Routinizing Sexual Health in Primary Care

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Approach to the Adolescent
Key Strategies

- Assess developmental level
- Discuss confidentiality with adolescent/parent
- Appropriately ensure confidentiality, time alone
- Brief risk assessment at most visits
- STI screening annually if sexually active
- Systems for follow-up of confidential results
TOOLS TO ROUTINIZING SEXUAL HEALTH IN 1° CARE
CONFIDENTIALITY
COMMUNICATION
[Your Office Name and Logo]

Drs. [your provider name(s)] provide routine health care for teens and young adults. We want to work with you and your family to meet all of your health care needs: physical, mental and emotional.

Young adults need specialized medical care and a doctor with whom they can discuss anything, from acute and chronic illnesses, health maintenance and preventive care, sexual concerns and emotional problems. Their parents also need special guidance and support through these years. Our practice goal is to provide comprehensive health care to teens and their families.

As teens begin to develop into adults and take more responsibility for their lives, we ask for more input from them about their health. As part of comprehensive health care, it is our practice to ask parents to wait outside for part of the interview and encourage the adolescent to discuss his or her own view of their problem. Talking to teens without the parent also gives teens a chance to ask questions or give information they may feel self-conscious about. Teens often have questions or concerns that they may feel embarrassed to talk about in front of their parents. It is important to give them enough freedom to grow but not so much that they get involved in the wrong activities.

Many teenagers and young adults experiment with high-risk behaviors that can lead to serious problems.

In New York State high schools (excluding NY City):

- 36% have tried cigarettes
- 69% drank alcohol
- 37% have tried marijuana
- 44% have had sex

Most teenagers will hide their behavior so parents are not the first to find out. Our goal is to help identify these problems before they become too big and to help prevent them. To do this we must give them a reason to trust us.

New York State law requires that some services are offered to teens privately. We ask parents to leave for part of the interview for confidentiality and to build trust. We also encourage the teen to discuss important issues with parents.

It is important to know that if they are doing anything to hurt themselves or others, or if someone is hurting them, we will be forced to break confidentiality.
OUR POLICY ON CONFIDENTIALITY

Our discussions with you are private. We hope that you feel free to talk openly with us about yourself and your health. Information is not shared with other people unless we are concerned that someone is in danger.
Emergency Medical Care
- Parental consent is not required in cases of emergency.
- This includes medical treatment and forensic examination following sexual assault.
  > Records of emergency treatment may be disclosed to a parent unless the provider determines that disclosure would harm the minor patient.
  > If the minor could have consented to the care on his or her own under the rules above, then the care must remain confidential.

Communication is Critical
To facilitate communication, providers should:
- Initiate conversations with adolescents about their right to confidential healthcare.
- Discuss if and how a minor’s parents will be involved in his or her care.
- Establish a trusting relationship with the patient and the parent, and discuss confidentiality with each individually.
- Encourage the adolescent to involve a parent when appropriate.

Billing/Payment/Record Keeping Can Compromise Confidentiality
To minimize the risk of involuntary disclosure, a provider can:
- Inform the minor if the billing process may compromise confidentiality.
- Ask the minor patient for alternative contact if he or she does not want to be contacted at home.
- Discuss insurance, billing, and alternative forms of payment with the minor (cash is the most confidential/fastest payment method).
- Educate the billing department about minors’ rights to confidentiality and be sensitive to the diagnosis and treatment listed on bills sent home.
- Consult with legal counsel before releasing any medical records that might result in harm to the minor patient.

PLEASE NOTE: This publication is intended as a guide and does not provide individual legal assistance. Please check with your legal counsel for site-specific clarification about confidentiality and disclosure issues, including any policies related to the HIPAA privacy rule. Be aware that laws related to any or all of the subjects addressed in this pamphlet may have been added, repealed, or amended since publication.

NEW YORK
Minors’ Access to Confidential Reproductive Healthcare

DEVELOPED BY:
Mount Sinai Adolescent Health Center
New York Civil Liberties Union (NYCLU) Reproductive Rights Project
Physicians for Reproductive Choice and Health (PRCH)

If you have further questions or want to order the booklet Teenagers, Health Care & the Law or other publications, call the NYCLU’s Reproductive Rights Project at 212-607-3300.

