SEXUAL & REPRODUCTIVE HEALTH RESOURCES FOR SCHOOL-BASED HEALTH CENTERS





GOALS

- Explain the importance of patient-delivered partner therapy as a partner management strategy.
- Understand how PDPT can be applied in a schoolbased health setting.
- Identify resources to support adolescent sexual health and caregiver-child communication.



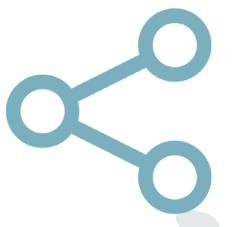


For audio, dial (415) 655-0003

Access code 665 928 880



The webinar is being recorded



Supporting materials will be shared





Presenter Kala Heekin

Sexual + Reproductive Health Program Associate, Essential Access Health



Moderator Amy Ranger

Director of Programs, California School-Based Health Alliance



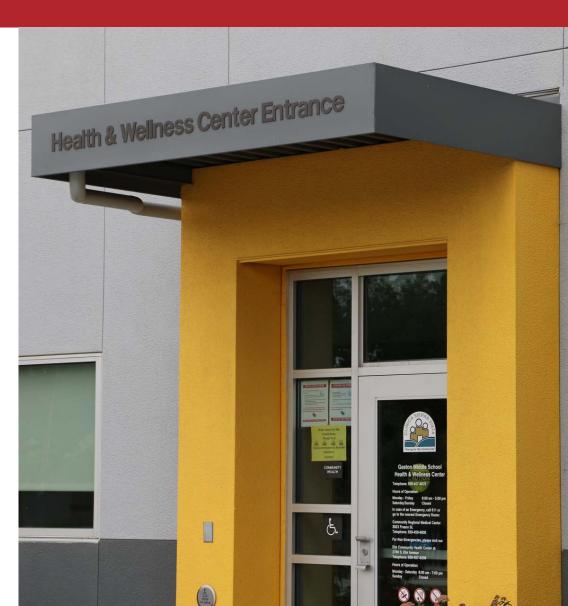


Putting Health Care in Schools

The California School-Based Health Alliance is the statewide non-profit organization dedicated to improving the health & academic success of children & youth by advancing health services in schools.

Learn more: schoolhealthcenters.org





Become a member, get exclusive benefits

- Conference registration discount
- Tools & resources
- Technical assistance

Sign up today: bit.ly/CSHAmembership



Essential Access Health

- Champions and promotes quality sexual + reproductive health care for all
- Partners with the CA STD Control Branch, LA County Division of HIV/STD Programs, and Title X Family Planning Program
- Implements STD prevention best practices statewide
- Administers free PDPT Distribution Program in California
- Offers digital resources for adolescents + parents



Room Warm-Up

I am		
Where I work, people say_		about STDs.
	OR	
I manage STDs through		



Programs Covered Today

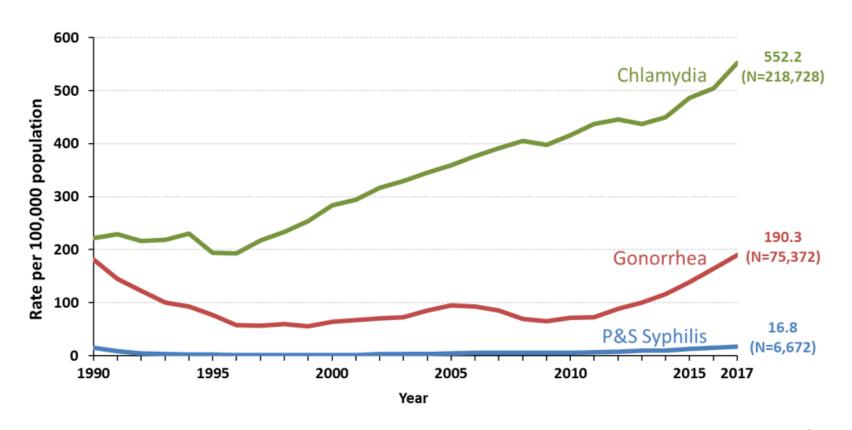
- Chlamydia + Gonorrhea Patient-Delivered Partner Therapy Distribution Program
- TeenSource.org
- Condom Access Project
- Hookup
- TalkWithYourKids.org



