

## ShowCase

### Are you getting it? – Chlamydia screening learning demonstration site

**Topic:** Sexual Health

**Organisation:** NHS Norfolk; NHS Great Yarmouth and Waveney

**Location:** Norfolk and Waveney (East of England)

**Dates:** August 2007 to March 2010

**Website:** [www.areyougettingit.com](http://www.areyougettingit.com)

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#### Overview

The aim of this project was to increase screening activity within screening sites that are part of the Norfolk and Waveney Chlamydia Screening Programme (NWCSP). The ultimate goal was to help the NWCSP meet increasingly challenging national targets for screening 15- to 24-year-olds in Norfolk and Waveney.

The NWCSP is delivered by over 200 health and non-health screening sites across Norfolk and Waveney; however many of them return few or no screens at all each year. Six interventions were piloted, which focused on enhancing the Chlamydia Screening Office's role in engaging, supporting and managing the large and growing number of screening venues across Norfolk and Waveney, to deliver increasing and sustainable volumes of chlamydia screening in the longer term.

#### Results:

- Improved induction training for new sites coincided with a threefold increase in chlamydia screening volumes
- Dissemination of promotional materials to pharmacies from December 2009 was followed by a 300 per cent increase in chlamydia screens returned by pharmacies
- Chlamydia screening rates among 15- to 24-year olds increased from 3.8% in 07/08 to 16.15% in 09/10 in the Norfolk and Waveney area

## 1. BEHAVIOUR

- For existing screening providers in Norfolk and Waveney to actively offer Chlamydia screening to 15-24 year olds

## 2. CUSTOMER ORIENTATION

- In-depth telephone and face-to-face interviews were conducted with 40 NWCSP screening providers in order to understand what the primary barriers to screening were and what would motivate them to actively increase screening

## 3. THEORY

The Theory of Planned Behaviour (TPB) suggests that attitude, subjective norms and perceived behavioural control can influence providers' screening behaviour.

This project therefore needed to:

- Promote attitudes that favour screening
- Encourage providers to see screening as a socially approved behaviour
- Help providers develop the confidence and skills to effectively offer screening to young people

## 4. INSIGHT

- Low awareness of annual targets and NWCSP performance to date meant that providers neither felt urgency to offer screening, nor that they were part of a larger initiative
- Some providers perceived a lack of interest and support from the CSO once they signed up to the programme, which sometimes led to cynicism and the assumption that there was no real need for screening
- For providers whose main remit was not sexual health, chlamydia screening often fell to the back of their minds. Screening was also often only offered when a young person presented for a sexual health related reason

## 5. EXCHANGE

### Barriers

- Limited time and/or staffing
- Anxieties about raising the issue of screening (particularly in an unrelated consultation)
- Limited specific understanding of the NWCSP, including its targets

### Motivators

- Being part of an important national initiative
- Professional development and networking opportunities
- Earlier diagnosis and treatment of chlamydia
- Free screening kits and other collateral
- Payment per screen

## 6. COMPETITION

- The original reason why the patient went to the service provider
- Other health promotion initiatives, such as smoking cessation services, competing for the providers focus

## 7. SEGMENTATION

Screening providers were segmented into four main groups according to provider type, as well as current screening activity and ability and motivation to screen. These included;

- Engaged and motivated
- Interested but restricted
- Low interest
- Low priority

The team chose to target core providers (namely GPs and pharmacies) who were interested but restricted or who had low interest, as they had greatest potential to increase screening, but needed greater support and encouragement.

## 8. METHODS MIX

- Improved and standardised induction sessions for new screening providers
- Sexual health communications training
- Personal catch-ups from the chlamydia screening officer
- Quarterly newsletter sent to screening providers that includes; screening levels, targets, tips, dates of training and an anonymised league table
- Branded promotional materials to display in screening sites, including; posters, flyers and shelf wobblers
- NWCSP branded client-facing website
- Register based pop-up reminders