



## Improving Chlamydia (CT) and Gonorrhea (GC) Screening Rates: A Clinical Self-Assessment Tool for Title X Clinic Sites

**Purpose:** The clinical self-assessment tool was created to help Title X clinics conduct quality assurance on STD prevention and control programs. This tool was replicated from the evaluation tool used during Title X evaluation which examines agency protocols, screening and management of CT and GC. This document can be used to identify factors which may be interfering with site's ability to meet the Title X requirement of **80% CT screening rate for women <26 years of age and 80% GC screening rate for women <26 if in areas of 1% GC prevalence or higher.** This tool is also meant to help clinics assess their patient management as recommended by the Centers for Disease Control and Prevention (CDC).

To get the most out of your self-assessment, please follow the instructions in this tool thoroughly. **If you identify key areas for improvement, please contact your CFHC STD Program Manager.** CFHC offers a variety of technical assistance trainings that can be adapted to suit your clinic's needs. We are here to serve as consultants and champions for your clinic's program.

For questions, please contact [stdprograms@cfhc.org](mailto:stdprograms@cfhc.org)

Southern California  
3600 Wilshire Boulevard #600  
Los Angeles, CA 90010  
213.386.5614

[cfhc.org](http://cfhc.org)

Northern California  
2550 9th Street #110  
Berkeley, CA 94710  
510.486.0412

shaping the future  
of sexual + reproductive health.™

## Table of Contents

<b><u>Section</u></b>	<b><u>Page</u></b>
<b>PROTOCOLS:</b>	
A. GUIDE: Protocols for follow-up of CT/GC+ clients	3
A1. TOOL: Protocols for follow-up of CT/GC+ clients	3
<b>SCREENING RATES:</b>	
B. GUIDE: Screening practices for females 25 years and younger	4
B1. TOOL: Screening practices for females 25 years and younger	5
B2. VISUAL: Screening practices for females 25 years and younger	6
C. GUIDE: Screening practices for females 26 years or older	7
C1. TOOL: Screening Practices for Females 26 years or older	8
C2. VISUAL: Screening Practices for Females 26 years or older	9
<b>PATIENT MANAGEMENT:</b>	
D. GUIDE: CT/GC+ Patient Follow-Up	10
D1. TOOL: CT+ Patient Follow-Up	11
D2. TOOL: GC+ Patient Follow-Up	12
E. Final Assessment	13
F. Next Steps	13

#### A. Guide: Protocols for follow-up of CT/GC+ clients

**Standard:** Clinic site must have a written protocol for follow-up of patients with CT+ and GC+ test results that includes the items listed below.

**Instructions:** Review a copy of the written protocol used by your site and assess whether the protocol contains the following items:

#### A1. Tool: Protocols for follow-up of CT/GC+ clients

Item	Circle one	
1. Annual screening for chlamydia and gonorrhea for sexually active females 25 years and younger	Y	N
2. Selective screening for females 26 and older (e.g., new partner past 3 months, multiple sex partners in the last 12 mos, or partner with other partners)	Y	N
3. CDC-recommended treatment for chlamydia (azithromycin or doxycycline)	Y	N
4. CDC-recommended treatment for gonorrhea (Ceftriaxone 250mg PLUS azithromycin or doxycycline)	Y	N
5. Confidential follow up of CT+ and GC+ clients:		
a. First attempted contact to CT/GC+ client within 3 working days of receipt of test result	Y	N
b. At least three attempts to contact the CT/GC+ client	Y	N
c. All cases reported to the local health jurisdiction within state-specified timelines	Y	N
6. Counseling of client on need for partner treatment including options for partner management (i.e. partner treatment on-site, by prescription, patient-delivered partner therapy)	Y	N
7. Counseling CT/GC + client to return to clinic for retesting at 3 months	Y	N
8. CDC recommended HIV screening guidelines.	Y	N
Percent compliance with recommended protocol content = # of Yes responses / 10		

## B. GUIDE: Screening practices for females 25 years and younger

**Standard:** 80% of all sexually active females who are 25 years of age and younger will be screened for chlamydia at the first visit and annually thereafter. 80% of all sexually active females who are 25 years of age and younger will be screened for gonorrhea at the first visit and annually thereafter in areas of 1% GC prevalence or higher.

