

# Assessment of Internet Partner Services

## 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 help identify 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 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:

# 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?**

HIV

STD

Combined HIV/STD

Other (please specify)

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

Yes

No

Additional Comments

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## Assessment of Internet Partner Services Activities II

4.

### 4. If "No", has your program ever conducted IPS?

Yes

No

Additional Comments

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5.

### 5. If "Yes", why was IPS discontinued? (check all that apply)

Lack of funding

Lack of staff/not enough staff

No trained staff

Leadership resistance/Lack of Interest

Staff resistance/lack of interest

Legal issues

Other/ Additional Comments

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## Assessment of Internet Partner Services Activities II

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### 6. If "No", why has IPS never been conducted? (check all that apply)

lack of funding

lack of staff/not enough staff

no trained staff

leadership resistance/lack of interest

staff resistance/lack of interest

legal issues

Other/Additional Comments

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

Yes

No

Don't Know

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

Yes

No

Don't Know

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

NCSD National Guidelines for Internetbased STD & HIV Prevention

Not based on other guidelines

Don't know

Other STD program (please specify)

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## Assessment of Internet Partner Services Activities II

### 9. How Does Your Site Offers IPS

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

HIV

Syphilis

Chlamydia

Gonorrhea

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

Community Health/Outreach Workers

DIS, CDI, or similar position

Program Supervisors/Managers

All of the above

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

Other (please specify)/Additional Comments

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

Yes

No

## Assessment of Internet Partner Services Activities II

### 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?	nm1kj	
Create IPS or health department related profiles on sexually explicit sites?	m1j	
Use sexually explicit sites for partner notification?	nm1kj	
Access social networking sites like Facebook to gather information for PN?	m1j	m1j
Create profiles on social networking sites?	m1j	
Use social networking sites like Facebook for partner notification?	m1j	
Send emails from work email address for partner notification?	nm1kj	m1j
Access an electronic partner services program like InSpot?	m1j	
Use texting (aka SMS or short message system) for partner notification?	nm1kj	
Use mobile applications like Grindr to gather information for PN?	m1j	m1j
Use mobile applications like Grindr for partner notification?	m1j	nm1kj
Access sites like Lexus/Nexus, Accurint or the DMV records to gather information for PN?	m1j	m1j
	m1j	m1j
	m1j	

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### 10. About IPS Related Venues

#### 16. Which "online" venues does your program currently use for IPS? (Check all that apply)

Facebook/MySpace

Twitter

GPS check in sites (e.g. Foursquare)

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

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

Dating sites such as Match, eHarmony, OKCupid

Other (please specify)/Additional Comments

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

Yes

No

## Assessment of Internet Partner Services Activit

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18.If yes,from which sites?

## Assessment of Internet Partner Services Activi

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?**

**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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### 14. About Texting for IPS

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

Personal mobile phone

Program supported mobile phone

Online based texting from a computer, laptop or tablet

None, we do not use texting/SMS for IPS

Other (please specify)

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## Assessment of Internet Partner Services Activities II

### 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)**

Old equipment/computers

Prohibited from accessing to sites by local program policy

Prohibited from accessing site by IT policy

Prohibited from accessing site by firewall blockages

Considered low priority/low yield activity for DIS

Lack of training to conduct IPS

Belief that IPS negatively impacts DIS performance measures

Resistance/lack of support from program leadership

Resistance/lack of understanding from other staff

Lack of staffing

Legal issues

Have not experienced any barriers

Other (please specify)

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## Assessment of Internet Partner Services

### 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 Activi

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

## Assessment of Internet Partner Services Activi

18.

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

C' Yes

C' No

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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	1	2	3	4	5
Conference Call	1	2	3	4	5
Online/WebBased Training	1	2	3	4	5
Webinars	1	2	3	4	5
Inhouse training	1	2	3	4	5

Other (please specify)

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### 20. About IPS Data Collection

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

Yes

No

Don't know

Additional Comments

#### 29. What data management system does your program currently use for case management? (e.g., STD\*MIS, PRISM, MAVEN, etc..)

