

Form approved: OMB No. 0920-xxxx Expiration Date xx/xx/201x

Assessing STD Programs and Services in Health Departments

State Health Department Survey

Introduction and Instructions

The National Association of County and City Health Officials, with funding and support from the Centers for Disease Control and Prevention's Division of STD Prevention and with the support of the National Coalition of STD Directors, are conducting this survey to assess the level of publicly funded STD prevention services offered by health departments in the United States. Provision of STD testing, treatment, and partner services are among the core functions of public health. Your participation in this survey will contribute to a better understanding of the current state of publicly funded STD programs and services, and support our ability to track these services over time. Additionally, the information collected via this survey will be used to support and promote the role of health department STD programs.

The survey should take approximately an hour and 25 minutes to complete, which is inclusive of the time to collect the information necessary to complete the survey. After beginning the online survey, you can save your responses and continue the survey at a later time, if necessary. We encourage you to preview this PDF of the survey before beginning, and to consult with your colleagues, as needed, to ensure the most accurate and up-to-date information is provided.

Your responses should be answered on behalf of the state health department only. A separate survey will be administered to a sample of local health departments across the country.

Thank you in advance for your time and attention to this assessment. If you have any questions, please contact Kat Kelley, Program Analyst, HIV, STI, and Viral Hepatitis at kkelley@naccho.org or 202-507-4223.

Public reporting burden of this collection of information is estimated to be one hour and 25 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing 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 information collection, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

By clicking the Begin button, you are providing your consent to participate voluntarily in this activity.

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BEGIN





STD Partner Services and Other Prevention Activities

Definition of Partner Services

Partner services refers to activities undertaken by the health department that are designed to lead to examination or treatment of partners of persons diagnosed with an STD. Partner services refers to health department staff proactively interviewing cases to facilitate getting partners examined and treated.

Informing patients to refer their partners for examination and treatment without further assistance is <u>not</u> considered to be partner services for the purposes of this survey.

Please respond based on state health department activities only.

What best describes how partner services are handled in your state?

- Local health departments handle the majority of partner services. State <u>provides</u> <u>minimal partner services activities</u>.
- Local health departments handle the majority of partner services. State <u>provides</u> <u>surge capacity when needed</u>.
- Local and state health departments share partner services responsibilities.
- State health department provides most partner services in the state.
- Unsure

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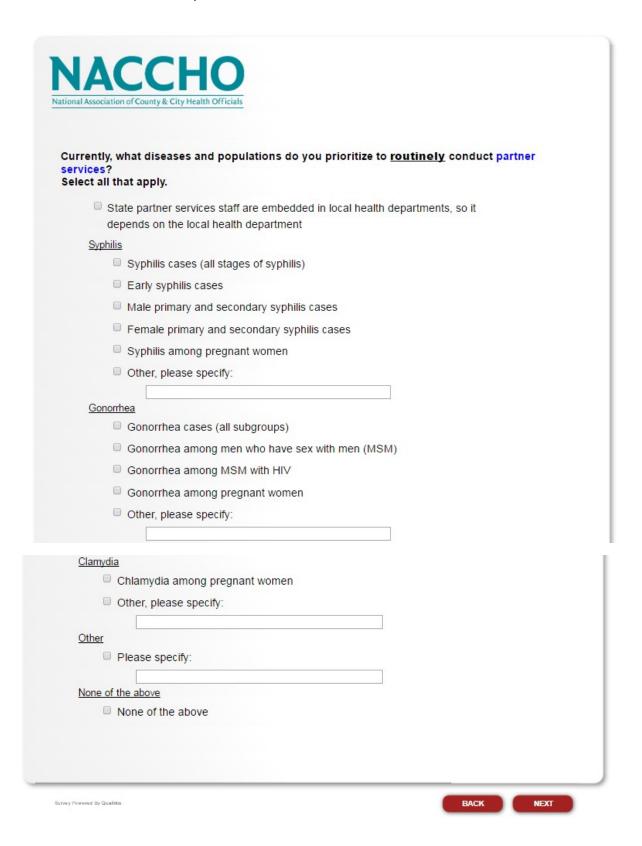
BACK

NEXT



If the respondent selects "Yes," proceed to the next question. If the respondent selects "No" or "Unsure," skip to "What types of sexual health promotion activities does your state STD program currently provide or conduct? Select all that apply."





