

Barriers and facilitators to the adaptation and ongoing
implementation of online sexual health services

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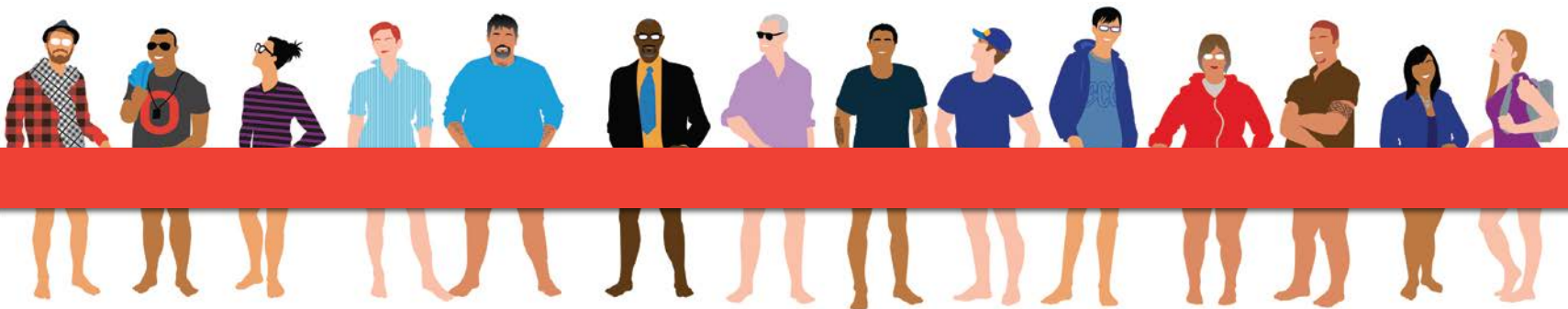


GetCheckedOnline Contexts Study

How can organizations in British Columbia roll-out online sexual health services in effective and equitable ways?

- Aims:

1. to understand the contextual obstacles and opportunities that have shaped the implementation of GetCheckedOnline
2. to learn what it takes to implement and expand GetCheckedOnline in fair and sustainable ways



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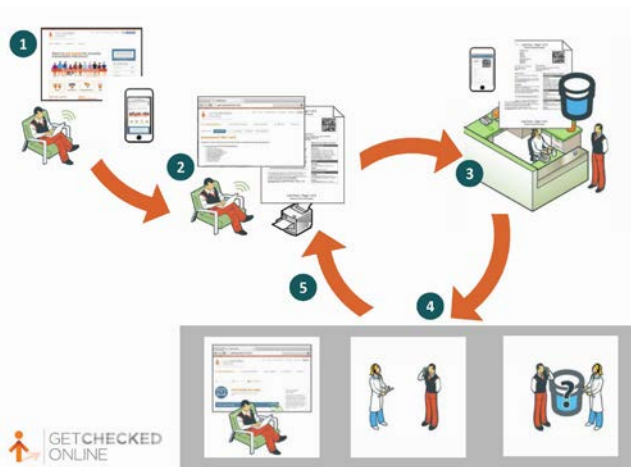
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GetCheckedOnline or "GCO"

- Comprehensive internet-based testing service for syphilis, chlamydia, gonorrhea, HIV and hepatitis C
- Available in select communities of BC
- Publicly-funded service provided by the BC Centre for Disease Control
- No personal health number required to access testing
- Virtual extension of in-person provincial STI clinic



