

# What do commissioners and health providers think about the National Chlamydia Screening Programme in England?



Public Health England

Findings of qualitative interviews conducted as part of an external review

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## INTRODUCTION

The National Chlamydia Screening Programme (NCSP) is an opportunistic screening programme for young people (YP) and since its national rollout began in 2003, it has undergone numerous changes. Previous studies have reviewed the programme and spoken to stakeholder groups.<sup>1,2</sup>

As part of a wider external peer review of the NCSP, we interviewed sexual health (SH) commissioners and health providers involved with the NCSP to understand their thoughts on the past, current and future structure of chlamydia screening in England,

## METHODS

Semi-structured interviews were undertaken to elicit feedback from a range of stakeholders from across England. We purposively selected from a convenience sample of commissioners and health professionals to ensure that each PHE Region was represented. We also strove to have an even distribution of interview subjects from rural and urban Local Authorities and selected from long-standing stakeholders and those newer to their position.

13 one-to-one phone interviews and three group discussions, each with around 8-15 individuals, were completed. Introductory questions to determine the relationship and role of each participant with the NCSP were included and then the stakeholders were asked for their perceptions of the NCSP's Strengths, Weaknesses, future Opportunities and Threats (SWOT).

To ensure that participants could speak freely, they were interviewed by a regional Sexual Health Facilitator (SHF) with whom they would not regularly interact and all responses were anonymised.

Data was independently coded by two of the authors and framework analysis was used to identify and organise themes raised by stakeholders.

## RESULTS

Few new themes were identified as interviews progressed, suggesting data saturation was achieved. The common themes were identified across the SWOT domains and these were broadly mapped against the seven pillars of clinical governance. Details of the key pillars, main themes and a selection of representative SWOT comments from stakeholders are presented (right).

Themes are marked to show how they fitted into the SWOT domains:

- + Comments are mainly Strengths or Opportunities
- Comments are mainly Weaknesses or Threats
- + - Conflicting Comments across SWOT domains

## KEY FINDINGS

- The initial launch of the NCSP had a great impact on sexual health awareness and resources; however over time the profile of the programme has waned and it was felt that a new national campaign was required.
- Funding cuts across public health are heavily impacting on the ability of services to deliver screening but many are looking at ways to prioritise and target resources.
- There were occasionally contradictory statements; however this is to be expected when collecting feedback from a range of people from various roles and geographical regions.
- Indeed some themes, such as Engagement, had strong regional variation in their perceived strength; highlighting localised differences in service structure and resources that alter delivery of the screening.
- Many stakeholders felt that whilst the current monitoring targets are better than the original measures; they can be hard to reach for some areas and have negative impacts on the local perception of their work.
- The main themes overall were all reflected in the Opportunities section suggesting that for existing weaknesses and potential threats, there are steps that can be taken to pre-empt these hurdles.
- Public Health England recently completed an independent report on commissioning and it raised many similar issues as found in this study.<sup>3</sup>

## CONCLUSIONS

Stakeholder feedback has provided insight on the impact of the NCSP; discussing the initial effects during implementation, the current situation facing stakeholders and how the NCSP can adapt for the future. Participants felt the impact of the NCSP on attitudes to SH testing and the opportunity to speak to YP about their general sexual health was positive. Numerous themes were identified that were consistent across the country, however variation in needs and threats between urban and rural areas were highlighted.

This work was undertaken as a part of a wider external review of the NCSP and the feedback from stakeholders will help inform discussions on the future structure of the NCSP.

## THEMES & STAKEHOLDER QUOTES

### 1. ENGAGEMENT

- + Integration with wider SH services
- + Engaging other stakeholders
- + - Regional collaboration
- + - Engaging with Young People

"use regional and national commissioners networks to work together"  
**Commissioner**

"can't sustain the connection with young people like they had before"  
**Commissioner**

"provided setting to have discussion with young people about STIs"  
**Group Meeting**

### 2. RISK MANAGEMENT

- + Attitudes to Testing
- + - Personal Health Management
- + - Vulnerable Groups
- Negative Impacts of Testing

"negative effects of testing include anxiety, worry, impact on relationships"  
**Provider**

"young people have better relationship to and attitudes to testing... reduced stigma"  
**Provider**

"message became how easy it is to test and treat rather than focussing on prevention"  
**Commissioner**

### 3. MONITORING

- + Data Collection
- + Potential New Measures
- + - Detection Rate Indicator (DRI)
- Original Testing Targets

"chlamydia care pathway training for providers has been really useful for staff... demystifies the data"  
**Commissioner**

"Detection Rate Indicator measured against a national standard... unhelpful as needs to be measured against localised rates"  
**Commissioner**

"the quality criteria has kept services focussed"  
**Commissioner**

### 4. RESOURCES

- + - Funding & Resources
- + - Targeting & Prioritising Services
- Promotional Resources
- Loss of Staff

"meant a significant amount of money has gone into sexual health facilities and marketing"  
**Commissioner**

"rising costs... hard to financially ensure programme in current form"  
**Commissioner**

"mandated to provide STI testing, but format up for grabs"  
**Provider**

### 5. EDUCATION & TRAINING

- + Health Professionals Training
- + Sexual & Relationship Education
- + - Chlamydia Knowledge
- + - General Sexual Health Education

"huge change in awareness in Chlamydia and... other STIs"  
**Commissioner**

"NCSP is a fantastic gateway into young persons lives... Identify current and new social norms"  
**Provider**

"needs re-vamping for Younger age groups (under 17yr olds) relying on old campaigns"  
**Commissioner**

### 6. PROGRAMME DELIVERY

- + New National Led Campaign
- + New Approaches, i.e. Online Services
- + - Access to Testing
- + - Targeting & Focus of Programme

"needs a national campaign, properly funded"  
**Provider**

"profile of NCSP and chlamydia has reduced dramatically"  
**Provider**

"as it is mandatory... strengthens position in Local Authorities and helps other STIs"  
**Group Meeting**

### 7. EVIDENCE & GUIDANCE

- + PHE National Leadership Role
- + Need for Greater Regional Sharing
- + - New Clinical Evidence
- Costing Analyses

"loved the focus of a central point, support and leadership, excellent support from facilitators"  
**Commissioner**

"lack of data on long term illness from infection and consequences"  
**Provider**

"local authorities not seeing it as a priority... lacking support or strong message"  
**Group Meeting**

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## REFERENCES

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