

Action Dates:

Approval: _____

Revisions: _____

Effective: _____

Next Review: _____

Policy Title: Community Outreach for STD Surveillance and Education

Purpose: To establish best practice guidelines for community outreach to healthcare providers and constituents.

Policy: The local health department will establish and maintain active communication with local healthcare providers and community constituents regarding STD surveillance and education.

Procedural Guidelines

- STD prevention programs should have a written protocol that outlines the following:
 - health department procedures for interacting with community providers
 - provider responsibilities and procedures for case reporting to the health department
 - data review and utilization process
 - health department activities involving collaboration with community stakeholders, i.e. community-based organizations, hospitals, etc.
 - health department outreach activities for community education, i.e. presentations, health fairs, community screening, etc.
- STD prevention programs should facilitate provider-based reporting by making available **multiple methods** for receiving STD case reports including dedicated phone numbers and secure FAX machines.
- STD prevention programs should:
 - Identify and monitor via NC EDSS for those providers who test for STDs, report significant STD morbidity and/or serve high-risk populations.
 - Develop strategies to interact and collaborate with identified providers of STD services in the community.
 - Regularly communicate with community providers of STD services in order to provide information about:
 - reporting requirements
 - reportable STDs
 - the importance of reporting and the impact on public health prevention efforts
 - STD testing and treatment guidelines
 - Routinely provide feedback via statistical reports to providers

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- Outreach to community providers may include:
 - STD needs assessment via survey or data review
 - periodic office visits and direct interaction to enhance communication and visibility
 - presentations at hospital in-services, medical conferences, grand rounds, etc.
 - sponsorship and invitation to inservices on communicable diseases, such as incidence and prevalence of diseases in the community
 - distribution of monthly newsletters, community alerts, etc.

- Outreach for community education should:
 - utilize surveillance data for planning
 - identify and target high risk populations or high morbidity areas
 - identify and include other community partners in the planning process, i.e. CBO, lay representatives, etc.