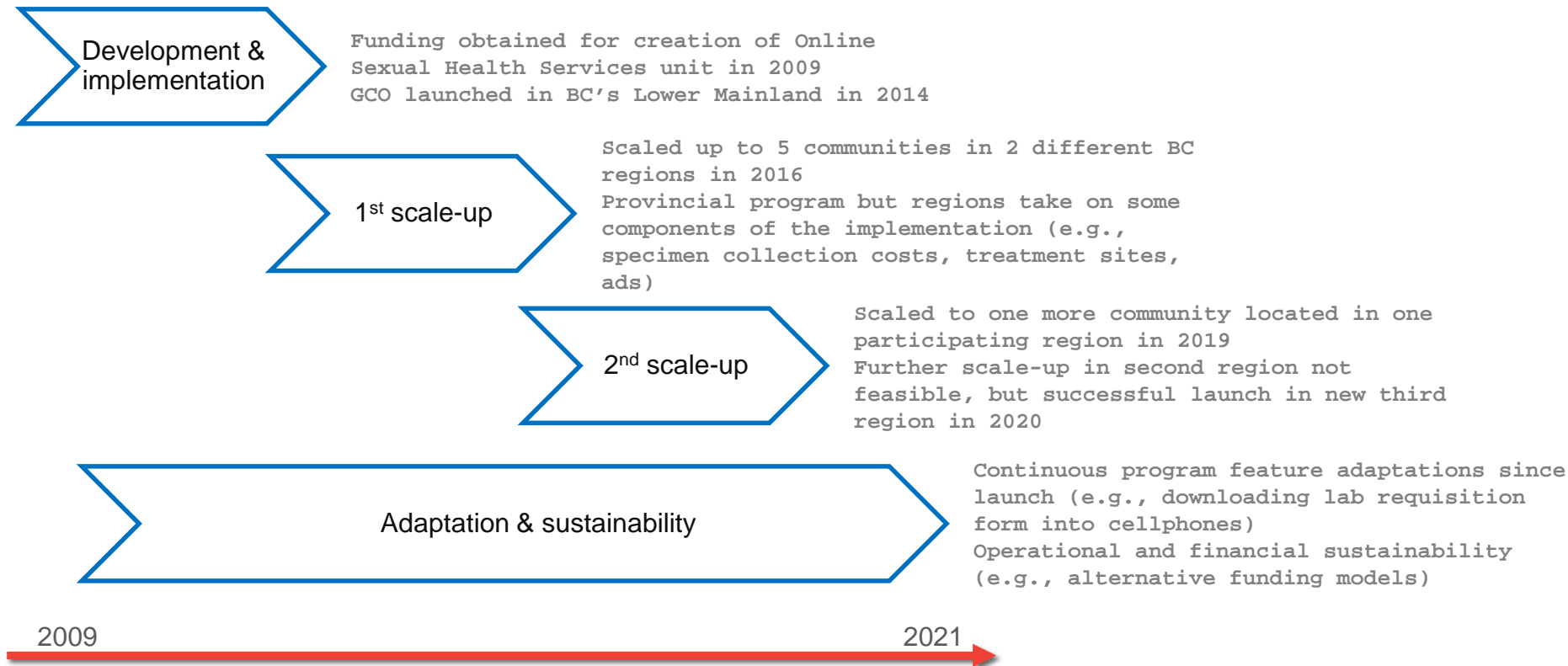
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Implementation of GCO



Methods

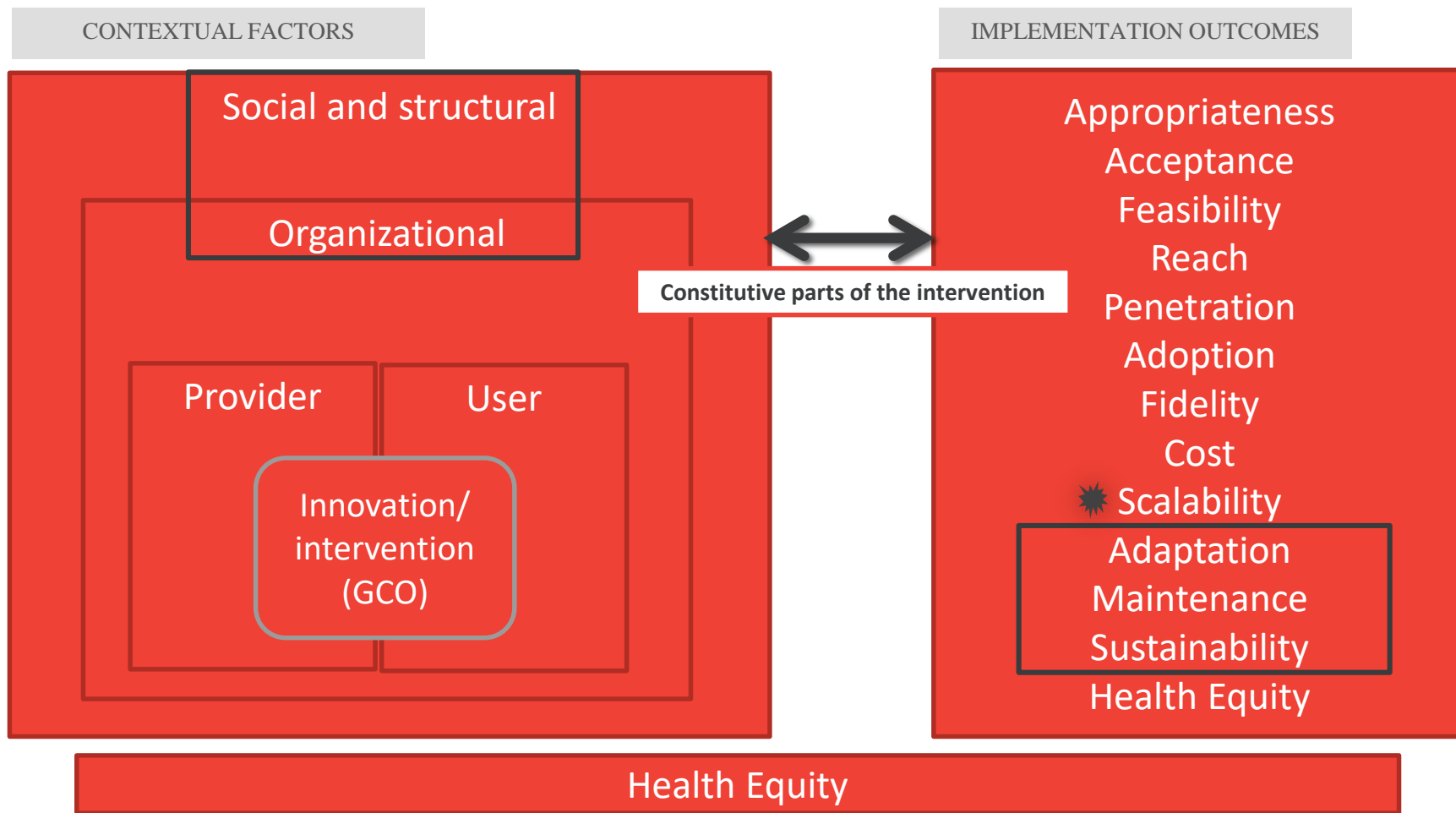
- Institutional ethnography approach
 - Research strategy with long history in critical HIV and healthcare research
 - Attention to people's everyday work processes and how such work processes are socially and institutionally organized

