

**FY 2023 PERFORMANCE PLAN**

<b>Sexually Transmitted Infections Clinic</b>		Public Health/ CHSB	Lilibeth Grandas x1211 Sharron Martin x1239
Program Purpose	<ul style="list-style-type: none"> <li>Reduce and prevent the incidence of sexually transmitted infections (STIs) and its negative consequences such as infertility and pregnancy complications</li> </ul>		
Program Information	<p>Clinic services follow the Centers for Disease Control and Prevention (CDC) guidelines and the Virginia Department of Health (VDH) standards.</p> <p>The program provides services on a sliding scale fee basis. Clients with insurance are charged the full fee and given documentation they can submit to their insurance company for reimbursement. Services are available to all individuals over the age of 13 with no residency restrictions as follows:</p> <ol style="list-style-type: none"> <li><b>Screening and diagnosing</b> the following STIs: <ul style="list-style-type: none"> <li>Chlamydia</li> <li>Gonorrhea</li> <li>Syphilis</li> <li>HIV</li> <li>Hepatitis B (certain populations)</li> <li>Hepatitis C</li> <li>Pelvic Inflammatory Disease</li> <li>Bacterial Vaginosis (BV)</li> <li>Yeast</li> <li>Trichomoniasis</li> <li>Genital Herpes</li> <li>Genital Warts</li> <li>Pubic Lice</li> </ul> <ul style="list-style-type: none"> <li>A typical panel of STI tests includes Chlamydia, Gonorrhea, Syphilis, Hepatitis C and HIV. Other STIs are diagnosed if symptoms are present.</li> <li>Clients are asked about their reproductive health plan and are offered the opportunity to start/continue/change a birth control method based on their preferences.</li> </ul> </li> <li><b>Treatment:</b> <ul style="list-style-type: none"> <li>Treatment is offered to clients based on laboratory results, symptoms or exposure to a person with a confirmed STI diagnosis.</li> <li>The HD (Health Department) has access to the federal 340B Drug Pricing Program. This program provides access to a wide range of medications at a significantly reduced price.</li> <li>Clients found to have HIV are referred to an Infectious Disease Specialist in the area.</li> </ul> </li> <li><b>Education and risk reduction counseling:</b> <ul style="list-style-type: none"> <li>All clients receive education and risk reduction counseling, including how to appropriately use a condom.</li> <li>Patients diagnosed with an STI are educated on the importance of having sexual partner(s) tested and treated as soon as possible to prevent reinfection or further spread in the community.</li> </ul> </li> <li><b>Referrals to other resource providers are based on client's needs:</b> <p>Those at risk for hepatitis B are referred to Open Immunization Clinic (OIC) or other medical provider for hepatitis B vaccination</p> <ul style="list-style-type: none"> <li>HIV Pre-exposure prophylaxis (PrEP)</li> <li>Sexual assault victims are referred to Doorways</li> <li>Teenagers are referred to the Teen Health Clinic for follow up</li> </ul> </li> </ol> <p>In addition, program staff conduct <b>community outreach</b> to increase STI awareness and decrease stigma, especially about HIV.</p>		

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The Public Health Division, like other health care providers in Virginia, is mandated to report Chlamydia, Gonorrhea, and Syphilis and HIV cases to VDH. The STI clinic works closely with the Community Health Protection Bureau (CHPB) to ensure that reported cases, including clients that are difficult to find, receive appropriate follow-up to control and prevent the spread of STIs in our community.

Funding for the STI program comes mainly from local and state funding through a cooperative agreement. HIV testing funding comes from CDC through VDH. An additional source of revenue originates from charging clients on a sliding fee scale. This new requirement was established by the Virginia Department of Health (VDH) in July 2017.

In FY 2022, VDH allowed screening of asymptomatic clients to resume. NOVASalud, a community-based organization supported by DHS, became the main provider of STI screening services for asymptomatic patients during the pandemic and has continued to provide this service throughout Northern VA. Under our current partnership with NOVASalud, they connect clients to our services, especially those who need treatment.

Partners: CDC, Virginia Department of Health, NOVASalud, Inova Juniper Program, Doorways and Whitman Walker Clinic in Washington DC.