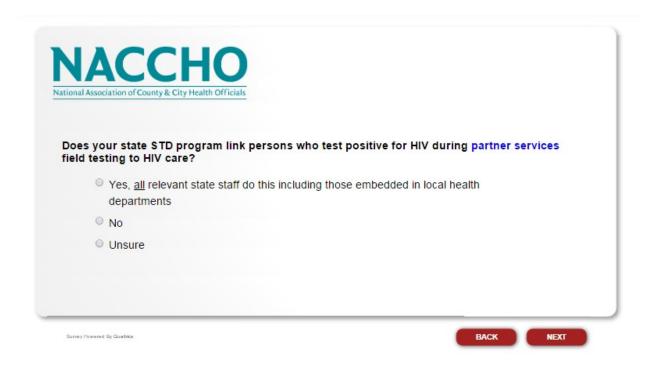
None of the above

Unsure

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s your state health department use any of the following staff as the main provider of the services? Select all that apply.
Disease Intervention Specialists (DIS)/Communicable Disease Investigators (CDI),
or another position title/classification that is used for DIS/CDI
□ Public health nurses
Other, please specify:
□ Unsure
ny of the following state staff used to support partner services, such as at times when ain provider is unavailable or has a full case load? Select all that apply.
□ Community health worker
□ Patient navigator
Other, please specify:

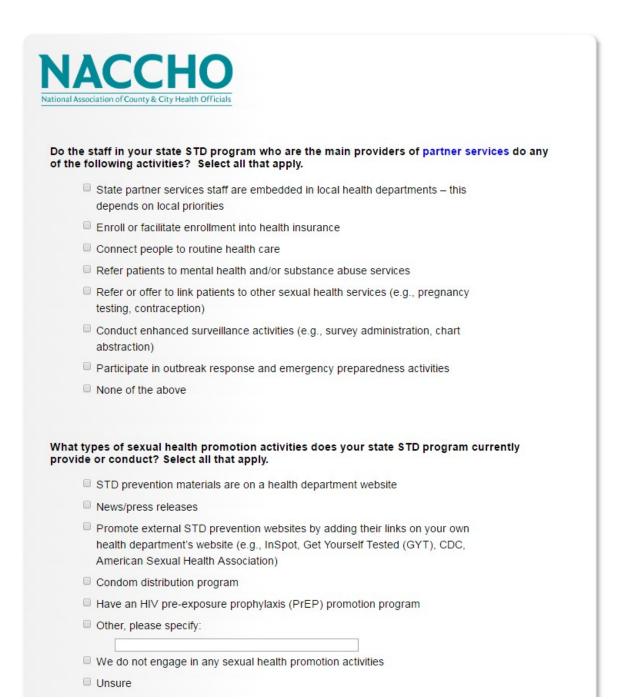
	State partner services staff are embedded in local health departments, so it depends on the local health department
	Expedited partner therapy (EPT) for chlamydia
0	EPT for gonorrhea
	Field-delivered treatment for chlamydia or gonorrhea for cases who do not return for treatment
0	Field-delivered treatment for chlamydia or gonorrhea for partners
	Internet partner services
0	Serologic testing of syphilis contacts in the field
	Field HIV testing for STD contacts (finger stick or blood draw)
	Other, please specify:
	No other partner services are provided
0	Unsure

If respondent selects "Field HIV testing for STD contacts (finger stick or blood draw)," proceed to the next question. If respondent does not select this option, skip to "Do the staff in your STD program who are the main providers of partner services do any of the following activities? Select all that apply."



If respondent selects "Yes," proceed to the next two questions. If respondent selects "No" or "Unsure," skip to "Do the staff in your STD program who are the main providers of partner services do any of the following activities? Select all that apply."

