



AMERICAN  
COLLEGE  
HEALTH  
ASSOCIATION

**Introduction**

Note: This PDF is intended to be used as a worksheet. Survey responses must be submitted in Qualtrics using the link in your invitation email

## **ACHA SEXUAL HEALTH SERVICES SURVEY 2021**

### **American College Health Association**

### **Sexual Health Services Survey for Calendar Year 2021**

Thank you for taking the time to complete this survey. The ACHA Sexual Health Coalition has made significant revisions to the survey to make it as concise and easy-to-follow as possible. The objective of this survey is to track modes of management and outcomes of evaluation to serve as both a benchmark and database of comparable statistics.

All data collected in this survey is in reference to Calendar Year 2021 (January 1 – December 31, 2021). Please answer with respect to services you provided and policies that were in place in CY2021, rather than current policies or practices. If there were different policies in place between the spring and fall semesters, please reference the Fall 2021 policies.

Please submit only objective data except as specified. Please leave blank unanswerable questions or questions that are not applicable to your health services.

We must have both the numerator (number of positives) and denominator (number tested) to calculate the positivity rate. If you only have data for positive STI tests without the total number of students tested, we will not be able to use your data for these items. *Please leave these items blank if you do not have both numbers.*

Use only whole numbers in your numerical entries (no commas).

If you'd like to view the full survey, or print a copy, please [click here](#).

Contact Christine Kukich at [ckukich@acha.org](mailto:ckukich@acha.org) for specific questions about this survey.

#### **Contacts and Demographics**

### **Contact and Demographics**

**Name of College/University:** \${e://Field/INSTITUTION}

**1) Name of person completing this survey:**

**2) Title of person completing this survey:**

**3) E-mail address for questions about survey entries:**

**4) Telephone number of respondent:**

**5) Which best describes your primary role in college health?**

- Administrator
- Healthcare Provider
- Information Technology or Data Management
- Health Education/Promotion Professional
- Other (please specify)

**6) Does your student health center provide ANY clinical sexual health services (e.g., PAP testing, STI/HIV testing, pregnancy testing, contraception, PrEP, PEP, HPV vaccinations, etc.)?**

- Yes
- No

This question only appears if Yes is selected in question 6.

**6A) Does your student health center provide the following clinical sexual health services?**

	Yes	No
Cervical cancer screening	<input type="radio"/>	<input type="radio"/>
STI/HIV testing	<input type="radio"/>	<input type="radio"/>
Pregnancy testing	<input type="radio"/>	<input type="radio"/>
Contraception	<input type="radio"/>	<input type="radio"/>
PrEP	<input type="radio"/>	<input type="radio"/>
PEP	<input type="radio"/>	<input type="radio"/>
HPV vaccinations	<input type="radio"/>	<input type="radio"/>

This question only appears if Yes is selected for Cervical cancer screening, STI/HIV testing, or Pregnancy testing in question 6A.

**6B) Which electronic health records product(s) are you currently using?**

- Careflow
- Cerner
- GE Centricity
- E-ClinicalWorks
- EPIC
- Magnus Health
- Mediat
- NextGEN
- NueMD
- Point and Click Solutions
- Practice Fusion
- PyraMED
- Titanium
- None- we use paper only
- Other EHR product (please specify):

This question only appears if Yes is selected for Cervical cancer screening, STI/HIV testing, or Pregnancy testing in question 6A.

**6C) ACHA and the Sexual Health Coalition are committed to identifying and reducing disparities among student populations. In an effort to accomplish this, we would like to know if it is possible for you to break down your clinical data (pregnancy tests, PAP tests, STI/HIV tests, etc.) by the following categories on future versions of this survey:**

	Yes	No
Assigned sex	<input type="radio"/>	<input type="radio"/>
Gender identity	<input type="radio"/>	<input type="radio"/>
Race/ethnicity	<input type="radio"/>	<input type="radio"/>
Sexual orientation	<input type="radio"/>	<input type="radio"/>

This question only appears if No is selected in question 6.

**6D) Does your student health center provide any clinical health services?**

- Yes
- No

This question only appears if Yes is selected in question 6D.

**6E) What clinical services does your health center provide?**

This question only appears if No is selected in question 6D.

**6F) How do students access clinical care at your institution?**

Note: The survey will skip to question 19 for anyone who selects No to question 6.

**7) How many student medical visits did your health center have in 2021? (Please include both in-person and virtual/telemedicine visits)**

Total number of student medical visits to your Health Center 2021

**7B) How many of these visits were virtual/telemedicine?**

Number of virtual/telemedicine visits

**Pap Test Results**

This section only appears if Yes is selected for Cervical cancer screening in question 6D.

## Surveillance

**8A) Summary of all Cervical Pap test results for January 1, 2021-December 31, 2021 (Results in items A through G are mutually exclusive and SHOULD SUM TO EQUAL THE TOTAL REPORTED at the bottom row labeled TOTAL. Please make sure to enter data in A-G below so that we can calculate correct rates for each category of test result.**

A. Number reported as normal

B. Number reported as ASC-US (atypical squamous cells of undetermined significance)

C. Number reported as LSIL (low-grade squamous intraepithelial lesion)

D. Number reported as ASC-H, Low-grade, cannot exclude high-grade or HSIL or CIS (atypical squamous cells: cannot exclude high-grade, high-grade squamous intraepithelial lesion)

E. Number reported as AGC or CIS (atypical glandular cells or carcinoma in situ)

F. Number reported as unsatisfactory (no dx)

G. Number reported as other dx, not listed above

Total

**8B) Summary of all Cervical Pap test results for January 1, 2021-December 31, 2021. Please leave this question blank if you don't know.**

Number reported with no endocervical cells present (with any dx above)

## STI/HIV Positivity

This section only appears if Yes is selected for STI/HIV testing in question 6D.