Service Delivery Model	<ul style="list-style-type: none"> <li>In FY 2023, services were delivered in person. This is anticipated to continue in FY 2024.</li> <li>In FY 2023, resources were focused on treating those clients who have STI symptoms and those who are referred by other service providers for treatment or as contacts.</li> </ul>
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**PM1: How much did we do?**

Staff	<p>Total 0.8 FTEs:</p> <ul style="list-style-type: none"> <li>0.22 FTE Nursing Supervisor</li> <li>0.27 FTE Nurse Coordinator</li> <li>0.13 FTE Public Health Nurse</li> <li>0.09 FTE Clinic Aide</li> <li>0.09 FTE Clinician</li> </ul>
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Customers and Service Data		<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>	<b>FY 2023</b>
	Clients	532	158	259	338
	Visits	738	216	365	503
	Outreach: Community-related events providing information or testing	11	0	13	28

**PM2: How well did we do it?**

2.1	STI client satisfaction
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2.2	Clients with chlamydia, gonorrhea or syphilis were notified and offered options for treatment within one week of laboratory results
<b>PM3: Is anyone better off?</b>	
3.1	Clients with chlamydia, gonorrhea or syphilis who returned for their 3 month re-screen to ensure they were not re infected
3.2	Individuals diagnosed with HIV who saw an Infectious Diseases Specialist within 30 days of diagnosis per VDH standards

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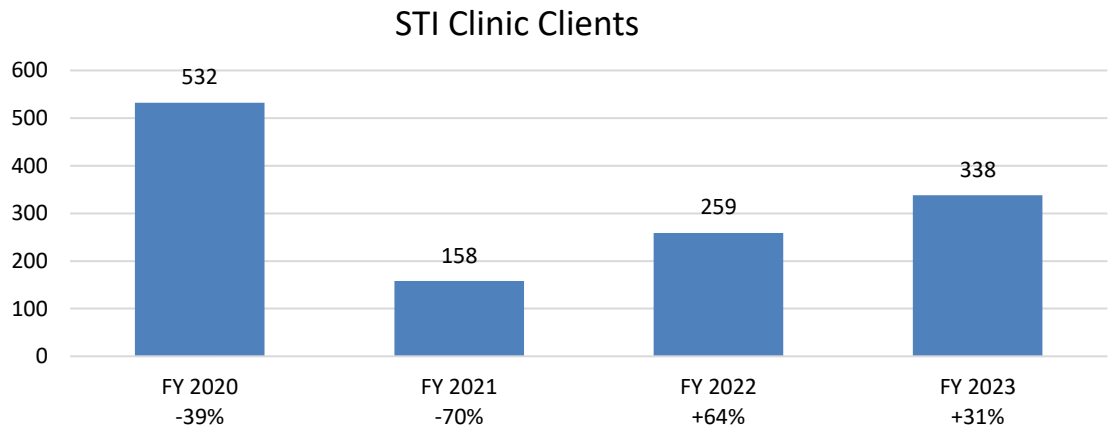
Sexually Transmitted Infections Clinic

Measure

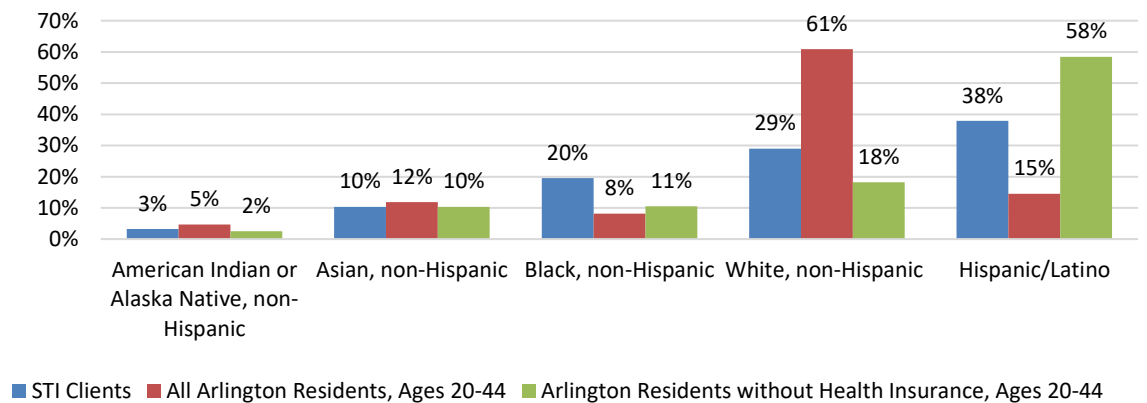
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Clients

Data



STI Clinic Clients Compared to Target Population



Data Summary

- The number of clients increased 64% in FY 2022 and 31% in FY 2023 after decreases in FY 2020 and FY 2021.
- The number of clients is tracked in WebVision.
- In FY 2023, 10 clients had unknown race or ethnicity.