For Adolescent Health Services, contact the Mount Sinai Adolescent Health Center at 212-423-3000.

To order more cards or become a physician member of PRCH, call 646-366-1890 or visit www.prch.org.

2008 Physicians for Reproductive Choice and Health

April 2008

http://www.prch.org/new-york-st
New York State

TEEN'S HEALTH CARE BILL OF RIGHTS
BEHAVIOR SCREEN

STI risk assessment
Comprehensive HEADSSS

H: Home
E: Education/Employment/Eating
A: Activities
D: Drugs
S: Suicidality/Depression
S: Sexuality/Sexual Behavior
S: Safety
S: Spirituality
SSHADESS*
Strength Assessment Tool for Psychosocial Screening

- Strength or interests
- School
- Home
- Activities
- Drugs/substance use
- Emotions/depression
- Sexuality
- Safety

*Clark and Ginsburg, 1995*
CONFIDENTIAL

Health Survey for Adolescents

Everyone is faced with choices and situations that are complicated. The purpose of these questions is to give your doctor or nurse information to care for you. If you have any questions about these subjects, ask your doctor or nurse.

YOU DO NOT HAVE TO ANSWER THE QUESTIONS. If you choose not to fill it out, please read the questions anyway because your
Please circle your answer to each of the following questions:

1. How often do you use a helmet when you rollerblade, skateboard, bicycle, or ride a motorcycle, minibike or ATV?
   - Always
   - Sometimes
   - Rarely or never

2. How often do you wear a seat belt when you ride in a car, truck or van?
   - Always
   - Sometimes
   - Rarely or never

3. Are you having any problems in school?
   - Rarely or never
   - Sometimes
   - Always

   Circle all that apply... grades, fighting, missing school

4. Have you ever felt you had a problem with your weight?
   (underweight, overweight, anorexia, bulimia)
   - Rarely or never
   - Sometimes
   - Always

5. Did you ever smoke cigarettes (even if you did not inhale) or chew tobacco?
   - Never
   - Once or twice
   - 3 or more times

6. Did you ever drink any alcohol? (beer, wine, liquor, other)
   - Never
   - Once or twice
   - 3 or more times

7. Did you ever use drugs?
   - Never
   - Once or twice
   - 3 or more times

   Circle all that apply... marijuana, cocaine, crack, heroin, acid, speed, ecstasy, roofies, sniffed inhalants, steroids, hormones, prescription drugs not ordered for you, or others
Please circle your answer to each of the following questions:

11. Have you had sex?

   No                             Yes

   Circle all that apply... vaginal sex   anal sex   oral sex

12. If you have had sex, how often do you use condoms (rubbers)?

   Never had sex   Always   Sometimes   Rarely or never

13. Were you ever forced to have sex you did not want, or has someone touched you in a way that made you feel uncomfortable? (touching of breasts, buttocks, or genitals)

   Never   Not sure   Yes
The Five P's

- Partners
- Prevention of Pregnancy
- Protection from STDs
- Practices
- Past History of STDs
TOOLS TO IMPROVE OFFICE SYSTEMS
TIPS FOR PROTECTING YOUTH CONFIDENTIALITY

While adolescent confidentiality laws provide us with formal (although often confusing) guidelines for ensuring confidentiality of our teen patients, it is frequently the small stuff that can seriously compromise an adolescent patient’s confidence in his/her provider. The following is a list of tips—some not—for preserving patient privacy and minimizing embarrassment in a clinical setting.

1. Do not discuss patient information in elevators, hallways, or waiting rooms. If an adolescent patient overhears this conversation, he or she may assume that you will also discuss his or her case in an open environment.

2. Do not collect an adolescent patient’s medical history or reason for visit in an open area. It will be difficult for a teenager to discuss his or her personal issues honestly if he/she thinks other people can overhear.

3. When an adolescent patient gives you a contact phone number, make sure that you can leave messages. If you can not, ask for an alternative number at which you can leave messages if necessary.

