



STD Program Core Components and Strategies – 2015/2016

<u>Essential Public Health Services*</u>	<u>Core Components of STD Program</u>	<u>STD Program Strategies</u> <ul style="list-style-type: none"> • Essential/Universal Strategies – Bold • <i>Project-Based Strategies** - Italicized</i>
<p>1. Monitor Health Status to Identify Health Problems</p>	<ul style="list-style-type: none"> • Conduct case surveillance of syphilis, gonorrhea, and chlamydia 	<ul style="list-style-type: none"> • Educate, monitor and support medical providers and laboratories in reporting • Maintain electronic database of reports received from health care providers and laboratories • Facilitate standardized computerized transmission of electronic laboratory reporting • Ensure confidentiality and security guidelines for the collection, storage, and use of all surveillance data according to NCHHSTP guidance*** • Ensure the quality and timeliness of case-based data collection to routinely obtain information on age, sex, race, ethnicity, gender of sex partners, pregnancy status, HIV status, treatment given, geographic location and provider information*** • Geocode case-based surveillance data to target interventions*** • Conduct automated matching of STD and HIV cases*** • <i>Partner with other surveillance programs (i.e. - communicable diseases, HIV, maternal and child health, tuberculosis, and viral hepatitis) through the exchange and matching of data to enhance reporting and identify co-morbidities</i>

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	<ul style="list-style-type: none"> • Conduct behavioral surveillance regarding sexual health • Generate reports on STD rates 	<ul style="list-style-type: none"> • <i>When/where feasible collaborate with health information exchanges</i> • Support the collection of sexual health behavior information on Youth Risk Behavior Survey and Behavioral Risk Factor Surveillance System for the purpose of informing prevention efforts and impacts for programming • Ensure the collection of risk-group behavior data from partner notification services and where applicable from STD clinic surveys for the purpose of informing prevention efforts • Report and disseminate STD data to affected populations, communities, providers and key stakeholders on Department of Health website annually*** • <i>Expand surveillance systems beyond case-based reporting to sentinel systems and population-based approaches***</i>
2. Diagnose and Investigate Health Problems and Health Hazards	<ul style="list-style-type: none"> • Conduct analysis of STD disease trends using demographic information 	<ul style="list-style-type: none"> • Prepare reports describing STD trends by age, sex, gender of sex partners, pregnancy status, HIV status, race/ethnicity, geographic distribution, and treatment assurance • Prepare reports on HIV co-infection rates with other reportable STDs • <i>Prepare reports describing STD risks and health disparities using existing and enhanced surveillance data, GIS tools and external datasets related to area-based socioeconomic measures</i>

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	<ul style="list-style-type: none"> • Conduct STD prevalence monitoring in high-risk settings and/or communities 	<ul style="list-style-type: none"> • <i>Establish and promote STD screening in family planning clinics, jails, juvenile detention centers, STD clinics, and/or in other high-risk settings</i> • <i>Establish partnerships with high volume laboratories to obtain quarterly data on the number of tests they conduct and the positives they identify to assist in prevalence monitoring</i>
	<ul style="list-style-type: none"> • Conduct disease intervention services 	<ul style="list-style-type: none"> • Ensure untreated cases of reported GC, CT, and syphilis receive treatment • Provide targeted and effective partner services for: <ul style="list-style-type: none"> - Primary, secondary, and early latent syphilis - HIV (including HIV co-infected CT, GC and syphilis cases) - Pregnant women diagnosed with syphilis - GC cases with possible GC treatment failure or suspected or probable cephalosporin-resistant <i>N. gonorrhoeae</i> isolates using the criteria in the Cephalosporin-Resistant <i>N. gonorrhoeae</i> *** • <i>Provide DIS services to at-risk/infected pregnant women as determined by the project area</i> • <i>Collaborate on the provision of HIV Partner Services according to local morbidity, priorities and resources</i> • <i>Provide effective partner services through social media websites and other digital or communication technologies (e.g. internet partner services)****</i>
	<ul style="list-style-type: none"> • Establish a comprehensive STD Outbreak Response Plan 	<ul style="list-style-type: none"> • Prepare a written outbreak response plan and review/revise the plan annually • Implement Outbreak Response Plan, including health alerts and case investigation, when detection systems