What is the story behind the data?

- NOVASalud screened a significant number of clients for STIs in Northern Virginia in FY 2023. People testing positive were given the option for treatment, including the Arlington County PHD STI Clinic. For clients referred to PHD, NOVASalud sends positive results to the PHD Clinic and Clinic Staff reach out to the client to schedule the appointment.
- In an outreach pilot with Marymount University, students were offered testing for Chlamydia and Gonorrhea at a health fair.
- In examining the rates of STIs in Arlington, rates of Chlamydia, Gonorrhea, Syphilis, and HIV remained constant in FY 2022 and FY 2023. The major change in recent years is the decrease in HIV cases, which could be attributed to the use of PrEP.

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- Most clients who currently come to our clinics are uninsured and they lack the resources to go to urgent care or any other medical facility. Black and Latino populations have the highest rates of STIs in Northern VA, VA and the US, and tend to seek services at higher rates.

**Recommendations**

**Target Dates**

- Explore a new model for screening for STIs with minimal barriers, and consider community-based outreach options.

- FY 2024 Q3

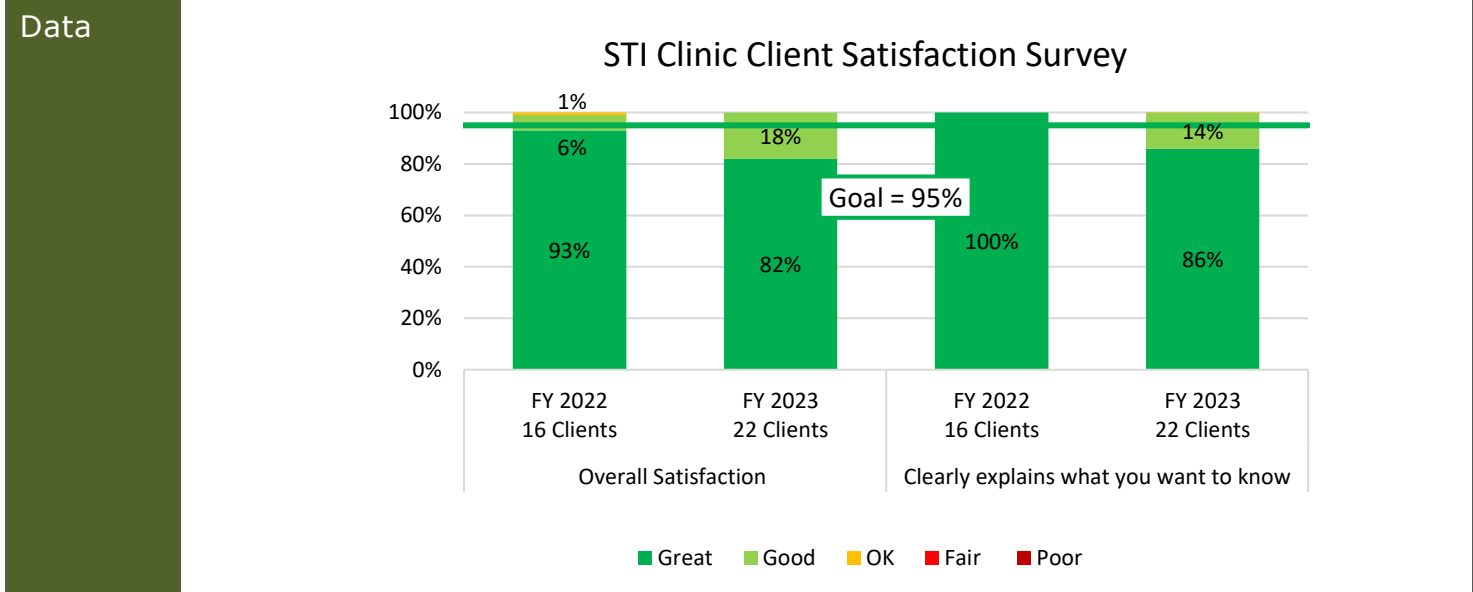
**Forecast**

- For FY 2024, the number of clients will remain about 338.