Hall AS:	sociation of County & City Health Officials
	re newly diagnosed HIV patients linked to care when diagnosed via field testing? Select t apply.
	Give patient a referral
	Call the HIV program/case managers
	 Transport or facilitate transport to HIV care provider (e.g., given transportation vouchers)
	 Make appointment with HIV care provider (<u>no</u> follow-up to confirm appointment is kept)
	 Make appointment with HIV care provider (follow-up to confirm appointment is kept)
	Other, please specify:
	Unsure
agno	re the <u>primary</u> state staff person(s) that link newly diagnosed HIV patients to care when osed via field testing? DIS/CDI
	Public health nurse (nurse who works out in field)
	Other nurse or mid-level clinical staff (in clinic setting)
	Community health worker
	Patient navigator
	Other, please specify:
	○ Unsure



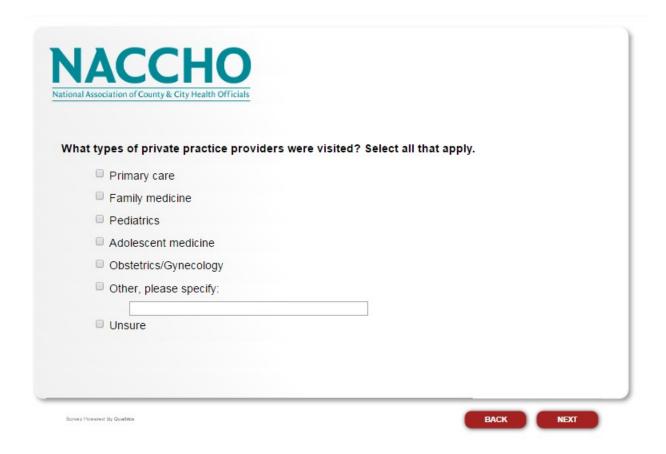
Develop focused communications for reporters/media outreach (e.g., news/press releases, talking points, media strategy)
Build and maintain professional relationships with reporters
Engage in outreach communication via social media (e.g., Facebook, Twitter, LinkedIn)
Host news/press conferences (proactive or reactive)
Monitor media coverage of local STD issues and data releases
Other, please describe:
We do not engage in any media outreach
Unsure