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	<ul style="list-style-type: none"> • Partner with public and private laboratories offering STD testing 	<p><i>indicate disease rates are above background levels</i></p> <ul style="list-style-type: none"> • <i>Identify health department and other public and private partners to assist in outbreak response efforts</i> • Assure the availability of laboratory testing for STD services • Maintain a resource guide of private or public health laboratories in the jurisdiction that have the capacity to conduct <i>N. gonorrhoeae</i> culture and Antimicrobial Susceptibility Testing (AST***) and testing capability by anatomical site
	<ul style="list-style-type: none"> • Develop program policy and procedures that are responsive to morbidity 	<ul style="list-style-type: none"> • <i>Develop, implement and amend as needed a Gonorrhea Action Plan</i>
3. Inform, Educate, and Empower People about Health Issues	<ul style="list-style-type: none"> • Create and maintain a Department of Health STD web site 	<ul style="list-style-type: none"> • Provide a link of public-funded clinics where STD services are available • Provide information on disease prevention, symptoms, and treatment • Promote Health Department web sites • <i>Provide information on condom availability and other risk reduction strategies including but not limited to PrEP as appropriate to the target risk audience</i>
	<ul style="list-style-type: none"> • Promote STD educational materials 	<ul style="list-style-type: none"> • Promote and provide medically accurate, culturally sensitive STD resources to STD clinics, the general public, CBOs, schools and other educational institutions • Develop, promote and/or collaborate in the dissemination of effective behavioral and community interventions and strategies • Collaborate with Department of Education (or equivalent) and other organizations to implement STD health promotion, prevention, and intervention

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		<p>activities****</p> <ul style="list-style-type: none"> • <i>Participate in expert and community review panels of STD resources</i> • <i>Provide training and technical support for outreach education and collaboration/partnership efforts</i>
4. Mobilize Partnerships to Identify and Solve Health Problems	<ul style="list-style-type: none"> • Collaborate with public and private key stakeholders 	<ul style="list-style-type: none"> • Actively participate as a member in planning groups addressing unintended pregnancy, comprehensive adolescent health, viral hepatitis prevention that impact STI, HIV, infertility prevention • <i>Establish internal and external Department of Health collaborations with colleagues such as HIV/AIDS, Hepatitis, Immunization, Communicable Disease, Public Health Labs, Department of Correction, Department of Education, Chronic Disease and Department of Social Services</i> • <i>Develop partnerships or strategies with businesses to impact prevention efforts</i> • <i>Actively participate as a member of associations such as NACCHO, NASTAD, NCSO, NFPRHA and other state and national public health associations</i>
	<ul style="list-style-type: none"> • Collaborate with healthcare systems and providers 	<ul style="list-style-type: none"> • Understand the role the healthcare delivery system plays in the prevention of STD/HIV • Improve the delivery of STD screening and treatment and HIV screening and linkage to care services through the healthcare delivery system • <i>Establish third party billing system as permissible</i>
5. Develop Policies and Plans that Support Individual and Statewide Health Efforts	<ul style="list-style-type: none"> • Establish STD legislative agenda 	<ul style="list-style-type: none"> • Monitor and evaluate impact of relevant policies*** • Educate the public, providers and key stakeholders on the positive potential or proven impacts of policies on reducing sexually transmitted***