STDs + Reinfection



Chlamydia, Gonorrhea, and Primary & Secondary Syphilis: California Incidence Rates, 1990–2017

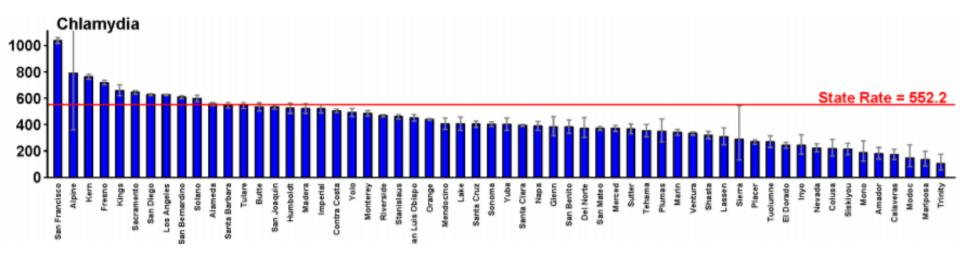






Chlamydia (CT) Ranking of County Incidence Rates, California, 2017

(with 95% Confidence Intervals*)



Counties with Highest Rates of CT

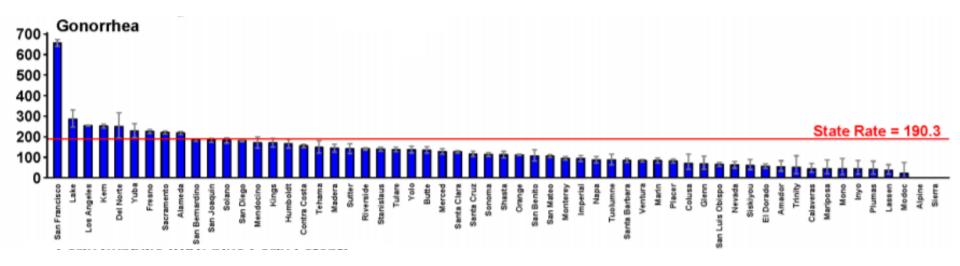
- 1. San Francisco
- 2. Alpine
- 3. Kern
- 4. Fresno
- 5. Kings

- 6. Sacramento
- 7. San Diego
- 8. Los Angeles
- 9. San Bernardino
- 10. Solano



Gonorrhea (GC) Ranking of County Incidence Rates, California, 2017

(with 95% Confidence Intervals*)



Counties with Highest Rates of GC

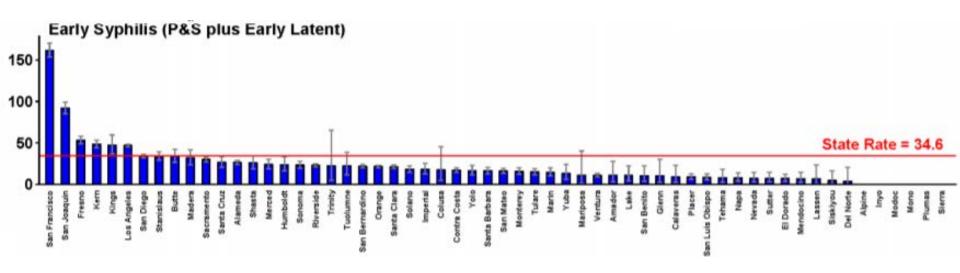
- 1. San Francisco
- 2. Lake
- 3. Los Angeles
- 4. Kern
- 5. Del Norte

- 6. Yuba
- 7. Fresno
- 8. Sacramento
- 9. Alameda
- 10. San Bernardino



Early Syphilis Ranking of County Incidence Rates, California, 2017

(with 95% Confidence Intervals*)