4. Likewise, do not send mail (such as appointment reminders and bills) home unless you have discussed whether or not the patient feels comfortable receiving mail from you at his or her home. If he or she does not wish to receive mail at home, try to work out an arrangement whereby mail is picked up at the clinic. TIP: Some clinics have check boxes indicating a teen’s preference regarding mail and phone calls. Other clinics clarify what kind of message might be ok to leave at a teen’s contact number (e.g., “Tina called”)

5. When discussing anything sensitive, such as sexual history, weight, or substance use, make sure all doors are closed. A patient in the waiting room may overhear a discussion and thus be more reluctant to share information when he or she sees the health care provider.

6. Think about how your clinic administers paperwork to patients. Are you asking clients to fill out forms such that other people might be able to read their answers? Give out a clipboard with the forms; also make sure that there is enough room in which to complete forms with some degree of privacy.

7. Make sure that any clinic literature your clinic or practice distributes is small enough to fit into purse or wallet. Asking a teenager to leave with bright, large brochures on a sensitive subject, such as gonorrhea, will cause more embarrassment than anything else. These types of materials should be offered to teens in private.
MAKING THE PARENT FEEL COMFORTABLE LEAVING THE ROOM
Or, how do I provide adolescent sensitive services when a parent or a caregiver is present?

Attempting to provide confidential services can cause great discomfort for the youth, parents, and providers if it is not handled in a sensitive manner. The following are recommendations that can facilitate a smooth transition from the parent accompanied visit to the confidential adolescent visit.

ROADMAP

Lay out course of the visit:
- For example, “We will spend some time talking together about Joseph’s health history and any concerns that you or he might have, and then I will also spend some time alone with Joseph. At the end of the visit, we will all meet together again to clarify any tests, treatments or follow-up plans.”

Explain your office/clinic policy regarding adolescent visits:
- Review your policy verbally early in the interaction with the youth and parent.
- Acknowledge that the youth is a minor and therefore has specific legal rights related to consent and confidentiality.
- Introduce the concept of fostering adolescent self-responsibility and self-reliance.
- Reinforce that this policy applies to all adolescents in your practice or clinic (in other words, this is not specific to YOUR child).

Validate the parental role in their child’s health and well-being.

Elicit any specific questions or concerns from the parent.

Direct questions and discussion to the youth while attending to and validating parental input.

REMOVE
- Invite the parents to have a seat in the waiting area, assuring them that you will call them prior to closing the visit.

REVISIT
- Once the parent is out of the room, revisit issues of consent and confidentiality with the youth, including situations when confidentiality has to be breached (suicidality, abuse).
- Revisit areas of parental concern with the youth and obtain the youth’s perspective.
- Conduct the psycho-social interview and physical exam (ascertain whether youth desires parent’s presence during PE and accommodate youth’s preference.)
Bright Futures (3rd ed; 4th ed in development)
WHY SCREEN FOR CHLAMYDIA?
An Implementation Guide for Healthcare Providers

Early identification and treatment:
Reduces pelvic inflammatory disease (PID)
Reduces infertility, ectopic pregnancy, and chronic pelvic pain
Prevents complications in newborns
Contents

Introduction to Chlamydia Screening .............................................. 1
Testing for Chlamydial Infection .................................................. 3
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Taking a Sexual History ............................................................. 6
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Putting Screening into Practice .................................................. 9
Resources ................................................................................. 10

Additional Information about STDs and Sexual Health ............... 10

Access the resources in this guide at
http://ncc.prevent.org/info/why-screen-linked-resources
Teen Friendly Office Tips

These office practices and suggestions can be adapted to any outpatient medical setting. Choose the ones that work in your office.

Normalizing screening: “We routinely offer test our patients to make sure we are not missing a problem.”

Include teen-oriented magazines and posters

Offer materials in a private location where teens will feel comfortable taking them

Develop and post a policy of confidentiality

Make sure materials will fit into a pocket or purse

Make free condoms available

Include teen-oriented magazines and posters

Partner Notification

Partner must seek health care

No sexual contact until seven days after treatment begins

Establish practice-wide policy of time with adolescent without parent present

Encourage teens to share information with parent or trusted adult

Why Screen for Chlamydia?
DISSEMINATING TOOLS TO COMMUNITY PROVIDERS

Academic detailing
Academic Detailing: Background

- Based on pharmaceutical sales representatives
  - “drug detailers”
  - provided detailed information about their products
  - visit physicians in offices to deliver marketing materials about the products they promote.
  - bring educational materials, food, and small pharma tokens (i.e., pens)
Academic Detailing