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		<i>Propose/support legislation for Expedited Partner Therapy (EPT) and promotion and funding for STD-related vaccines</i>
	<ul style="list-style-type: none"> • Develop and include STD objectives in statewide planning documents 	<ul style="list-style-type: none"> • Include STD objectives in Healthy People 2020 State Reports • Recommend STD objectives in state, regional, and local HIV Prevention Plans • Use the Affordable Care Act to encourage health care providers to improve access and quality of STD prevention services through enhanced collaboration with primary care*** • <i>Recommend STD prevention related objectives in health department or project area planning initiatives (e.g. - adolescent health, reducing health disparities, women’s health)</i>
	<ul style="list-style-type: none"> • Assure Medicaid and other major health plans provide adequate coverage and reimbursement of STD/HIV prevention services 	<ul style="list-style-type: none"> • Inventory health plans and levels of coverage and reimbursement • <i>In the short-term, identify and implement strategies to enhance coverage and reimbursement, where possible</i> • <i>In the long-term, seek agreements with health plans to assure adequate coverage and reimbursement</i>
6. Enforce Laws and Regulations that Protect Health and Ensure Safety	<ul style="list-style-type: none"> • Conduct enforcement of STD (communicable disease) reporting regulations 	<ul style="list-style-type: none"> • <i>Post on department website list of reportable diseases/ infections and standards for reporting</i> • <i>Promote dual reporting from laboratories and health care providers</i> • <i>Conduct periodic assessments of morbidity data to match health care provider and laboratory reports on individual cases in order to identify those entities not reporting per state requirement</i> • <i>Seek enforcement of legal violations such as provider</i>

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		<p><i>refusal to provide information needed to conduct investigations of known positives</i></p> <ul style="list-style-type: none"> • <i>Send annual mailing of STD reporting regulations and project area and community-specific incidence/prevalence data to prioritized health care providers and/or newly licensed health care providers</i>
<p>7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</p>	<ul style="list-style-type: none"> • Assure laboratory STD reporting • Establish and distribute public health statutes and administrative rules to promote testing, treatment, counseling and partner notification of infected persons and their sex partners 	<ul style="list-style-type: none"> • On annual basis, review, assess and assure timely and complete reporting of laboratory results • Implement prenatal and delivery syphilis screening regulations • Implement testing and treatment of minors regulations • Implement confidentiality regulations, policies, and/or procedures • <i>Post on department website a copy of STD related statutes and administrative rules and regulations</i> <i>Note: this would be more inclusive than just posting reporting requirements and would include confidentiality, prenatal screening for syphilis, partner services, etc.</i> • <i>Participate in the development of regulations governing the reporting of STDs, HIV, and AIDS</i>
	<ul style="list-style-type: none"> • Maintain and support STD screening programs in high-risk settings based on assessment of local prevalence trends 	<ul style="list-style-type: none"> • Measure and assure annual CT/GC screening rates among young females (15-24 years) enrolled in large health care plans, Medicaid plans, and seen in Title X and other family planning clinics, ideally using the CT HEDIS measure*** • Measure and assure, at least annually, syphilis and rectal GC, , and HCV screening rates among MSM seen in high volume HIV care facilities and other

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		<p><i>health care settings where resources are availability***</i></p> <ul style="list-style-type: none"> • Assess and ensure the proportion of GC cases that are treated correctly according to current CDC STD Treatment Guidelines*** • <i>Link newly identified HIV-infected individuals and/or partners contacted who have not been diagnosed previously with HIV who test positive to HIV care and safety net services regardless of insurance status***</i> • <i>Promote re-screening of persons effectively treated for Chlamydia, Gonorrhea, and Syphilis as promoted by CDC recommendations and guidelines</i> • <i>Promote STD screening and referral for sexual health services in adolescent service sites, schools, HIV testing venues and primary health care sites when appropriate</i> • <i>Ensure prenatal STD screening. In jurisdictions with high number of congenital syphilis: measure screening for syphilis among pregnant individuals in prenatal care****</i> • <i>Identify and ameliorate health disparities and barriers that reduce access to testing, treatment, care and prevention services.</i>
	<ul style="list-style-type: none"> • Ensure availability and access to effective STD and HIV diagnostic, treatment, and counseling services for people at risk for STDs. 	<ul style="list-style-type: none"> • Assist non-profit organizations that provide safety net STD prevention and (non-traditional or non-clinical) screening services *** • Assess performance of publicly supported STD clinics through analysis of wait times, geographic accessibility, and other barriers (i.e. costs) • Identify the STD clinical and prevention service gaps for at-risk individuals who are receiving care (e.g.,