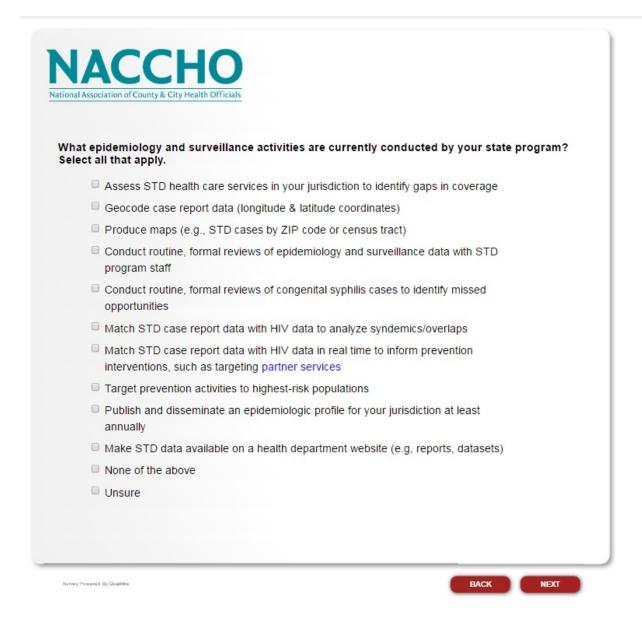


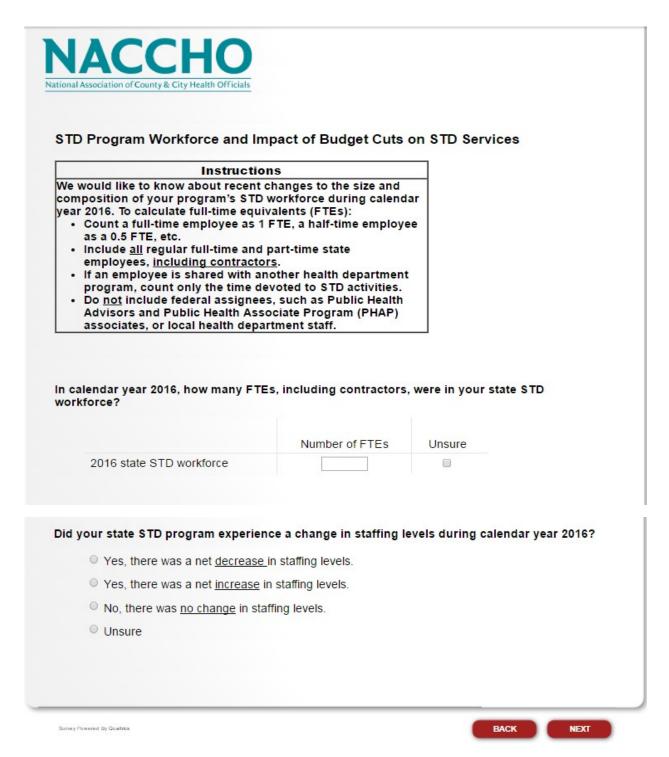
If respondent selects "Yes," proceed to the next question. If respondent selects "No" or "Unsure," skip to "What epidemiology and surveillance activities are currently conducted by your state program? Select all that apply."

es of providers did your state STD program visit or provide public health all that apply. anning providers nal health care providers providers s in federally-qualified health centers (FQHCs)
all that apply. anning providers nal health care providers providers
nal health care providers providers
providers
in federally qualified health centers (FOHCs)
in lederally-qualified fleatiff certiers (FQFICs)
ractice providers
s in school-based clinics
s in emergency departments or urgent care
ease specify:

If respondent selects "Private practice provides," please proceed to the next question. If respondent does not select this option, skip to "What epidemiology and surveillance activities are currently conducted by your state program? Select all that apply."







If respondent selects "Yes, there was a net <u>decrease</u> in staffing levels," or "Yes, there was a net <u>increase</u> in staffing levels," proceed to the next question. Respondents who select "Yes, there was a net <u>decrease</u> in staffing levels" will also answer "Please indicate any staffing categories in which FTEs, including contractors, decreased in calendar year 2016. Select all that apply," while respondents who select "Yes, there was a net <u>increase</u> in staffing levels" will skip this question. If respondent selects "No, there was <u>no change</u> in staffing levels" or "Unsure," skip to "What percentage of your state health department's current STD workforce are DIS/CDI?"

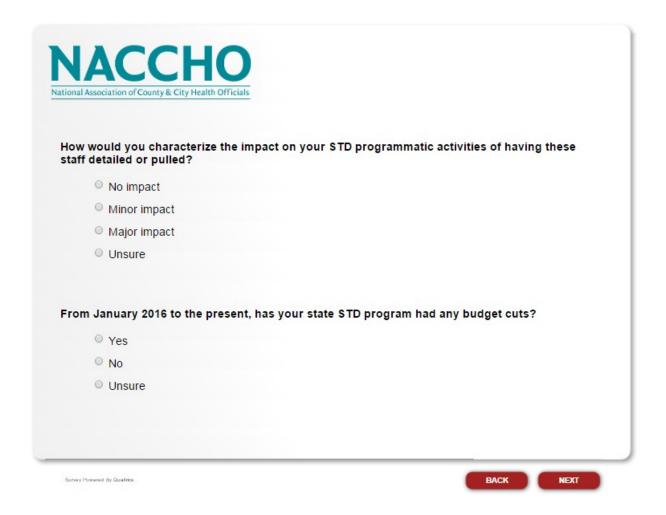
se provide t	he number of FTEs gained or lost.
	FTEs gained or lost
	any staffing categories in which FTEs, including contractors, decreased in 16. Select all that apply.
DIS/CDI	
Clinician	(MD or nursing)
Epidemi	ologist
☐ IT staff	
Program	n manager
Non-mai	nagerial administrative staff (i.e., administrative and clinical support staff)
□ Health e	ducator
Commun	nity health worker/patient navigator
Other, p	lease specify:
□ Unsure	

If respondent selects "DIS/CDI," proceed to the next question. If respondent does not select this option, skip to "What percentage of your state health department's current STD workforce are DIS/CDI?"

