ATTACHMENT B

Assessment of Internet Partner Services

OMB No. 0920-0879

Expiration Date 03/31/2014

help ide

**1. Assessment of Internet Partner Services (IPS) Activities in STD Programs**

Thank you for agreeing to participate. This assessment was developed to help the CDC Division of STD Prevention better understand the current status of IPS activities nationwide. The information in this data collection instrument will be used to technical assistance needs and future training opportunities. The assessment should take no more than 25 minutes to complete and your participation is completely voluntary. All information obtained from your responses will be kept secure and you may opt to complete the assessment anonymously. Aggregate data may be shared broadly through

publications or other methods, such as webinars or training, but site­ or individual ­ specific data will only be shared with permission from the site or individual. If you have any questions or comments about the assessment, you may contact Frank Strona at [FHS3@cdc.gov](mailto:FHS3@cdc.gov) or 415­355­2016

For the purposes of this assessment, we have defined IPS as the use of the internet and other technologies (e.g. texting) to conduct partner services, including partner notification (PN), and/or for record searches and gathering personally identifiable information for STD/HIV prevention and control purposes.

IPS activities do not include outreach or outreach activities such as recruitment to testing and screening events, promotion of health resources, etc.

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC Reports Clearance Officer, 1600 Clifton Road, MS D­74, Atlanta, GA 30333, ATTN:PRA (0920­0879)

Assessment of Internet Partner Services Activities II

**2. Participant Information**

**\*1. Please take a moment to share the following:**

**Health Department:**

**Job Title:**

**State:** 6

Assessment of Internet Partner Services Activities II

**3. About Program IPS Services**

**2. In which of the following divisions of your Health Program, does IPS operate within?**

mlj

HIV

mlj

STD

mlj

Combined HIV/STD

Other (please specify)

**3. Does your program currently conduct IPS?**

mlj

Yes

mlj No

Additional Comments

5

6

Assessment of Internet Partner Services Activities II

**4.**

**4. If “No”, has your program ever conducted IPS?**

mlj

Yes

mlj No

Additional Comments

5

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**5.**

**5. If “Yes”, why was IPS discontinued? (check all that apply)**

fec

Lack of funding

fec

Lack of staff/not enough staff

fec

No trained staff

fec

Leadership resistance/Lack of Interest

fec

Staff resistance/lack of interest

fec

Legal issues

Other/ Additional Comments

5

6

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**6.**

**6. If “No”, why has IPS never been conducted? (check all that apply)**

fec

lack of funding

fec

lack of staff/not enough staff

fec

no trained staff

fec

leadership resistance/lack of interest

fec

staff resistance/lack of interest

fec

legal issues

fec

Other/Additional Comments

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**Assessment of Internet Partner Services Activities II**

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**7. About Your Protocols & Guidelines**

**7. Does your program have a written IPS protocol?**

*C'* Yes

*C'* No

*C'* Don't Know

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**8.**

**8. Was the IPS protocol written in response to a CDC funded requirement?**

mlj

Yes

mlj No

mlj

Don't Know

**9. Are you currently following the Protocol?**

mlj

Yes

mlj No

mlj

Don't Know

**10. What guidelines were they based on? (Select one)**

mlj

NCSD National Guidelines for Internet­based STD & HIV Prevention

mlj

Not based on other guidelines

mlj

Don’t know

mlj

Other STD program (please specify)

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**9. How Does Your Site Offers IPS**

**11. For which infections does your program offer IPS? (Check all that apply)**

fec

HIV

fec

Syphilis

fec

Chlamydia

fec

Gonorrhea

fec

Other (please specify) or additional comments

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**12. Which staff in your program conduct IPS? (Check all that apply. We understand that**

**staff my have duplicate roles. Please check the answer that most similarly matches the job titles of those conducting IPS)**

fec

Community Health/Outreach Workers

fec

DIS, CDI, or similar position

fec

Program Supervisors/Managers

fec

All of the above

fec

None of the above, IPS is conducted by an outside organization such as a CBOs

fec

Other (please specify)/Additional Comments

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**13. Are you one of the people in your program who conducts IPS?**

mlj

Yes

mlj No

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**14. Which of the following are part of your program’s IPS activities? (Check all that apply)**

fec

Case report investigations (eg. Following up on positive tests, assuring treatment)

fec

Record searches

fec

Field investigation (locating and notifying patients)

fec

Linking and referring patients to care and services

fec

Partnership development with key stakeholders (labs, Drs., venues)

fec

Other (please specify)/Additional Comments

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**15. By checking yes or no, which of the following can you do?**

Yes No

Access sexually explicit sites like Adam4Adam to gather information for PN?

Create IPS­ or health department­ related profiles on sexually explicit sites?

Use sexually explicit sites for partner notification?

Access social networking sites like Facebook to gather information for PN?

Create profiles on social networking sites?

Use social networking sites like Facebook for partner notification?

Send emails from work email address for partner notification?

Access an electronic partner services program like InSpot?

Use texting (aka SMS or short message system) for partner notification?

Use mobile applications like Grindr to gather information for PN?

Use mobile applications like Grindr for partner notification?

Access sites like Lexus/Nexus, Accurint or the DMV records to gather information for PN?