**Instructions:** Randomly select 20 records (charts) of **females 25 and younger** who were seen for a reproductive health/ family planning visit in the last 12 months who were asymptomatic for chlamydia and gonorrhea on the date of visit. Eligible clients are those receiving any type of reproductive health /family planning service, whether an exam was done or not (e.g. EC client, pregnancy test client, etc.) Records should be selected systematically (e.g. first 20 charts, every 5<sup>th</sup> chart from a list, etc).

### To determine whether a chlamydia or gonorrhea test was done in the 12 months prior to and including the most recent visit:

1. Start with the most recent clinic visit. Was a chlamydia or gonorrhea test done? If **YES for either**, complete one line of the table below for that visit.
2. If no CT or GC test was done at the most recent visit, work back through the client's clinic visits for the prior 12 months. Complete one line of the table below **IF** a CT or GC test is found for the client in the previous 12 months.
3. If **NO** test was done for within the past 12 months, evaluate the most recent clinic visit and complete one line of the table below, including a comment in the last column about why no test was done (if documented) or can be determined.
4. Once the table is completed, calculate the specified percentages at the bottom, using the formulas provided. You will need these percentages when performing the final assessment.

(Table on next page)

**B1. TOOL: Screening practices for females 25 years and younger**

Medical Record #	CT/GC screen in past 12 months? Specify which.	List any reason not screened or other comments	Any other tests (HIV, Syphilis, etc)?
1	Y      N		
2	Y      N		
3	Y      N		
4	Y      N		
5	Y      N		
6	Y      N		
7	Y      N		
8	Y      N		
9	Y      N		
10	Y      N		
11	Y      N		
12	Y      N		
13	Y      N		
14	Y      N		
15	Y      N		
16	Y      N		
17	Y      N		
18	Y      N		
19	Y      N		
20	Y      N		

**Total #** of records reviewed =

**% screened** = Total # "yes" responses divided by # of records reviewed:

**% unscreened with reason** = Total # "no" responses **with** a reason for no test divided by total # of records reviewed:

**% of unscreened with no reason** = Total # no responses **without** a reason for no test divided by total # of records reviewed:

**B2. Visual: Screening practices for females 25 years and younger**



### C. GUIDE: Screening practices for females 26 years or older

**Standard:** Women age 26 and older should be tested for chlamydia and gonorrhea only if appropriate clinical indications or risk factors exist.

Appropriate **clinical indicators** for a test include:

1. CT /GC symptoms (e.g. abnormal vaginal discharge, pelvic pain, unusual vaginal bleeding)
2. CT /GC signs (e.g. endocervical discharge, cervical friability, cervical motion tenderness (CMT), uterine tenderness, adnexal tenderness, PID)
3. A newly diagnosed STD
4. Contact to an STD

Appropriate **risk factors** for a test are:

1. New sex partner within the previous 3 months
2. More than 1 sex partner during the previous 12 months
3. Suspicion that a sex partner within the previous 12 months may have had another (concurrent) partner

**Instructions:** Randomly select at least 20 records for **females age 26 or older** who were seen for reproductive health/family planning services in the last 12 months and who were asymptomatic for chlamydia and gonorrhea on the date of visit. Eligible clients are those receiving any type of service, whether an exam was done or not (e.g. EC client, pregnancy test client, etc.) Records should be selected systematically (e.g. first 20 charts, every 5<sup>th</sup> chart from a list, etc.).

#### **To determine whether a chlamydia or gonorrhea test was done in the 12 months prior to and including the most recent visit:**

1. Start with the most recent clinic visit. Was a chlamydia or gonorrhea test done? If **YES**, complete one line of the table (on the next page) for that visit, checking off the reasons why the test was done in the following columns, or whether no reason was documented.
2. If no CT or GC test was done at the most recent visit, work back through the clinic visits for the prior 12 months. Complete one line of the table **IF** a CT or GC test is found.
3. If **NO** test was done for within the past 12 months, evaluate the most recent clinic visit and complete one line of the table.
4. Once the table is completed, calculate the specified percentages at the bottom, using the formulas provided. You will need these percentages when performing the final assessment.

