital warts
- Genital herpes
- Thrush
- Epididymorchitis
- Chlamydia
- Gonorrhea

# Question:

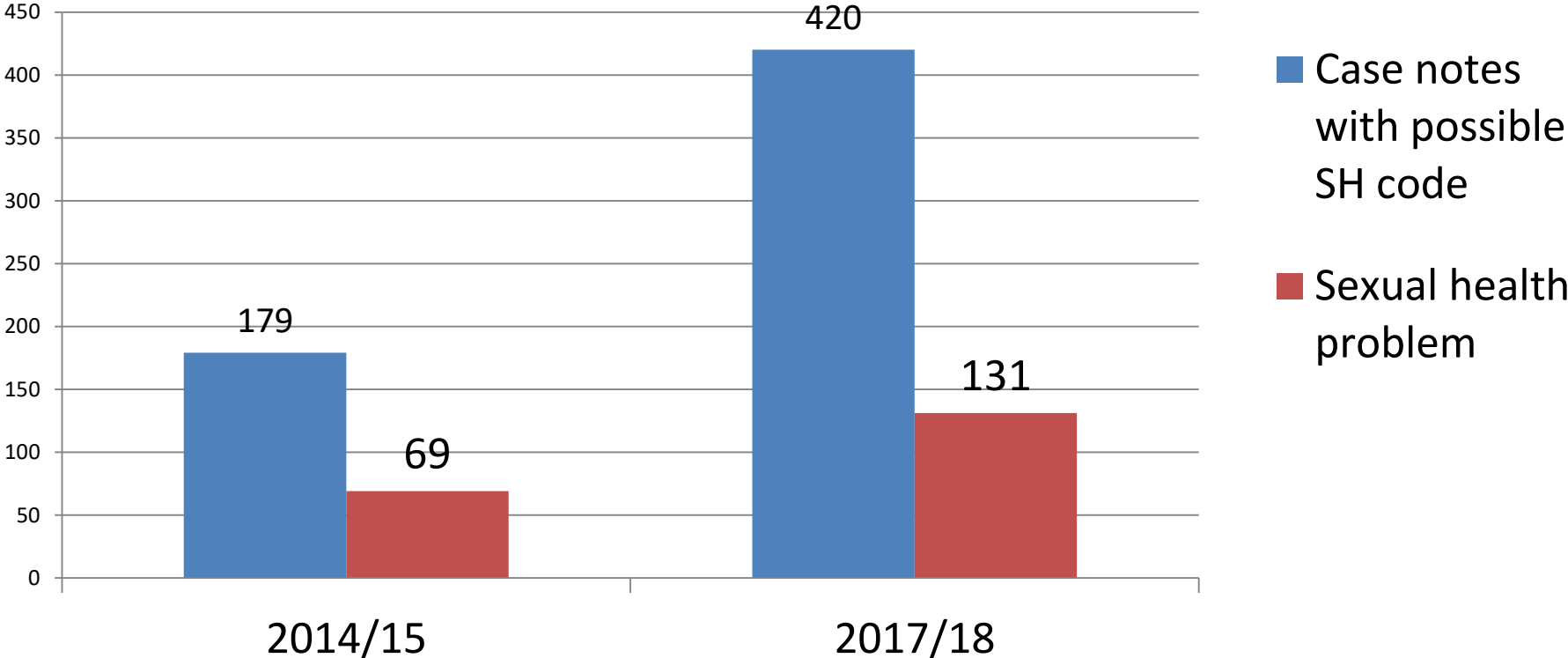
- 1) Did A+E see an increase in attendances following the change in sexual health services?