- Approach of industry detailers with the evidence-based, noncommercial information of academia
- Office-based informational sessions
  - Information, tools
  - Food
- BCBS of WNY provided list of highest volume providers for adolescent care
Academic detailing: Outcomes

- Providers had tools and resources to provide adolescent sexual health care
- Offices unable to implement
  - How to get started?
  - Challenges with office flow
NEXT STEPS: QUALITY IMPROVEMENT PROJECT

Enhanced Chlamydia Screening in the Adolescent Medical Home
The Medical Home

- A **patient-centered medical home** is an approach to providing comprehensive 1º care
- AAP developed medical home model for all children and youth to deliver 1º care that is
  - accessible,
  - continuous,
  - comprehensive,
  - family-centered
  - coordinated,
  - compassionate,
  - culturally effective
QUESTION....

Could PCPs develop an *adolescent* medical home to provide comprehensive, *confidential* adolescent preventive health care services?
Methods

- **Target Population**: adolescents presenting for preventive health care visits aged 13-21 years

- **Project Setting**: 3 Western New York State private pediatric offices
  - 1 large, suburban office (6 MDs, 3 NPs)
  - 1 mid-size, suburban-rural office (4 MDs)
  - 1 small, urban office (2 MDs)

- **Partners**:
  - Cicatelli Associates International
  - Physicians for Reproductive Health
Key Project Components:

1) Tools
   • Brief confidential questionnaire
   • Letter to parents Health information brochures;
   • Lists of local mental and substance abuse providers;
   • Teen/parent health web sites in brochure and offices’ web sites

2) Chlamydia screening data

3) Consultation on patient flow through office
EXAMPLES OF TOOLS
<table>
<thead>
<tr>
<th>Task</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>I have reviewed the above info. with my patient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided info. on Sexual Health</td>
<td></td>
<td></td>
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<tr>
<td>Counseled about contraception</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ordered HIV test</td>
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<tr>
<td>Ordered Chlamydia test</td>
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<tr>
<td>I was unable to order Chlamydia test because:</td>
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<tr>
<td>Confidentiality concerns</td>
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<tr>
<td>Patient refused</td>
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<tr>
<td>No insurance</td>
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<tr>
<td>Other ________</td>
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<tr>
<td>Provided info. on Mental Health</td>
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<tr>
<td>Provided Mental Health referral</td>
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<td></td>
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<tr>
<td>Provided info. on Substance Abuse</td>
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<td></td>
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<tr>
<td>Provided Substance Abuse Tx referral</td>
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<td></td>
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<tr>
<td>Provided info. on eating disorders</td>
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<td></td>
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<tr>
<td>Provided eating disorders referral</td>
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Adolescent Healthcare Information Resources

Websites for Health Information

Advocates for Youth: http://www.advocatesforyouth.org/
Advocates for Youth envision a society that views sexuality as normal and healthy and treats young people as a valuable resource.

The American Social Health Association: http://www.associa.org
This is where you will find the facts, the support, and the resources to answer your questions, find referrals, join support groups, and get access to in-depth information about sexually transmitted infections (STIs).

Campaign for Our Children: http://www.coc.org
This website seeks to educate parents and guardians about teen risk-taking behaviors, including sexual activity. Provides sexuality education, tips about communication, resources and links.

The Center for Young Women's Health (CYWH): http://www.youngwomenhealth.org/
CYWH is a collaboration at Children's Hospital Boston. The Center is an educational entity that exists to provide teen girls and young women with carefully researched health information.

Similar site for males: http://youngmenhealthsite.org/

Children Now: http://www.talkingwithkids.org
Provides information for parents/caregivers on how to talk to their children about sexuality, health, drugs/alcohol, the media, etc.

Columbia University's Health Promotion Program "Go Ask Alice" website for adolescents and young adults: http://www.goaskalice.columbia.edu/
A health Q&A Internet resource. It provides readers with information and a range of thoughtful perspectives so that they can make responsible decisions concerning their health and well-being.

Rutgers, the State University of New Jersey, teen sexual health: http://www.sexsite.org
Information, FAQs, forums, videos, and daily live teen chats about sexual health.