# C1. TOOL: Screening Practices for Females 26 years or older

Medical Record #	CT or GC test in past 12 months? Specify which.	If yes, mark all responses below that apply:							
		No reason given	CT/GC Symptoms*	CT/GC signs**	STD contact/new diagnosis	New ptr last 3 mos.	Multiple ptrs in past 12 mos.	Partner with other partners	Other reason or comment
1	Y N								
2	Y N								
3	Y N								
4	Y N								
5	Y N								
6	Y N								
7	Y N								
8	Y N								
9	Y N								
10	Y N								
11	Y N								
12	Y N								
13	Y N								
14	Y N								
15	Y N								
16	Y N								
17	Y N								
18	Y N								
19	Y N								
20	Y N								

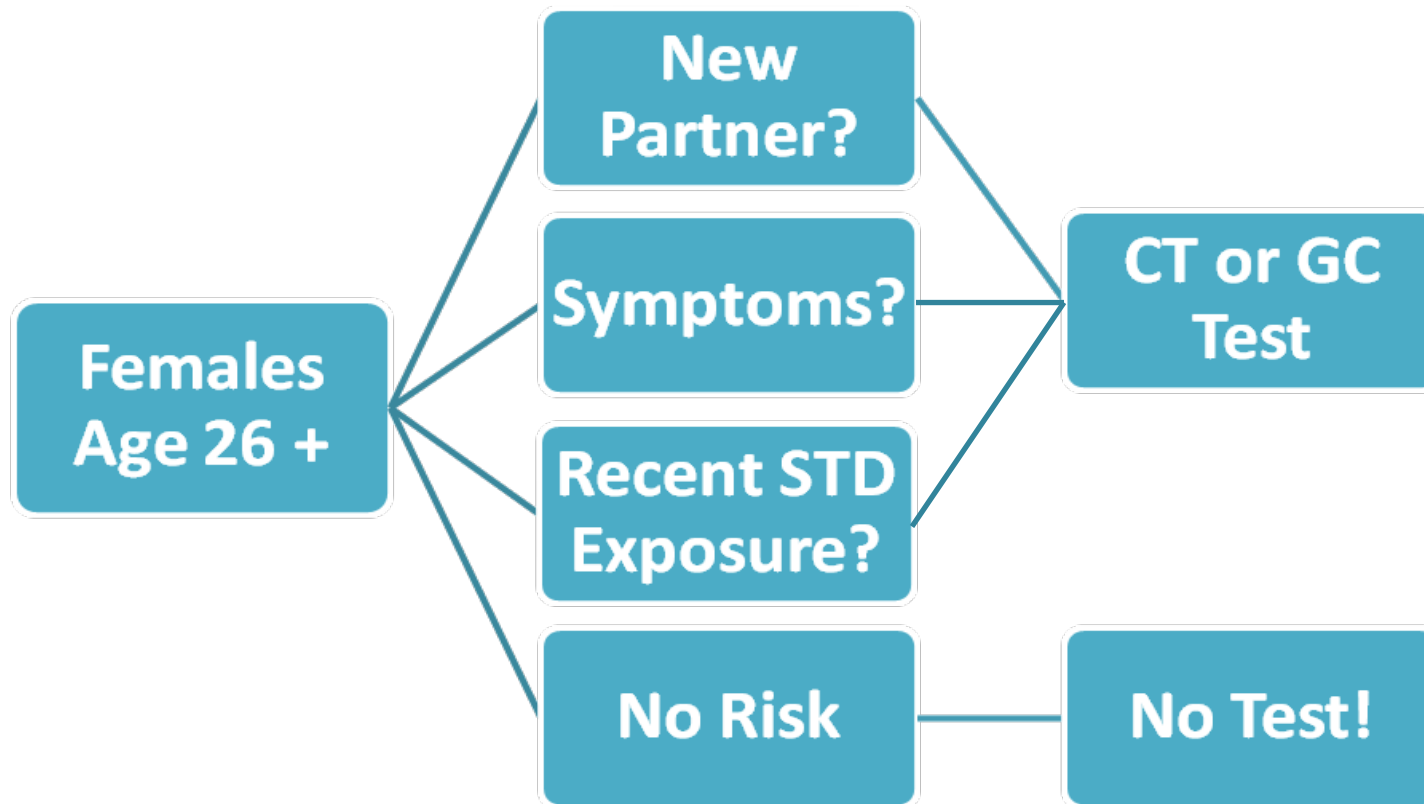
\*CT/GC symptoms = abnormal vaginal discharge, pelvic pain, unusual vaginal bleeding  
 \*\*CT/GC signs= endocervical discharge, cervical friability, cervical motion tenderness (CMT), uterine tenderness, adnexal tenderness, PID

