

Supporting the Delivery of Quality STD Services: A NACCHO Project to Facilitate Implementation of CDC's *Recommendations for Providing Quality STD Clinical Services*



Project Overview

The National Association of County and City Health Officials (NACCHO), with funding from the Centers for Disease Control and Prevention's (CDC) Division of STD Prevention, initiated a project in October 2018 to support the use of CDC's *Recommendations for Providing Quality STD Clinical Services*, which are expected to be publicly available in 2020. The *Recommendations* augment CDC's *Sexually Transmitted Infection Treatment Guidelines* and are intended to be used as a tool to guide sexually transmitted disease clinical practice standards. The *Recommendations* outline which STD-related clinical services should optimally be available in primary care and specialized STD care settings, and when STD-related conditions should be managed through consultation with or referral to a specialist.

This project aims to facilitate implementation of the *Recommendations* by:

- Developing tools and resources to aid in the assessment of clinical services provided by a healthcare setting and guide decision-making regarding additional service provision to address identified gaps
- Providing technical assistance for the use of the tools and resources

This project will result in an implementation guide for the *Recommendations*. The guidance is intended to help healthcare facilities and providers in primary care and specialized STD care settings offer STD services that are appropriate for both their clinical setting and for the individuals seeking care. NACCHO is working with an advisory group of STD practitioners, clinic administrators, and other experts in the field, including CDC staff, to ensure these resources meet the needs of the intended audience. There will be piloting with technical assistance to test the developed materials. That process will result in case studies to inform use by other jurisdictions.



What to Expect: An Implementation Guide

The primary audience for the implementation guide is local health department clinics offering STD services; however, it is expected that other healthcare settings will also benefit from these materials, and future resources may be developed or tailored for those healthcare settings. The implementation guide will consist of three key components designed to facilitate clinical settings moving through the process of assessing the services available in their facility and determining whether additional services can or should be made available.

1. **Assessing Clinical Service Availability by Facility.** The first step in the process will be assessing the services provided by the healthcare setting. Facilities will use an assessment tool to review and document which of the services outlined in the *Recommendations* are or are not currently provided by the facility and reasons why services are not provided, such as not having sufficient resources to offer the service or not serving a patient population that requires the service.
2. **Service Provision Decision-making for Building or Enhancing STD Clinical Service Delivery.** The second step in the process will be to review the

findings of the assessment and determine whether additional services can or should be made available. For those services that a facility is not currently providing, they will use the decision-making guidance to think through (a) key considerations regarding the need, capacity, and feasibility of providing the service within their healthcare setting and for their patient population and (b) discussion questions and decision points for determining and prioritizing what additional services can and should be made available. Key considerations and discussion questions will address both internal and external factors, such as funding required for new equipment or additional staff, availability of the service elsewhere in the community with a strong referral process from the facility to that service, and organizational support.

3. **Implementing Next Steps for the Provision of Quality STD Clinical Services.** The final phase in the process will be implementing next steps, if indicated, to pursue the addition of services that have been identified as not available and determined to be critical to providing quality STD clinical services for the individuals and communities served by the clinic. The guidance will include recommendations for how to act on next steps and provide a list of resources to support the addition or enhancement of STD services provided.

Advisory Group Members

Advisory group members contribute content expertise and practical experience to project activities. The members represent a diversity of clinical settings, geographic locations, and jurisdiction sizes.

- **Melanie Ackerman**, Laboratory Supervisor, Polk County Health Department, Iowa
- **Jennifer K. Brumfield**, Director- Clinical Operations, Express Personal Health, University of Mississippi Medical Center
- **Janice Cunningham**, Nursing Supervisor- Reproductive Health, Worchester County Health Department, Maryland
- **Bruce ("Bryce") W. Furness**, CDC Medical Epidemiologist, HIV/AIDS, Hepatitis, STD & TB Administration, Washington, DC

- **Edwin Hernandez**, Clinical Services Director, Florida Department of Health in Manatee County, Florida
- **Rachel Howard**, Epidemiologist, STD Program, Maricopa County Department of Health, Arizona
- **Carmin Hutch**, Clinic Supervisor, Polk County Health Department, Iowa
- **Sheryl Malone-Thomas**, Chief Nurse, Division of Disease Prevention and Control, Houston Health Department, Texas
- **Tom Mickey**, STD Program Manager, Maricopa County Department of Public Health, Arizona
- **Lynnda Parker**, Clinical Administrator, Oklahoma City-County Health Department, Oklahoma
- **Shobita Rajagopalan**, STD Clinical Chief, Los Angeles County Department of Public Health, California
- **Stephanie Taylor**, STD/HIV Program Medical Director, Louisiana Department of Public Health and Clinic Administrator and Medical Director, Louisiana State University-CrescentCare Sexual Health Center, Louisiana
- **Michelle Thorne**, Choices Clinic Coordinator, Calhoun County Public Health Department, Michigan
- **Stacey Upshaw**, Assistant Nursing Director, South Central Georgia Health District (5-1), Georgia Department of Health, Georgia
- **Adam Visconti**, Chief Medical Officer, HIV/AIDS, Hepatitis, STD, and TB Administration, Washington, DC
- **Kate Washburn**, previously Director of Strategic Initiatives and Implementation, Bureau of Sexually Transmitted Infections, New York City Department of Health (currently, Senior Director, Public Health Outcomes Improvement, Planned Parenthood Federation of America), New York

Additionally, Denise Smith, an independent consultant and former Director of Disease Control for the Kern County Department of Public Health in California, was contracted by NACCHO to support the development of the implementation guide.

For more information or questions about this project, contact Rebekah Horowitz at rhorowitz@naccho.org.



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The mission of the National Association of County and City Health Officials (NACCHO) is to improve the health of communities by strengthening and advocating for local health departments.

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