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**Sexually Transmitted Infections Clinic**

<b>Measure</b>	2.1	STI client satisfaction
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<b>Data Summary</b>	<ul style="list-style-type: none"> <li>In 2023, a satisfaction survey was conducted for the “combined clinic” (Family Planning, STI and Maternity).</li> <li>Survey conducted once a year, capturing all clients served over a two-week period, using a paper survey in English and Spanish.</li> <li>In FY 2022, overall satisfaction was calculated by averaging the results from all the questions on the survey. For FY 2023, clients were asked specifically about overall satisfaction.</li> <li>FY 2023 response rate was 73%.</li> </ul>
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**What is the story behind the data?**

- In FY 2022, the customer satisfaction survey was changed to a survey that VDH requires some PHD clinic programs to complete.
- Clinic staff received the highest scores on the survey. Payment received the lowest scores.
- In FY 2023, 100% of clients rated their overall customer experience with STI Clinic services as “good” or “great” and 100% rated how we explained things as “good” or “great.”

<b>Recommendations</b>	<b>Target Dates</b>
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| <ul style="list-style-type: none"> <li>In FY 2024, the client survey will be conducted at least one time, as staffing levels allow. Explore increasing number of clients surveyed.</li> </ul> | <ul style="list-style-type: none"> <li>FY 2024 Q4</li> </ul> |
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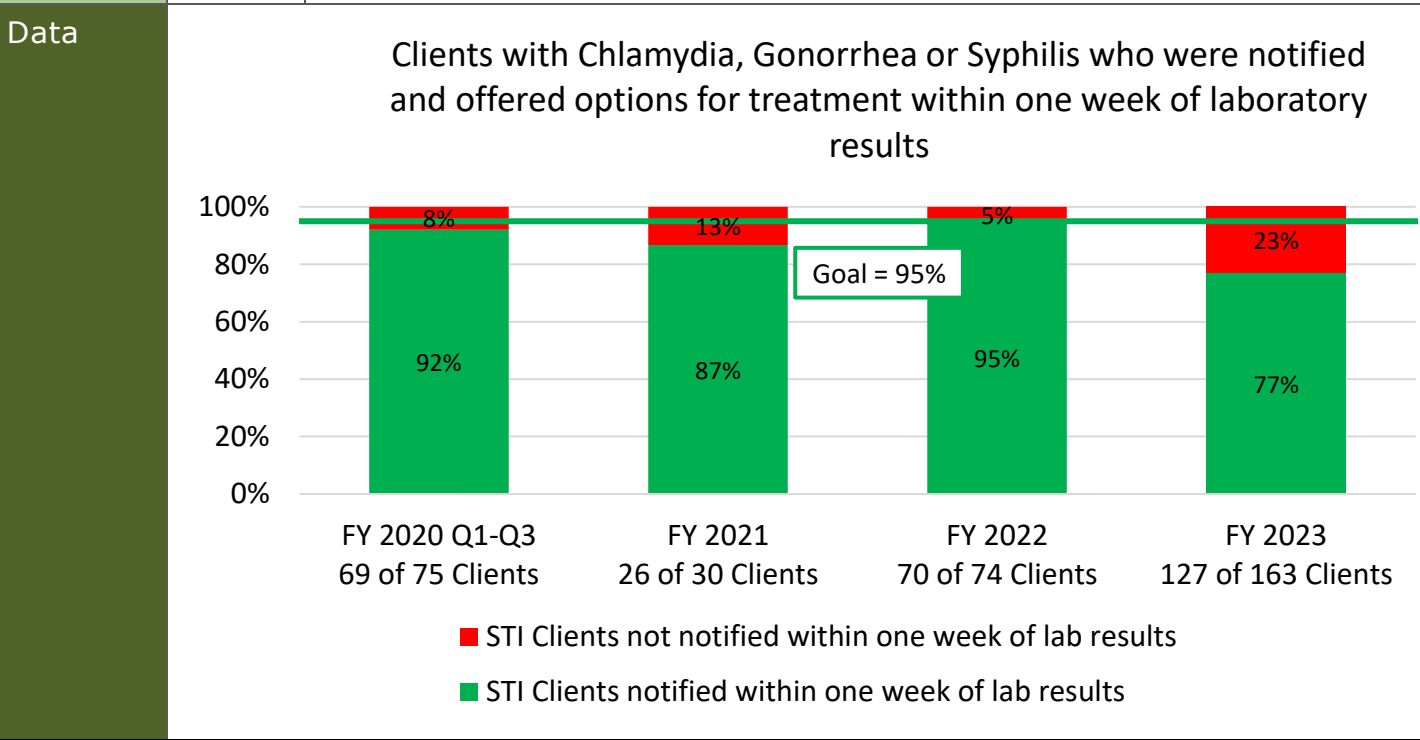
**Forecast**