% **\*In Compliance with guidelines** = Total # "no test" OR "yes test" with 1 or more reason for test divided by total # of records reviewed:

% **screened for no reason documented** = Total # "yes test" with no reason divided by total # of records reviewed:



**C2. Visual: Screening Practices for Females 26 years or older**



#### D. GUIDE: CT/GC+ Patient Follow-Up

**Standards:** Chart documentation indicates that:

1. An attempt to notify 100% of the patients occurred within 72 hours (3 working days) of receipt of a positive test result.
2. If the client is not reached through the initial attempt, up to 3 attempts were made to contact 100% of the CT/GC+ clients in need of treatment within 5 working days of receipt of a positive test result.
3. 100% of CT/GC+ clients were reported to the state or county STD department per state regulations (i.e. Confidential Morbidity Report/CMR).
4. 100% of CT/GC+ clients who were reached were counseled about:
  - a. The need for partner treatment and options available at your site for partner management (e.g. on-site treatment, by prescription, patient delivered partner (PDPT), referral, etc.)
  - b. Returning for a retest approximately 3 months after treatment.
  - c. The importance of abstaining from sex or using condoms during treatment.
5. 100% of *presumptively treated* patients were contacted with test results and counseled about partner treatment and retesting.

**Instructions:** Pull records of 20 CT+ and 20 GC+ clients who presented to the FP clinic in the past 12 months. Review the records for documentation of Standards 1-5 above.

**\*Time to Treat** refers to the amount of time from when the patient was contacted until he or she received treatment or Rx.

**\*Treatment types** include the following:

- **“O”** = there was documentation in the chart that the patient received CT treatment from the provider, in the exam room, during the treatment visit (i.e. DOT – 100% of these people were treated), or when presumptively treated.
- **“Rx”** = there was documentation in the chart that the patient received a prescription for the treatment medication, although this does not indicate whether the prescription was filled at an on- or off-site pharmacy
- **“Missing”** = there was no documentation about how the patient received treatment for their CT infection, or the information about how the patient received treatment was unclear in the chart

(Table on next page)

# **D1. TOOL: CT+ Patient Follow-Up**

Medical Record #	Time to Treat*	Contacted within 72 hours of result receipt?	Minimum of 3 attempts to contact (if PT not treated)?	CMR sent?	Type of treatment	Patient counseled to RTC for retest? Specify timeframe	RTC 1-11 months?	If yes, retested?	Partner treatment discussed?	Abstain or condoms during TX?	PDPT or Rx given?	Other tests ordered? HIV, Syphilis, Please Specify.
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
<b>% charts meeting standards = # charts meeting all 5 standards divided by 20.</b> <input type="text"/>												

## D2. TOOL: GC+ Patient Follow-Up

Medical Record #	Time to Treat*	Contacted within 72 hours of result receipt?	Minimum of 3 attempts to contact (if PT not treated)?	CMR sent?	Type of treatment	Patient counseled to RTC for retest? Specify timeframe	RTC 1-11 months?	If yes, retested?	Partner treatment discussed?	Abstain or condoms during TX?	PDPT or Rx given?	Other tests ordered? HIV, Syphilis, Please Specify.
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
<b>% charts meeting standards = # charts meeting all 5 standards divided by 20.</b> <input type="text"/>												

## F. Final Assessment

Based on your review, how did your site do? Please tally your results below:

Section	Score and/or Comments
A. Protocols for follow-up of CT/GC+ clients <b>Ideal Score: 100% compliance</b>	
B. Assessing CT/GC screening practices for females age 25 and younger <b>Ideal Score: 100% Screened</b>	
C. Assessing CT/GC screening practices for females age 26 or older <b>Ideal Score: 100% in compliance</b>	
D. Contacting and Counseling CT/GC+ Clients <b>Ideal Score: 100% charts meet standards</b>	

## E. Next Steps

If your site did not meet **all of the Title X standards**, there are solutions! CFHC is here to support your clinic and provide you with assistance.

Please contact your CFHC STD Program Manager for resources and tools to help improve problems you have identified.

For any other questions, please contact [stdprograms@cfhc.org](mailto:stdprograms@cfhc.org).