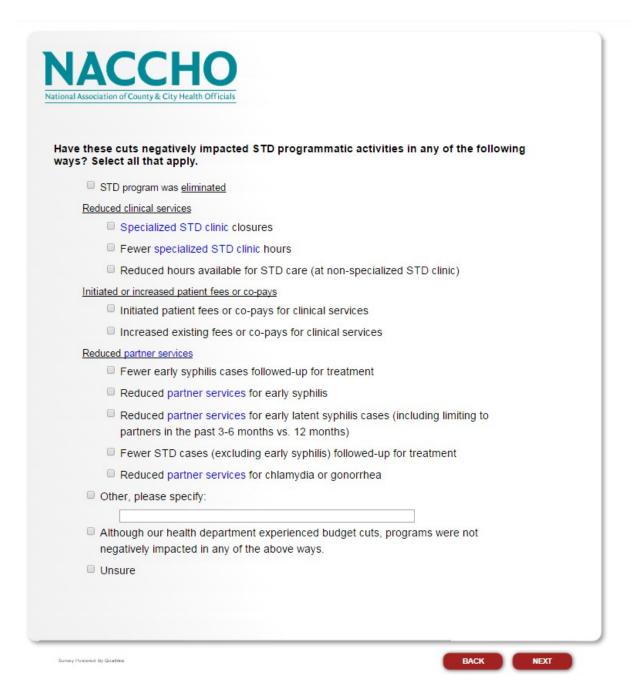
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w many DIS/CDI FTEs were lost	in calendar year 2016?		
	Number	Unsure	
DIS/CDI FTEs lost			

hat percentage of your state health depart			
· color · color color · color			
	Percent	Unsure	
Percentage of state STD workforce that are DIS/CDI			
ercentage of FTEs who were health departn		of the 2016 calendar year by to I service) and contractors (no Unsure	
ercentage of FTE's who were health departnealth department employees). Health department staff	ment staff (civil	service) and contractors (no	
ercentage of FTEs who were health departmealth department employees).	ment staff (civil	Service) and contractors (no	
ercentage of FTEs who were health department ealth department employees). Health department staff Contractors uring calendar year 2016, were any of your TD-related activities (e.g., to provide surge dverse events, or other public health emerg	Percent state's STD wo capacity for no	Unsure Orkforce detailed or pulled for on-STD outbreak responses,	n-
ercentage of FTEs who were health department ealth department employees). Health department staff Contractors uring calendar year 2016, were any of your TD-related activities (e.g., to provide surge	Percent state's STD wo capacity for no	Unsure Orkforce detailed or pulled for on-STD outbreak responses,	n-

If respondent selects "Yes" for "During calendar year 2016, were any of your state's STD workforce detailed or pulled for non-STD-related activities (e.g., to provide surge capacity for non-STD outbreak responses, adverse events, or other public health emergencies like Zika)?" proceed to the next question. If respondent selects "No" or "Unsure," skip to "From January 2016 to the present, has your state STD program had any budget cuts?"



If respondent selects "Yes" to "From January 2016 to the present, has your state STD program had any budget cuts?" proceed to the next question. If respondent selects "No" or "Unsure," proceed to "Please describe your state STD program's greatest success in 2016. If possible, please include the impact of this success, such as impact on STD rates/cases or the impact on quality of STD services in your state."



If respondent selects "STD program was <u>eliminated</u>," skip to "Before submitting your responses, is there anything else you would like to share?" If respondent selects "Specialized STD clinic closures," proceed to the next question. If respondent selects any option other than these two, skip to "How did you determine which programmatic activities to cut? Select all that apply."

many specialized orb clinics in your state	te closed from January	2016 to present?
	Number	Unsure
Number of specialized STD clinics		
Cuts were designed to preserve clinical s	services to the greatest ex	ktent possible
	or the same greatest of	
Cuts were made to contracts		
Cuts were made to contracts		