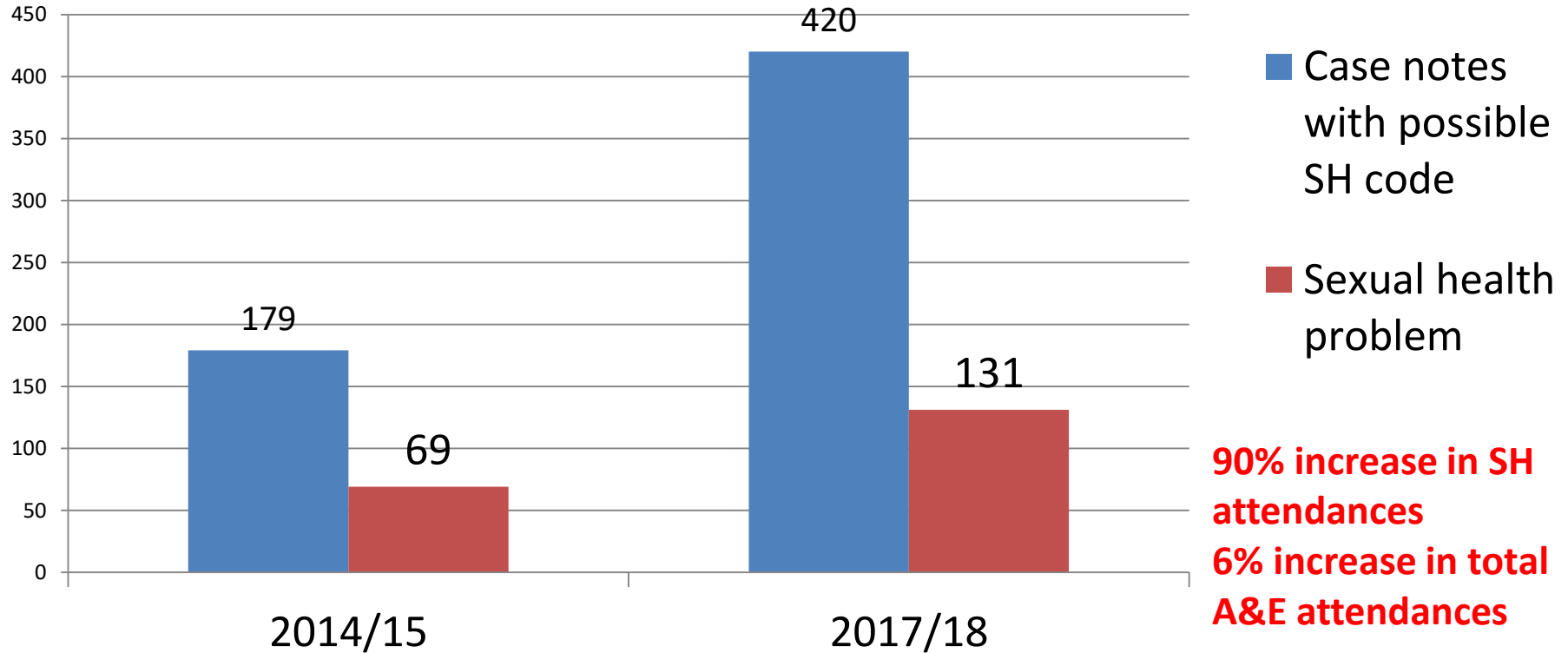
# Results

- 599 episodes in total coded with a sexual health related code

# Numbers of patients presenting to A&E with sexual health related episodes



# Numbers of patients presenting to A&E with sexual health related episodes



# Demographics

**2014/15**

25% seen  
in hours