- In FY 2024, the percentage of STI Clinic clients who rated their overall customer experience as “good” or “great” will be 100%. The percentage of STI Clinic clients who rated their how we explained things as “good” or “great” will remain 100%.

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**Sexually Transmitted Infections Clinic**

<b>Measure</b>	2.2	Clients with Chlamydia, Gonorrhea or Syphilis who were notified and offered options for treatment within one week of laboratory results
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<b>Data Summary</b>	<ul style="list-style-type: none"> <li>In FY 2023, 77% of clients testing positive for chlamydia, gonorrhea, or syphilis were notified within one week of laboratory results.</li> <li>FY 2023 data includes clients diagnosed or treated at all Community Health Service Bureau clinics, including family planning and maternity clinics.</li> <li>Data on client notification is tracked in the STI database.</li> </ul>
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**What is the story behind the data?**

- When positive laboratory results are received, clients are notified by telephone and offered treatment. If the client cannot be reached by telephone, a letter is sent to the address on file.
- The STI database is used to track the date of positive results, the date treatment was initiated, or date the letter was sent, if the client was unable to be reached by telephone.
- In FY 2023, NOVASalud clients were told to contact Public Health after receiving positive results. This delayed treatment. The process was changed later in FY 2023, so that PHD STI Clinic staff reaches out to positive clients instead of waiting for the client to call in to schedule an appointment.
- In FY 2023, the STI Program staff took on the responsibility to follow all clients diagnosed by all the Community Health Service Bureau programs; in the past, each program (Maternity, Teen, Family Planning and STI) followed up on clients diagnosed in their respective program. This change allowed for a more standardized way of follow up and to have a better picture of how STIs impact clients across services.

<b>Recommendations</b>	<b>Target Dates</b>
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- For clients who are difficult to find, the Community Health Protection Bureau will continue to deploy additional resources to locate clients to prevent an outbreak in the community.
- Change the STI database to track where clients are being tested.

- Ongoing
- FY 2024 Q1

**Forecast**

- In FY 2024, the percentage of clients notified within one week of laboratory will be consistent with results seen in FY 2022 – about 95%.



**Sexually Transmitted Infections Clinic**

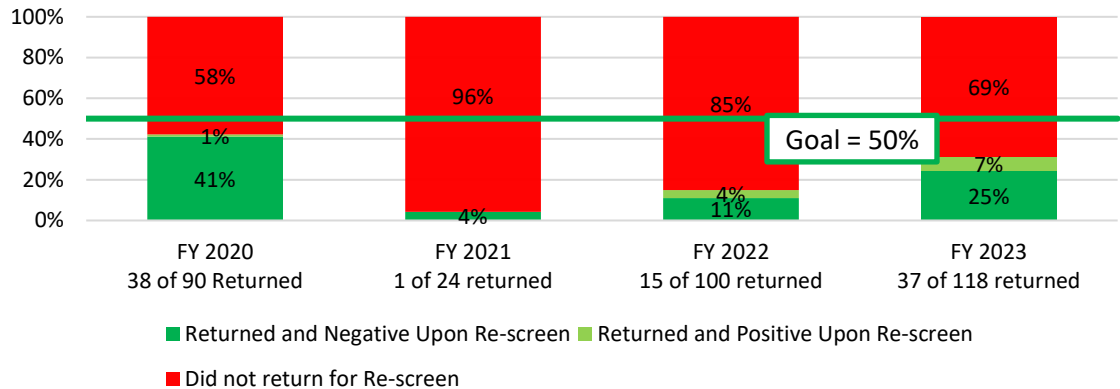
Measure

3.1

Clients with Chlamydia, Gonorrhea or Syphilis who returned for their 3-month re-screen to ensure they were not reinfected