MTV collaboration with Kaiser Family Foundation: http://www.itsyoursexlife.com/
Here you will find reliable information about decision making, how to talk openly with your partner and how to stay healthy by using protection and getting tested regularly for HIV and other STDs. Also includes entertainment and special programming.

Planned Parenthood Teens: http://www.teenvibe.com/
Provides access to the complete array of sexual and reproductive health information, services, and advocacy.

Nemours teen health: http://teenhealth.org/
A safe, private place for teens who need honest, accurate, doctor-approved information and advice about health, emotions, and life. Also helps parents keep their kids healthier through education.

A U.S. charity dedicated to protecting all Internet users, especially children, from cybercrime and abuse, such as bullying.

Information for parents of teens and young adults as well as all the pediatric age groups.
For Adolescents and Their Parents

We are committed to caring for children throughout their teenage years. We hope the information posted here will assist teens and parents address some of the issues that make this a challenging time. We also want families to understand that certain aspects of their teenager's medical concerns require confidentiality.

Adolescents need yearly check ups to ensure they are growing and maturing in a healthy way, current on important immunizations, and making safe and smart lifestyle choices.
Confidentiality Statement

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- 43% have had sex

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More Information

- Websites for Adolescent Patients and their Parents/Guardians
- Confidentiality Statement
Websites for Adolescent Patients and their Parents/Guardians

The American Social Health Association website offers parents and teens information about sexual health: [http://www.iwannaknow.org](http://www.iwannaknow.org)

The Center for Young Women’s Health website provides health information for teen girls around the world: [http://www.youngwomenshealth.org/](http://www.youngwomenshealth.org/)

Young Men’s Health is a similar website for males featuring state-of-the-art health information: [http://youngmenshealthsite.org/](http://youngmenshealthsite.org/)

The Children Now website is a resource for parents to help in talking with kids about tough issues: [http://www.talkingwithkids.org/](http://www.talkingwithkids.org/)


ToonsHealth is a comprehensive website for teens and parents about all aspects of health: [http://teenshealth.org/teen/](http://teenshealth.org/teen/)

Healthy Children is the American Academy of Pediatrics website for parents: [http://www.healthychildren.org/](http://www.healthychildren.org/)

More Information

- [Websites for Adolescent Patients and their Parents/Guardians](#)
- [Confidentiality Statement](#)

The information contained herein is designed for educational purposes only and is not intended to serve as medical advice. The information provided on this site should not be used for diagnosing or treating a health problem or disease. It is not a substitute for professional care. If your child has or you suspect your child may have a health problem, you should consult your physician or contact our office at (716) 332-4472.
3 Month office visit

- Provide feedback on
  - patient population risk profile
  - sexual health and contraception counseling
  - chlamydia screening, HIV testing

- Discuss possible office flow changes to enhance routine chlamydia screening

- Additional adolescent STIs and contraceptive management training offered to interested staff
6 Month Office Visit

• Provide feedback on
  • patient population risk profile
  • sexual health and contraception counseling
  • chlamydia screening, HIV testing

• Discuss success of implemented office flow changes and opportunities for improvement

• Feedback on project
RESULTS
Chlamydia Screening Provided at Study Weeks 10 and 20

Chlamydia test ordered among sexually experienced ♀ adolescents

<table>
<thead>
<tr>
<th></th>
<th>Small Urban Office</th>
<th>Large Suburban Office</th>
<th>Mid-sized Suburban/rural Office</th>
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<td>Week 10</td>
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<td>N = 21</td>
<td>N = 26</td>
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<td>69%</td>
<td>42%</td>
<td>50%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0%</td>
<td>8%</td>
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Resources

- **NCC:**
  http://ncc.prevent.org/info/healthcare-providers/chlamydia-std-resources

- **SAHM:**
  http://www2.aap.org/sections/adolescenthealth/default.cfm

- **AAP:**
  http://www2.aap.org/sections/adolescenthealth/default.cfm

- **Physicians for Reproductive Health:**
  http://www.prch.org/

- **The Centers for Disease Control and Prevention, Division of STD Prevention**
  www.cdc.gov/std
Summary

- Tools and resources available to help providers deliver confidential sexual health care
- Important to disclose office confidentiality policy and expectations for visit
- Dissemination strategies include academic detailing and QI project
- Health plans can play role in helping offices to make systems changes