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**10. About IPS Related Venues**

**16. Which “online” venues does your program currently use for IPS? (Check all that apply)**

fec

Facebook/MySpace

fec

Twitter

fec

GPS check in sites (e.g. Foursquare)

fec

Social/sexual GPS applications (e.g. Scruff, Grindr)

fec

Adult social/sexual wesites sites (e.g. Manhunt, Adam4Adam, BlackGayChat)

fec

Dating sites such as Match, eHarmony, OKcupid

fec

Other (please specify)/Additional Comments

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**17. Are there any sites you are prohibited from using?**

mlj

Yes

mlj No

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11.

18.If yes,from which sites?

**Assessment of Internet Partner Services Activities II**

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**12.**

**19. Has your IPS profile ever been disabled or banned by an online venue/website?**

*C'* Yes

*C'* No

Assessment of Internet Partner Services Activities II

**13.**

**20. If yes, from which online venues?**

5

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**21. Please state why:**

fec

because of complaints from website users/members

fec

for conducting outreach

fec

for sending unsolicited emails

fec

for violating the terms of service

fec

Other (please specify)

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Assessment of Internet Partner Services Activities II

**14. About Texting for IPS**

**22. Which of the following texting/SMS methods do you use for IPS? (Check all that apply)**

fec

Personal mobile phone

fec

Program­supported mobile phone

fec

Online­based texting from a computer, laptop or tablet

fec

None, we do not use texting/SMS for IPS

fec

Other (please specify)

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**15. About IPS Access**

**23. In the past 12 months, which of the following barriers have you encountered related to**

**conducting IPS? (Check all that apply)**

fec

Old equipment/computers

fec

Prohibited from accessing to sites by local program policy

fec

Prohibited from accessing site by IT policy

fec

Prohibited from accessing site by firewall blockages

fec

Considered low priority/low yield activity for DIS

fec

Lack of training to conduct IPS

fec

Belief that IPS negatively impacts DIS performance measures

fec

Resistance/lack of support from program leadership

fec

Resistance/lack of understanding from other staff

fec

Lack of staffing

fec

Legal issues

fec

Have not experienced any barriers

fec

Other (please specify)

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|  |  |  |
| --- | --- | --- |
| **Assessment of Internet Partner Services Activities II** |  | |
| ------------------------------------ | | |
| **16. About IPS Training** | | |
| **24. Have you ever participated in any informal or formal IPS-related training?**  *C'* Yes  *C'* No | |  |

**Assessment of Internet Partner Services Activities II**

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**17.**

**25. What were some of the IPS-related trainings you participated in?**

**Assessment of Internet Partner Services Activities II**

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**18.**

**26. Would you be interested in future IPS trainings?**

*C'* Yes

*C'* No

Assessment of Internet Partner Services Activities II

**19.**

**27. Which of the following training methods would you prefer?**

**(Please rank with 1 = most preferred to 5 = least preferred)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Most preferred |  |  |  | Least preferred |
| Trainings at a conference or meeting | nmlkj | nmlkj | nmlkj | nmlkj | nmlkj |
| Conference Call | mlj | mlj | mlj | mlj | mlj |
| On­line/Web­Based  Training | nmlkj | nmlkj | nmlkj | nmlkj | nmlkj |
| Webinars | mlj | mlj | mlj | mlj | mlj |
| In­house training | nmlkj | nmlkj | nmlkj | nmlkj | nmlkj |
| Other (please specify) |  |  |  |  |  |

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**20. About IPS Data Collection**

**28. Has your program conducted an assessment of community acceptability of IPS?**

mlj

Yes

mlj No

mlj

Don't know

Additional Comments

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**29. What data management system does your program currently use for case**

**management? (e.g., STD\*MIS, PRISM, MAVEN, etc..)**

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**30. Are there IPS specific data fields in your data management system?**

mlj

Yes

mlj No

mlj

Don't Know

**31. Are your IPS data analyzed?**

mlj

Yes

mlj No

mlj

Don't Know

Additional Comments

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**32. Are your IPS data used to inform program changes/improvements?**

mlj

Yes

mlj No

mlj

Don't know

Additional Comments

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**21.**

**33. Which of the following IPS­related data variables does your program collect? (Check all**

**that apply)**

fec

Number of Internet cases (cases involving your use of the Internet for PN)

fec

Number of Internet cases that become “traditional” cases, that is cases with locating information such as an address or phone number

fec

Number of text messages sent

fec

Number of emails/posts sent

fec

Number of websites used

fec

Number of contacts examined via self­report

fec

Number of contacts treated via self­report

fec

Number of contacts examined (verified)

fec

Number of contacts treated (verified)

fec

Timeliness of IPS investigations

fec

Don’t know

fec

Other (please specify)/Additional Comments

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**22. About IPS Quality**

**34. Overall, how would you rate the quality of your IPS program over the last 12 months?**

mlj

Excellent

mlj

Very Good

mlj

Good

mlj

Fair

mlj

Poor

mlj

Very Poor

Additional Comments

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Assessment of Internet Partner Services Activities II

**23. Final Comments**

**35. What suggestions would you like to make to further improve the quality and impact of**

**your IPS program?**

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**36. Any additional information related to IPS that you would like to share?**

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**37. We in the process of revising and creating new materials related to IPS. We may like to**

**follow up with you in the future. By providing us with your name and email address here ­**

**you are giving us permission to contact you.**

**Name:**

**Email Address:**

|  |  |
| --- | --- |
| **Assessment of Internet Partner Services Activities II** |  |
| ------------------------------------------------------------------------------ | |
| **24. Thank You** | |
| Thank you for taking the time to complete this assessment. | |