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		<p>missed opportunities by providers including safety net providers)***</p> <ul style="list-style-type: none"> • <i>Promote the linkage of at risk consumers to an HIV PrEP provider where it is available.</i> • <i>Estimate the proportion of uninsured or underinsured, at-risk individuals in the jurisdiction</i> • <i>Encourage the provision of expedited partner therapy (EPT) for CT and GC in accordance with current CDC treatment guidelines**** and state/local law</i> • <i>At least annually, conduct surveys of patient satisfaction of STD clinic services for quality improvement</i> • <i>Provide or refer STD clinic clients to reproductive health, family planning, HIV services, and for needed immunizations including HPV and hepatitis B</i>
<p>8. Assure Competent Public and Personal Care Workforce</p>	<ul style="list-style-type: none"> • Support STD training opportunities • Distribute STD clinical educational materials to health care providers 	<ul style="list-style-type: none"> • Promote courses offered by regional Prevention Training Centers and AETCs addressing behavioral, clinical and partner services components • Distribute STD Treatment Guidelines to health care providers who report STD conditions (including HIV) and to those health care providers (based on their patient populations) for whom STD screening is an appropriate activity • Provide and evaluate STD educational opportunities including conferences, workshops, webinars and other training modalities • <i>Encourage the incorporation of STD training/education in academic curriculum of medical and nursing schools, social work, residency programs, public health, etc.</i>

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		<ul style="list-style-type: none"> • <i>Meet annually with established labs and providers and as needed with new labs and providers to educate regarding reporting regulations and how to report</i>
	<ul style="list-style-type: none"> • Maintain adequate workforce to address programmatic needs 	<ul style="list-style-type: none"> • Conduct regular needs assessment to determine capacity and infrastructure needs for STD program core components • Use surveillance data to allocate STD workforce in support of STD program core components • <i>Advocate for adequate resources for STD program core components</i>
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	<ul style="list-style-type: none"> • Measure health care provider compliance with STD Treatment Guidelines 	<ul style="list-style-type: none"> • Measure compliance with treatment guidelines on morbidity reports • Educate health care providers who report incorrect treatment on case reports • <i>Monitor timeliness of treatment rates for Chlamydia and gonorrhea by clinics</i> • <i>Contact clinics with locally identified delays in treatments and develop plan for improvement in timeliness of treatment</i> • <i>Monitor HEDIS measure performance of managed care organizations</i>
10. Research New Insights and Innovative Solutions to Health Problems	<ul style="list-style-type: none"> • Support, participate, and/or conduct activities related to insights and solutions to STD prevention • Obtain STD information regarding current successful/model programs for STD prevention 	<ul style="list-style-type: none"> • <i>Identify state, local, and national resources to assist in initiatives related to insights and solutions to STD prevention concerns</i> • <i>Evaluate application of successful/model STD prevention programs within Project Area and share results with other STD programs</i> • <i>Utilize all available data, including cost, to evaluate effectiveness of programs</i>

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	<ul style="list-style-type: none"> • Understand trends in the technological and laboratory advancements in the field of STDs 	<ul style="list-style-type: none"> • Provide updates on STD advancements to stakeholders • <i>Attend STD conferences</i> • <i>Subscribe to STD and other public health journals</i>

*Public Health Service, Essential Public Health Services Work Group, 1994

** These are recommended strategies that should be adopted at the discretion of the STD Project Area Director

*** CDC RFA PS14-1402 Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies (STDAAPPS) required program activities

**** CDC RFA PS14-1402 Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies (STDAAPPS) other suggested activities