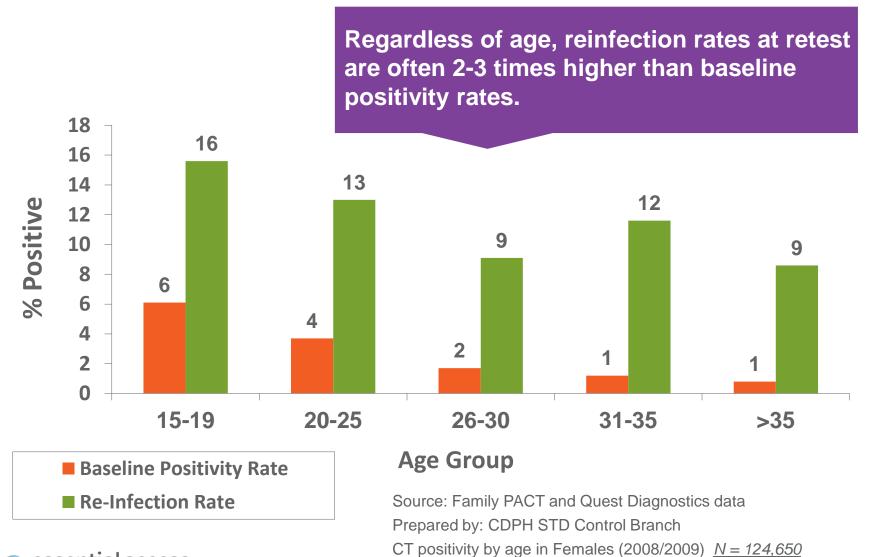
Counties with Highest Rates of Early Syphilis

- 1. San Francisco
- 2. San Joaquin
- 3. Fresno
- 4. Kern
- 5. Kings

- 6. Los Angeles
- 7. San Diego
- 8. Stanislaus
- 9. Butte
- 10. Madera



Chlamydia Reinfection is Common





Chlamydia Reinfection is Dangerous

Highly associated with increased risk for adverse reproductive health issues.

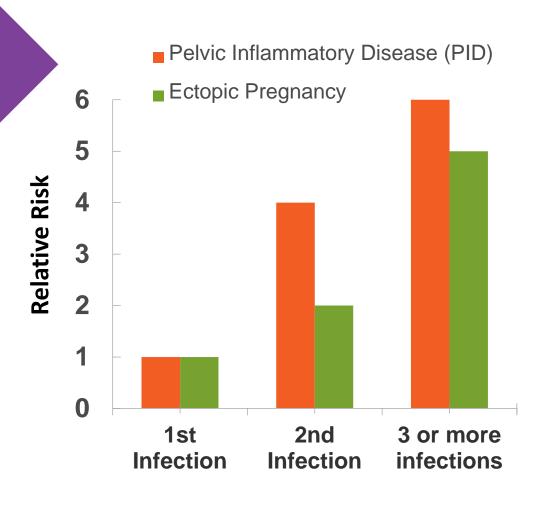
2nd infection:

- 4x risk of PID
- 2x risk of ectopic pregnancy

3+ infections:

- 6x risk of PID
- 5x risk of ectopic pregnancy





Prepared by: CDPH STD Control Branch
Hillis SD, et al. (1997). Am J Obstet Gynecol 176(1 Pt 1): 103-7

Partner Management



How does your clinic treat partners of STD-positive patients?



Partner Management Recommendations

- Treat all sexual partners from 2 months prior to the positive test
- Common partner treatment methods:
 - Patient brings partner to clinic (BYOP)
 - Expedited partner therapy (EPT)
 - Patient-delivered partner therapy (PDPT)
 - Patient refers partner for testing
 - Provider referral
 - Local health department referral
 - Anonymous partner notification

CDPH STD Control Branch. Best Practices for the Prevention and Early Detection of Repeat Chlamydial and Gonococcal Infections: Effective Partner Treatment and Patient Retesting Strategies for Implementation in California Health Care Settings. February 2016.

https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Best_Practices_for_Preventing_RepeatCT_Inf.pdf



Patient-Delivered Partner Therapy (PDPT)



How does PDPT work?

