



Telephone Interview Protocol

Syphilis, gonorrhea and Chlamydia

**As Required by
STD/HIV Program**



TEXAS
**Health and Human
Services**

**Texas Department of
State Health Services**

Revised February 2019

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Introduction

Telephone interviews for syphilis, gonorrhea and Chlamydia infections are an acceptable method for conducting partner services. After conducting a six-month pilot project with selected public health follow up (PHFU) programs, the Texas Department of State Services PHFU program determined there were no significant difference in partner services outcomes when compared to interviews conducted in the field for syphilis interviews. Texas Health and Safety Code Section 81.109 requires that persons receiving a positive HIV test result be given the opportunity for immediate, face-to-face counseling about several aspects of the test, therefore telephone interviews are only allowable for syphilis, gonorrhea, and Chlamydia infections.

Program Components

- Disease Intervention Specialists (DIS) are encouraged to conduct telephone interviews;
- First Line Supervisor (FLS) provides oversight of field and case management activities;
- Program Manager (PM)/Field Operations Manager (FOM) monitor staff performance and monthly program indicators;
- DSHS Central Office will issue guidance and provide support for telephone interview;
- DSHS will also conduct analysis of interview activities and outcomes.

1. Activities

All syphilis, gonorrhea and Chlamydia cases are eligible for a telephone interview; however, there are some considerations detailed below when a field blood and/or face-to-face interaction is required.

DSHS recommends DIS who have successfully completed the in-person classroom training, Passport to Partner Services or Fundamentals of Sexually Transmitted Disease Intervention (FSTDI), to conduct telephone interviews. Programs are expected to meet all program performance measures and timeframes associated with PHFU investigations, (i.e., record searches, interview format, re-interview within 7 days, etc.). At any point, if the DIS's failure to meet program objectives might be attributed to the quality of telephone interviews conducted, this issue should immediately be addressed by the Program Manager (PM), FLS, and/or DSHS Central Office consultant.

Office-based vs Field Investigation Considerations:

- DIS will continue adhering to the timeframes outlined in DSHS [Program Operating Procedures and Standards \(POPS\) Ch. 9.5.8 Investigations](#) and all efforts will be made to locate an individual in timely manner stressing disease intervention;
- When a client presents to the STD clinic and has not had a previous interview, DIS will be expected to interview/re-interview/cluster-interview all clients at the time of the visit, rather than delay the interview in favor of telephone contact;
- When a syphilis partner services interview is needed, programs may immediately use the telephone as the primary method of interview, rather than pursuing face-to-face contact;
- The DIS will have 3 days (from the interview assign date) to interview a syphilis case via telephone;
- If a DIS is unsuccessful at interviewing a client via telephone within this timeframe, the DIS should consult with the PM/FLS and pursue other means necessary to follow-up, including a field visit; and

- Field records initiated for partner/cluster investigations and reactors that require additional follow-up (e.g., confirmation testing/field blood) will most likely not be affected by this change in procedure

Telephone Interview Guidelines:

- DIS should conduct the telephone interview in a confidential setting with limited background noises and no interruptions.
- When a DIS contacts the original patient, s/he should follow standard procedures to verify the person's identity (usually this is done by confirming full name and two pieces of identifying information, e.g., date of birth and address). DIS should not pursue a telephone interview when the client's identity is questionable;
- DIS should address any patient concerns with conducting a telephone interview before proceeding with the interview.
- DIS need to inform the client an interview can be a lengthy process and the client may need to provide sensitive information over the telephone. If the client prefers to meet face-to-face, arrangements should be made to meet for an interview; and
- DIS should obtain client permission for another person to listen on the call when a supervisor is conducting an audit; and
- DIS will adhere to the described interview format located in the [DSHS POPS Chapter 9.4 Interviews](#).

Case Management

- DIS will be asked to conduct all original, re-interview, and cluster interviews for syphilis investigations by telephone. There are situations when a person may not be forthcoming with information or reconsider discussing personal information over the telephone. When a DIS encounters similar situations then an in-person/ field re-interview will need to be pursued.
- DIS will be asked to document Place of Interview (Clinic, Field, Telephone and/or Other) in the Interview Record. FLS will be responsible for overseeing quality assurance of this documentation;
 - *Clinic Interview*: includes STD clinic or a satellite office, provider or hospital setting, or community based organization;
 - *Field Interview*: includes patient's home, parking lot, street, jail, prison, DIS' car, etc.;

- *Telephone Interview*: any interview that occurs via telephone;
 - *Other*: includes internet interview, special circumstances when the patient is deceased and/or another provider/RRS has elicited interview information.
- FLS will review DIS's adherence to the interview format and interview outcomes when conducting initial and weekly case reviews. Any concerns with DIS ability to effectively conduct telephone interviews should be promptly addressed.

2. Evaluation Activities

DSHS Central Office will be responsible for assessing the semiannual telephone interview outcomes for each program.

FLS will be asked to conduct at least one telephone interview audit during the calendar year for each DIS. The standard DSHS Interview Audit form should be used to collect this information.