Mean age  
30

13%  
females  
87% males

16-62 Age  
range

**2017/18**

27% seen  
in hours

Mean age  
30

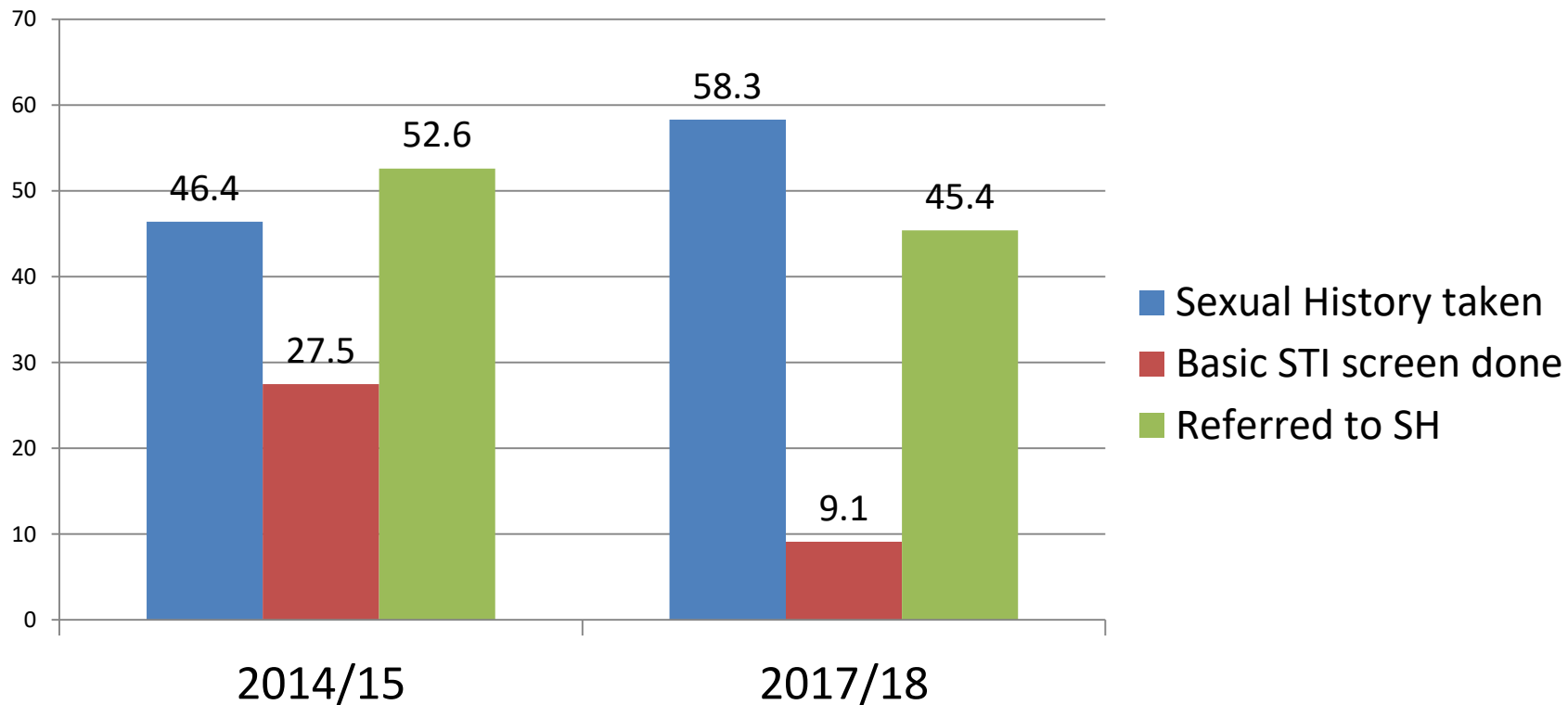
18%  
females  
82% males

16-66 Age  
range

# Question:

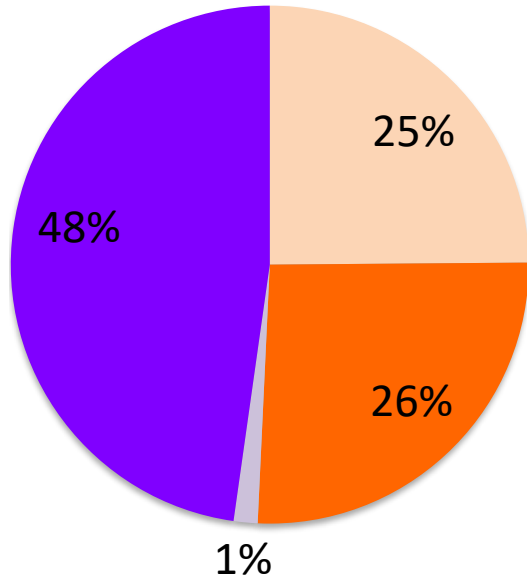
2) Are patients who attend A&E for sexual health problems managed appropriately?