Medical Provider

- Treats the patient
- •Gives the patient medication or a prescription + educational materials for sex partners

Index Patient

 Delivers medication or prescription + educational materials to sex partners

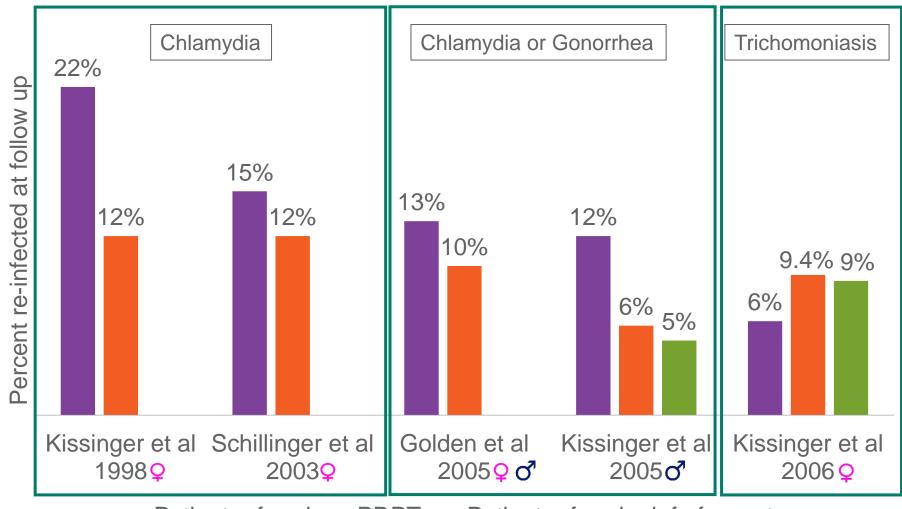
Sex Partners

 Take the medication and completes treatment for CT and/or GC



PDPT Effectiveness in Randomized Controlled Trials

Reduces reinfection with chlamydia & gonorrhea, but not trichomonas





■ Patient referral ■ PDPT ■ Patient referral + info for partner

First-Line Treatment vs. PDPT

First-Line Treatment

Patient-Delivered Partner Therapy

Chlamydia

azithromycin 1 gm orally once

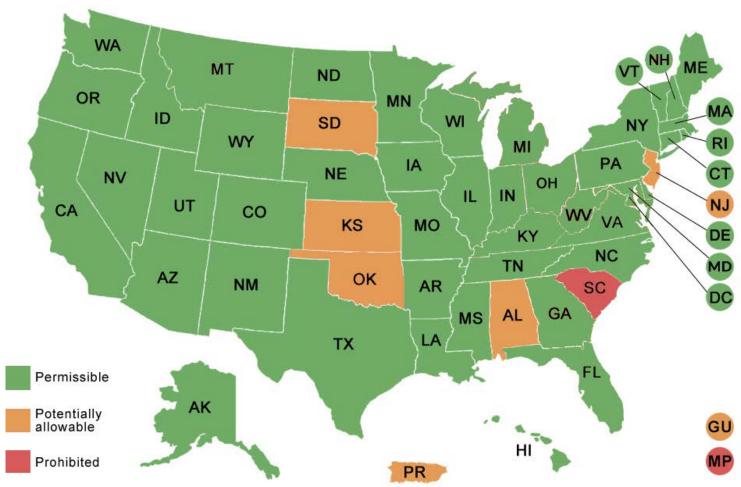
azithromycin 1 gm orally once

Gonorrhea

ceftriaxone 250 mg IM once + azithromycin 1 gm orally once cefixime 400 mg orally once + azithromycin 1 gm orally once



Legal Status of EPT in U.S.







PDPT + California Law

- PDPT is allowable in California
- Exception to Medical Practice Act
- Health and Safety Code §120582
- Chlamydia SB 648 (Ortiz,
 Chapter 835, Statues of 2000)
- Gonorrhea and other STDs AB 228 (Leno, Chapter 771, Statutes of 2006)







Patient-Delivered Partner
Therapy (PDPT) for
Chlamydia, Gonorrhea, and
Trichomoniasis:
Guidance for Medical
Providers in California

These guidelines were developed by the California Department of Public Health Sexually Transmitted Diseases (STD) Control Branch in collaboration with the California STD Controllers Association, and the California Prevention Training Center (CAPTC)

January 2016



https://www.cdph.ca.gov/Programs/CID/DCDC/C DPH%20Document%20Library/ClinicalGuidelines CA-STD-PDPT-Guidelines.pdf

Medicolegal Considerations

- Provider Liability
 - Liability for PDPT is no different from the liability of any other action taken by a healthcare provider
 - PDPT is evidence-based and supported by national and state guidelines
- PDPT is Supported By
 - American Medical Association
 - American Academy of Family Physicians
 - American College of Obstetricians and Gynecologists
 - American Society for Adolescent Medicine



Which Partners Should Get PDPT?