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

Yes

No

Don't Know

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

Yes

No

Don't Know

Additional Comments

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

Yes

No

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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# Assessment of Internet Partner Services Activities II

## 22. About IPS Quality

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

Excellent

Very Good

Good

Fair

Poor

Very Poor

Additional Comments

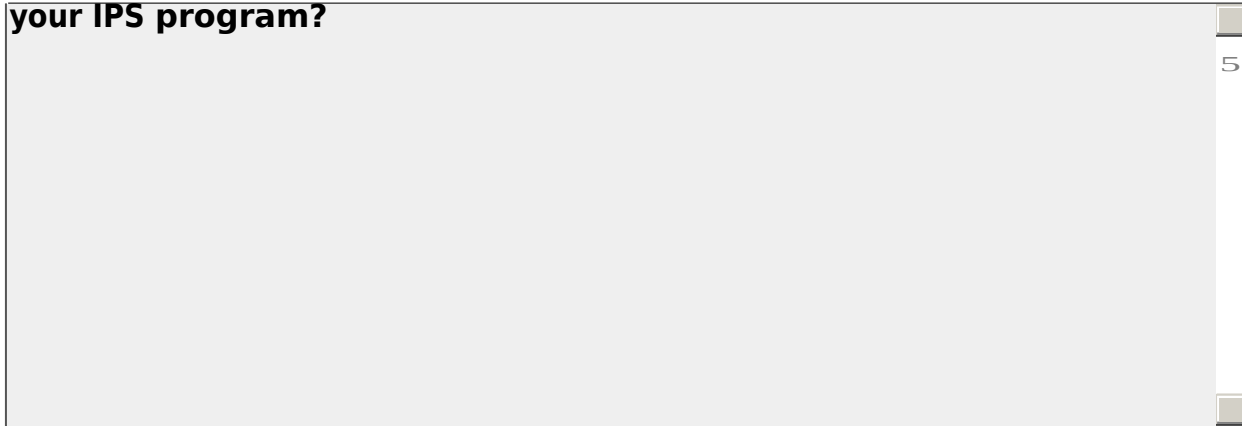
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## Assessment of Internet Partner Services Activities II

### 23. Final Comments

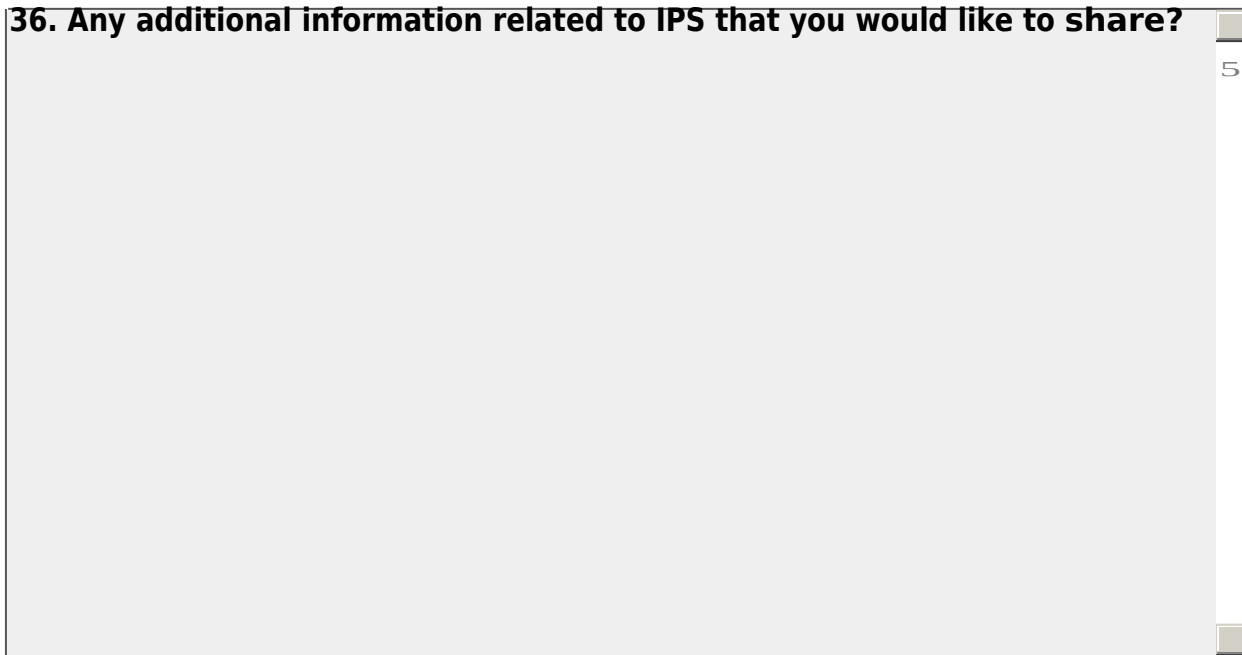
**35. What suggestions would you like to make to further improve the quality and impact of your IPS program?**



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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

### 24. Thank You

Thank you for taking the time to complete this assessment.