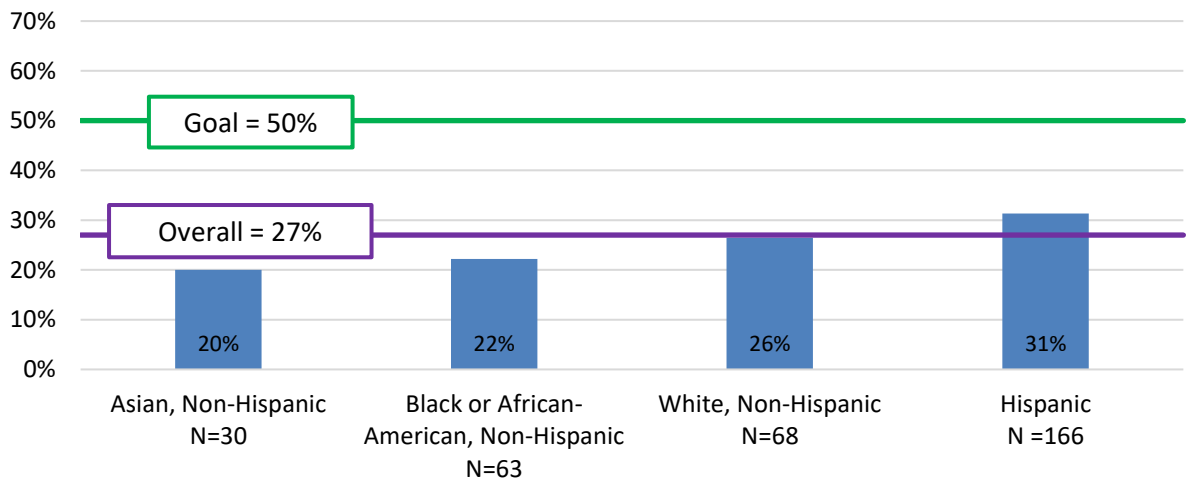
Data

**Clients with Chlamydia, Gonorrhea or Syphilis who returned for their 3-month re screen**



38 of 90 Returned      1 of 24 returned      15 of 100 returned      37 of 118 returned

**Percent of Clients Rescreened by Race and Ethnicity FY 2020-FY 2023**



Data Summary

- In FY 2023, 31% of clients testing positive for Chlamydia, Gonorrhea, or Syphilis returned to be re-screened for infections within 4 months because STI screening was not being done during the pandemic per VDH guidelines.
- In FY 2023, 8 clients were positive when they returned for re screening.
- Data on clients testing positive is tracked in the STI database. Data on client visits is tracked in WebVision.
- Race and ethnicity was available for 327 of 333 clients, FY 2020-FY 2023. Data disaggregated by race and ethnicity was combined for several years because of small numbers.

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**What is the story behind the data?**

- In FY 2023 the number of clients returning for re-screening improved; but remained below pre-pandemic levels. Sometimes those who do not experience new symptoms may not perceive it as important despite the risk counseling provided during their treatment visit.
- The purpose of re-screening is to detect reinfections, either from an untreated prior partner or from an infected new partner to prevent reinfection. The CDC recommends that clients with STIs be re-screened in three months.
- Clients are encouraged to schedule follow-up visits at the time of treatment. Nurses were trained in standardized ways of discussing the need to re-screen clients. During the pandemic, this process was suspended per VDH guidance.
- In the STI database, rescreening appointments are noted so that clients needing an appointment can be easily identified and contacted.
- A significant number of STI Clinic clients are initially screened at NOVASalud, where they do not have to complete an extensive medical history or eligibility paperwork to be served, and where the wait time to receive the service once they are in the clinic is very short. Clients who were tested at NOVASalud may prefer to get re-screened there, instead of at STI Clinic.
- Expedited Partner Therapy (EPT) allows patients diagnosed with Chlamydia and Gonorrhea to take treatment to their sexual partner(s), in cases where the partner(s) face significant challenges in obtaining medical care. This can reduce reinfection rates by 29%. VDH has loosened the guidelines to provide EPT to more clients by allowing us to bypass the phone assessment with the partner.