# Proportion of 'true' sexual health attendees having sexual health interventions



# Does it matter if they referred to SH anyway?

**2014/15**



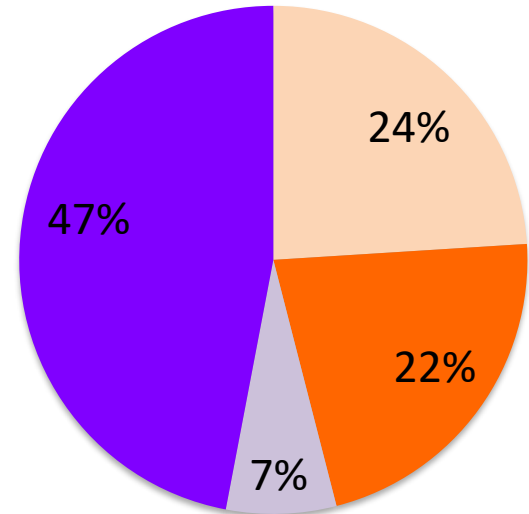
■ Referred and attended

■ Referred and not attended

■ Not referred and attended

■ Not referred and not attended

**2017/18**

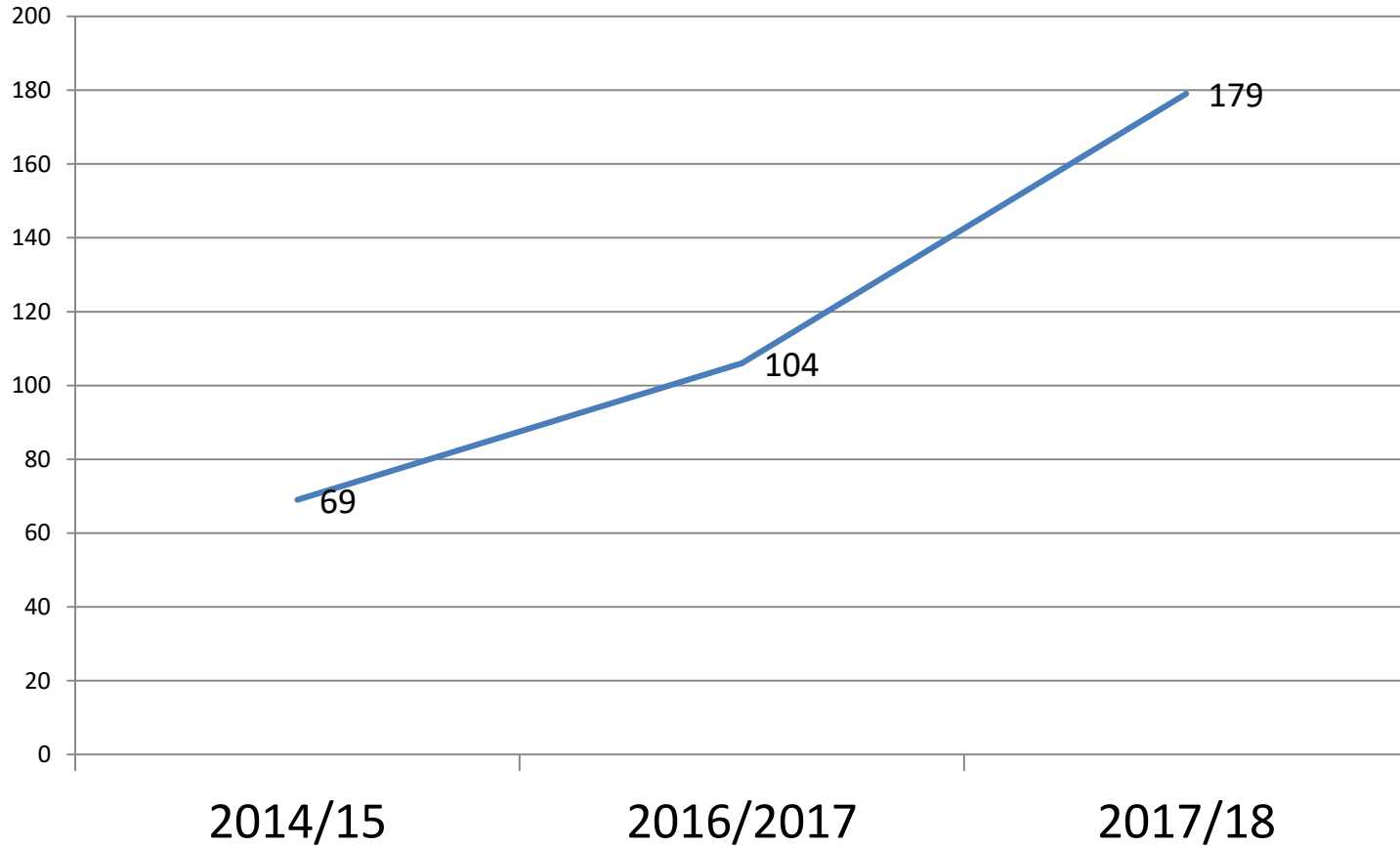


# Can we draw any conclusions?

- There has been an increase in sexual health attendances in A&E
  - Can't infer trends with only two time points
  - Went back and analyzed 2016/17 data:
    - 304 total coded attendances
    - 104 were 'true' sexual health attendances



# A&E attendances with sexual health problems



# Why has this happened?

- Next steps:
  - Survey in A&E
    - Short questionnaire
    - Completion rate extremely low
    - Combined it with a referral pathway

*Please complete the questionnaire below and return to A&E staff:*

-----*Tear here* -----*Tear here*-----

In order to help us improve our services please tell us why you attended A&E today:  
(Circle all that apply)

1. I called the Sexual health service but they could not offer me an appointment when I wanted to be seen.
2. I called the Sexual Health service but they were closed/could not get through.
1. I did not think my problem could be dealt with at the sexual health service
2. My symptoms were so severe that I felt I needed immediate attention
3. Other: Please explain:

# Genito-Urinary Conditions in A&E

## For Patients:

The Nottingham University Hospital Sexual Health Service may be able to help you with the problem you have presented with today.

How to find us:

<p>Dept Sexual Health Gate 2 - Nottingham City Hospital Hucknall Road Nottingham NG5 1PB Tel: <a href="tel:01159627627">0115 962 7627</a> Lines open: 8.30am-7.00pm, Monday-Friday</p> <p><b>Clinic Open</b> Monday 9am-7pm Tuesday &amp; Wednesday 9am-5pm Thursday 1-7pm Friday 9am-1pm</p>	<p>Dept Sexual Health Victoria Health Centre Glasshouse Street Nottingham NG1 3LW Tel: <a href="tel:01159627627">0115 962 7627</a> Lines open: 8.30am-7.00pm, Monday- Friday</p> <p><b>Clinic Open</b> Mondays, Tuesdays &amp; Fridays 9am-5pm Wednesday 9am-7pm Thursdays 1-5pm Saturday 10am-2pm</p>
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Or book online: <https://www.nuh.nhs.uk/sexual-health-services>

**For A&E staff:**

**Conditions where you would consider GU Medicine (“Sexual Health”) referral:**

Outcome:

- 1) Referred to Sexual health to be seen urgently: Please ring GUM ON call via switchboard
- 2) Referred to Sexual health non-urgently (within 3 weeks): Patient to phone Sexual Health
- 3) Referral not required. Patient managed fully in A&E
- 4) Referral to Speciality other than Sexual Health (Please state department)

# Conclusions

- There has been an increase in sexual health attendances in Nottingham's A+E
- There *may be* a correlation in A&E attendances with a reduction in walk-in attendances to SHS following service re-design post tender.
  - Access to GP services may be a confounding factor
  - Reflects an increase in sexual health related attendances per se?
  - Coding inaccuracies?

# Conclusions

- This matters
  - Cost of A&E attendances
  - Impact on waiting times in already stretched services
  - Sexual health care in A&E currently falls below recommended national standards
  - Teaching and training session planned for A+E staff and work ongoing to improve referral pathways

# Acknowledgements

- My Supervisor Dr Ashini Fox
- My A+E Collaborators: Dr Umar Khan and Dr Asif Malik and the A+E staff distributing our survey
- Data managers Mr Howard Gees and Kosma Szychowski-Nowak
- All my colleagues at Nottingham ISHS
- All the patients taking part in our survey