- All sex partners within last 2 months of index patient's diagnosis
- Most recent sex partner(s) if no sex partners within last 2 months
- No limit to number of doses that can be distributed in the case of multiple sex partners
- Sex, gender, + sexual orientation of a patient does not impact PDPT consideration





When PDPT is Not Recommended

- Co-infected with other STDs that are not covered by PDPT medication.
- Suspected child abuse, sexual assault, or where a patient's safety is in question
- Severe allergies to antibiotics
- Pharyngeal Gonorrhea
- Symptomatic patients who have a more serious condition (i.e fever of unknown origin, pelvic pain in people with a uterus, testicular pain in people with testes)



Ways to Bring PDPT to Your Clinic:

 Participate in Essential Access Health's CT/GC PDPT Distribution Program

- Purchase PDPT medication for your clinic to distribute to the patient for their partner onsite
- Provide the patient with a prescription for the partner to be filled at a local pharmacy



PDPT in a School-Based Health Setting



Case Study, Mei



- Mei is a 16 year old female who is at the school-based health center for a sports physical. She decides to get tested for chlamydia and gonorrhea during her visit.
- Her NAAT gonorrhea test comes back as positive. She said she uses condoms sometimes.
- She shares that she has had 2 partners in the last two months. One partner goes to school here and one partner graduated from high school last year and lives two towns over.



Poll

Can Mei receive PDPT as a minor?

- Yes
- No



Considerations



- When discussing partner management with a patient at a school-based health center, remember that some partners may attend the same school and some may not.
- Consider leveraging school-based model to bring partners in for first-line treatment.
- Offering on-site dispensing can be important for adolescents in particular as they are less likely to fill prescriptions for STD treatment.



Essential Access Health's CT/GC PDPT Program



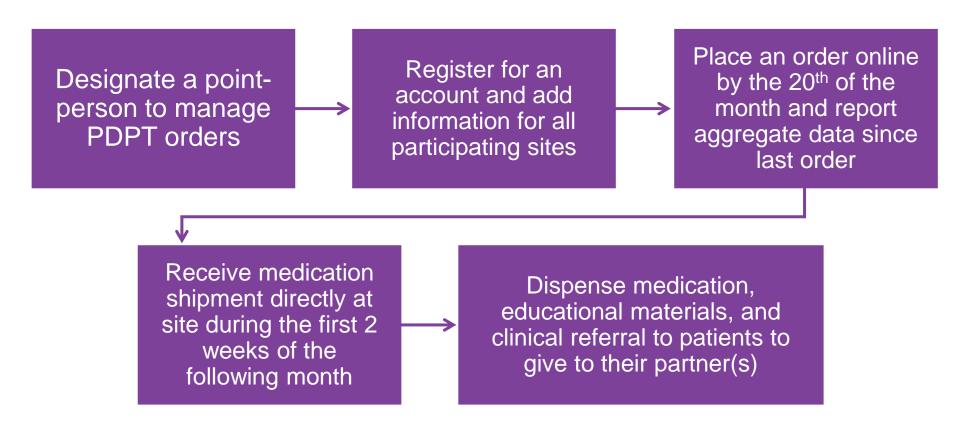
Essential Access Health's CT/GC PDPT Distribution Program

- Provides free, pre-packaged medication to treat CT/GC
- Launched in 2005
- Eligible LHJ/clinics must:
 - Be located in California
 - Serve population at risk for STDs
 - Serve an uninsured or underinsured population
 - Provide onsite treatment for index patient





Program Operations





Ordering Medication: Data Reporting

When placing a new order, each clinic must report:

- Number of doses remaining in stock
- Number of expired doses
- Aggregate chlamydia/gonorrhea data
 - Number of positive cases, by gender
 - Number of patients provided with PDPT, by gender
 - Number of doses of PDPT dispensed to CT and GC-positive patients, by gender



Participation Requirements

- Provide onsite index patient treatment for CT + GC
- Distribute PDPT to CT/GC+ patients for treatment of partners unable or unlikely to seek care based on clinical judgment
- Dispense PDPT with educational materials and clinic referral*
- Recommend maintaining a log of all PDPT dispensed
- Watch Essential Access Health's PDPT webinar series at least once





It wasn't easy hearing about this, but I'm glad I got treated right away.

Learn more about gonorrhea:

- Call toll free 1-800-232-4636
- Or visit www.ashastd.org



Gonorrhea: What You Should Do Now

Your sex partner has gonorrhea (gone-o-RHEE-ah).

This is a curable infection people can get from having sex. You may have gonorrhea, too.

Your partner has taken medication to treat gonorrhea. You must also take medication as soon as you can.

Here's what you need to know:

- Gonorrhea is easy to treat.
- You can get gonorrhea by having sex with the penis, vagina, or anus. You can also get it by having oral sex (mouth on penis or vagina).
- Many people have gonorrhea and don't know it.
- Some people have pain, a burning feeling when you urinate (pee), or a discharge (drip).
- If you don't get treated, you can get very sick or you may not be able to have children.
- For women who don't get treated and later get pregnant, gonorrhea can hurt their babies.

Get Treated

- The best way to take care of this infection is to go to a clinic right away.
- If you can't get to a doctor in the next several days, take the medication, or fill the prescription, your partner brought you.
- Because people can have more than one STD at the same time it is important that you visit a clinic as soon as possible to get tested for other STD's



The photos are used for illustrative purposes only.

Patient Education Materials

Available in multiple languages:

- Chlamydia
 - English
 - Spanish
 - Chinese
 - Vietnamese
- Gonorrhea
 - English
 - Spanish
- Trichomoniasis
 - English
 - Spanish

Download at: essentialaccess.org/pdpt/resources

Guidance for Providers





Patient-Delivered Partner Therapy (PDPT) for Chlamydia, Gonorrhea, and Trichomoniasis:

Guidance for Medical Providers in California

These guidelines were developed by the California Department of Public Health Sexually Transmitted Diseases (STD) Control Branch in collaboration with the California STD Controllers Association, and the California Prevention Training Center (CAPTC)

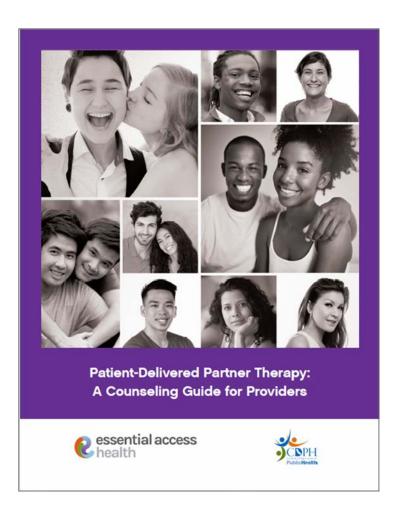
January 2016

- Partners should **read the information material very carefully before taking the medication**
- Partners should seek a complete STD
 evaluation as soon as possible, regardless of
 whether they take the medication
- Partners who are pregnant or who could be pregnant should seek care for their pregnancy as soon as possible
- Patients and partners should abstain from sex for at least 7 days after treatment and until 7 days after all partners have been treated.
- Partners should be advised to seek clinical services for retesting 3 months after treatment*



Download at: essentialaccess.org/pdpt/resources

PDPT Counseling Guide for Providers



- Designed to enhance providers' knowledge, skills, and comfort in effectively counseling patients about PDPT
- Developed by Essential Access Health in partnership with the California Department of Public Health, STD Control Branch
- Step-by-step guide to help determine if PDPT is right for your patients and ensuring they are confident and comfortable in delivering the medicine to their partners