**Recommendations**

- Continue to call clients close to the three-month mark to schedule an appointment. Clients will be seen using our "Standing Order Protocol".
- Continue to offer Expedited Partner Therapy (EPT) to those who face barriers in obtaining STI treatment.
- Explore possibility of obtaining re-screening data for clients who are re-screened at NOVASalud or other providers.

**Target Dates**

- On-going
- On-going
- FY 2024 Q3

**Forecast**

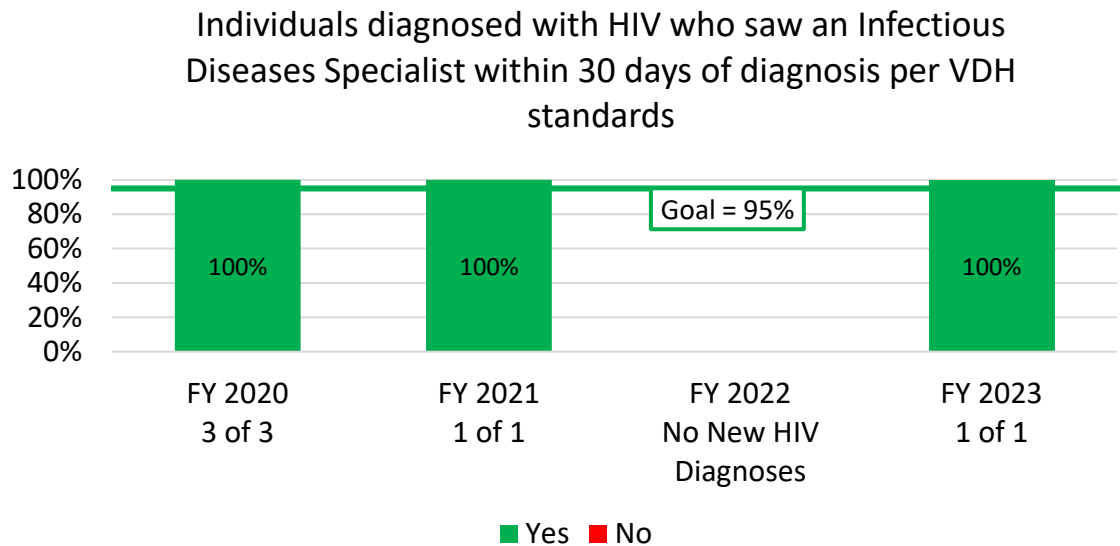
- In FY 2024, the percent of clients returning for rescreening will be approximately 31%.

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<b>Measure</b>	3.2	Individuals diagnosed with HIV who saw an Infectious Diseases Specialist within 30 days of diagnosis per VDH standards
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**Data**



**Data Summary**

- In FY 2023, there was one individual diagnosed with HIV in the clinic. Data from VDH 900 Test Form Part 2 and the HIV/STI database.
- Includes only new, confirmed diagnoses of HIV that are followed by Arlington Public Health Division.
- In FY 2023, there were 266 HIV tests performed in clinic. In all PHD Clinics, 1,926 HIV tests were performed.

**What is the story behind the data?**

- Once a client tests positive for the HIV virus, it is important they start medical care and begin HIV treatment as soon as possible. Antiretroviral therapy (ART) is recommended for all people with HIV. Starting ART slows the progression of HIV and helps protect the infected person’s immune system. ART can keep the infected person healthy for many years and greatly reduces the chance the patient transmits HIV to sex partners if medicines are taken consistently and correctly.
- Many people living with HIV who do not seek medical care eventually receive an AIDS diagnosis. This happens because, if left untreated, HIV will attack the immune system and allow different types of life-threatening infections and cancers to develop. While a cure for HIV does not exist, ART can dramatically prolong the lives of many people living with HIV and lower their chance of infecting others.

**Recommendations**

- Stay the course

**Target Dates**

- On-going

**Forecast**

- In FY 2024, the percentage of clients diagnosed with HIV who saw an Infectious Diseases Specialist within 30 days of diagnosis will be 100%.