“This is a method of research which investigates, ethnographically, a ‘section’ of the social world from the standpoint of the organization of the work of those who in various ways are involved in its production.”

Smith, Mykhalovskiy, & Weatherbee 1991

- Qualitative data collection between April 2019 and February 2020
 - 25 individual interviews with provincial and regional stakeholders
 - 21 observations of planning and operations meetings
 - Review of key texts (e.g., provincial policies, program manuals, etc.)





Adapted from Chaudoir 2013, Proctor et al. 2011, Pfadenhauer et al. 2017, Gómez-Ramírez et al. Under Review



Findings: Adaptation

Facilitators

- New understandings of privacy security and data retention regulations over time
- Translation/integration of clinical guidelines into an online environment
- Implementers'/organizational eagerness to respond to changing users' needs and feedback

WORK PROCESSES:

- Retaining testing results data indefinitely
- Introducing 2-factor authentication

Barriers

- “Black holes”: encountering obscure health system IT decision-making and prioritization processes
- Difficulty anticipating and covering changing technology-related costs



Findings: Maintenance

Facilitators

- Handling GCO results like results from in-person clinic clients
- Sharing care and public health responsibilities with some regions
- Drawing on existing nursing certifications and clinical practice tools
- Availability of structured guidance resources for operations

WORK PROCESSES:

- Managing and delivering results to clients (clinical and public health components)
- Maintaining and updating IT systems

Barriers

- Nursing and administrative time involved in running services
- Manual (vs. automated) work processes involved



Findings: Sustainability

Facilitators

- Keeping service features over time to allow for evaluation
- Province-wide support and demand for service

WORK PROCESSES:

- Seeking and ensuring community stakeholder buy-in and support
- Collecting, testing and reporting lab samples

Barriers

- Demonstrating cost-savings impact of service in relation to other health system services
- Drawing on global budget allocated for public health laboratory
- Facing unstable funding mechanisms to carry program over



Conclusions

- **Adaptation**

- Online services require keeping up to date with changing technological requirements and new developments
- Unanticipated technology-related costs and processes

- **Maintenance**

- Embedding or integrating services within in-person services and clinical, administrative, and public health practices helps to operate them more efficiently
- Not all service operations processes can be automated or are interoperable across IT systems, so they may require human resource-intensive manual tasks

- **Sustainability**

- Enthusiasm and support for online and other forms of virtual services within and outside of the healthcare system
- Financial supports and commitments are required to keep service alive in mid- and long-term



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