Download at: essentialaccess.org/pdpt/resources

For a print quality version, email Kala at kheekin@essentialaccess.org



Technical Assistance

- Connect with Essential Access
 - Trainings
 - How to Implement + Operationalize PDPT
 - STD Treatment Guidelines Updates
 - Chart Review



Take Home Points

- Reinfection is common + dangerous for the patient
- Preferable for partners to come into clinic to get treated
- When this is unlikely, PDPT is an allowable, recommended + evidence-based alternative to ensure partners receive treatment
- Liability for PDPT in California is no different from the liability of any other action taken by a healthcare provider
- Essential Access Health's CT/GC PDPT Distribution Program provides a supply of free, pre-packaged PDPT to eligible sites

Learn more and register for Essential Access Health's CT/GC PDPT Distribution Program at: www.essentialaccess.org/pdpt

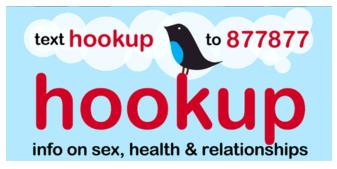


Digital STD Prevention Resources for Youth and Parents



Digital Programs









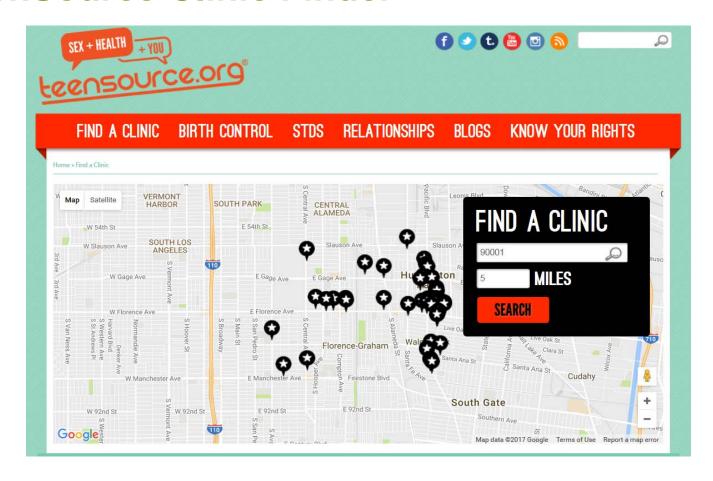


TeenSource.org

- 1.3 Million Page Views
- Youth Generated Content
- Birth Control, STDs, Healthy Relationships, Youth Rights
- Youth Advocacy/Engagement
- Social Media Follow Us
 - Twitter: @TeenSource
 - Facebook: TeenSource
 - Instagram: TeenSourceOrg
 - Total Reach: Over 25,000



TeenSource Clinic Finder



Over 160,000 Clinic Searches in 2018.



Condom Access Project

- Condom Access for Youth 15-19
- Over 100 Condom Access Sites –
 Across 36 LHJs
- 8 Mailer Counties (Alameda, Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, and San Joaquin)
- Nearly 100,000 Condoms Distributed in 2018





Hookup

- Over 5,000 Subscribers
- Over 4,000 Clinic Search Searches in 2018
- 2015 Program Evaluation
 - Texting Continues to Be a Good Way to Engage Youth, Tailor Content + Make More Useful
- Program Updates
 - Increased Promotion, Geo-Specific Messaging, Focus On LGBTQ+, Advocacy Blogs





TalkWithYourKids.org



"I want my daughter to get the facts and know she can always come to me."

- Tips/Blogs for Parents
- Healthy Relationships
- Teens + Health Care

- English + Spanish
- Expanded Timeline in 2018
- Facebook: Talk-With-Your-Kids
 - 14,000 Followers



Opportunities to Connect

- Join our CT/GC PDPT Distribution Program: www.essentialaccess.org/pdpt
- Join our Condom Access Project: <u>TeenSource.org/condoms/free</u>
- Order & Share Resources
- Share opportunities with for youth to create content (blogs, hookup texts, etc.)
- Explore further trainings on: <u>essentialaccesstraining.org</u>



Questions?

Use the "Chat Box"



STAY CONNECTED















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Amy Ranger aranger@schoolhealthcenters.org



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