**Instructions: Please make sure to enter corresponding data in questions below so that we can calculate positivity rates by sex.**

**The number of positive test results must always be equal to or less than the number of tests done for each infection. All data applies to tests performed by your health service in calendar year 2021. We must have both the numerator (number of positives) and denominator (number tested) to calculate the positivity rate. If you only have data for positive STI tests without the number of students tested, we will not be able to use your data. Please leave number of positive STI tests blank if you cannot provide the number of students tested.**

### 9) Chlamydia testing

**Note that bottom number must be less than or equal to the top number**

Number of unique (unduplicated) patients assigned female at birth under age 25 seen at your health center.

Number of unique (unduplicated) patients assigned female at birth under age 25 tested for chlamydia at your health center.

### 10) Gonorrhea testing

**Note that bottom number must be less than or equal to the top number**

Total number of Gonorrhea tests performed

Total number of Gonorrhea tests positive

### 11) Chlamydia testing

**Note that bottom number must be less than or equal to the top number**

Total number of Chlamydia tests performed

Total number of Chlamydia tests positive

### 12) HIV antibody testing

**Note that bottom number must be less than or equal to the top number**

Total number of HIV antibody tests performed

Total number of HIV antibody tests positive

### 13) Syphilis testing

**Note that bottom number must be less than or equal to the top number**

Total number of Syphilis tests performed

Total number of Syphilis tests positive

**14) Herpes viral culture or PCR testing**

Total number of PCR tests performed	<input type="text"/>
Total number of positive <b>HSV-1</b> tests	<input type="text"/>
Total number of positive <b>HSV-2</b> tests	<input type="text"/>
Total number of positive <b>type unknown</b> tests	<input type="text"/>

**15) How many patients did your Health Center diagnose with trichomoniasis in 2021?**

**16) How many patients did your Health Center diagnose with bacterial vaginosis in 2021?**

**17) Number of unduplicated patients diagnosed with genital warts in 2021:**

**Pregnancy**

**This section only appears if Yes is selected for pregnancy testing in question 6D.**

**18) For pregnancy tests performed at your health center between January 1, 2021 to December 31, 2021 (in-house or sent out, either urine or blood):**

**Please double check that your number of positive tests is not greater than the number of tests performed.**

Number performed	<input type="text"/>
Number positive	<input type="text"/>

**Guidelines and Best Practices Assessment**

**All respondents will see this section**

The following assessment is based on [ACHA's Best Practices for Sexual Health Promotion and Clinical Care in College Health Settings white paper](#), published in January 2020. For each best practice, select the column that best aligns with where your health center currently is regarding

its implementation. The choices are similar to the Stages of Change.

<b>Do not Intend to Implement</b>	Your health center does not intend to implement the best practice. Reasons may include issues related to legality, policy, lack of buy-in, resources, staffing, etc.
<b>Intend to Implement, but have not yet Begun</b>	Your health center is able to implement the best practice and intends to do so, but has not yet begun the process due to various constraints.  For example, a best practice may be part of an organization's strategic plan but will not be addressed until the end of the current planning cycle.
<b>Implementation in Progress</b>	Your health center has begun the process of implementing the best practice (e.g., a meeting has happened to move it forward, policies are currently being drafted, etc.).
<b>Implemented &amp; Maintaining</b>	Your health center has implemented the best practice, and is actively working to maintain it (e.g., regular staff trainings, budget line item, ongoing evaluation, etc.).

### 19) Incorporate Pleasure & Intimacy into Sexual Health Efforts

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates and/or patient questionnaires used during routine wellness visits include questions about sexual pleasure and satisfaction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires used during problem-focused visits for sexual health include questions about pleasure and sexual satisfaction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health education programs include information about pleasure and sexual satisfaction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Any office providing safer sex supplies provides a variety of options, styles, and sizes, including lubricant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**19A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for incorporating pleasure and intimacy into sexual health efforts.**

**20) Create a Welcoming Clinic Environment and Provide Inclusive Resources and Services**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Website has sex-positive messages with same- and different-gender partners, as well as people of different ethnicities, races, gender expressions and physical abilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Posters, brochures and other materials have sex-positive messages with same- and different-gender partners, as well as people of different ethnicities, gender expressions and physical abilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff are required to receive training on LGBTQIA+ inclusivity. Training should include informing patients of the confidentiality of sexual orientation and gender identity (SOGI) data.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strategic planning or goal setting includes ensuring staff are diverse and represent the communities they serve.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 20**

**20A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for creating a welcoming clinical environment.**

**21) Considerations for Trans and Non-Binary Students**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policy is in place regarding appropriate staff interactions with trans and non-binary students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinicians provide gender-affirming hormone therapy for trans and non-binary students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student health insurance policy explicitly covers services related to transgender care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender-inclusive restrooms are available and accessible.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 21**

**21A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for considerations for trans and non-binary students.**

**22) Collect Sexual Orientation and Gender Identity (SOGI) Data**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates and/or patient questionnaires include specific field for name the student would like to be called (i.e., lived name), and this field is not referred to as a "preferred name."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires include specific field for student's pronouns, and this field is not referred to as "preferred pronouns." An open-ended "other" option is also available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires include specific fields for gender identity in a two-step process, where student is first asked about gender identity and then their sex assigned at birth. Open-ended "other" options are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires include specific field with options for sexual orientation, and this field is not referred to as a "sexual preference." An open ended "other" option is available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This question only appears if Do Not Intend to Implement is selected in question 22

**22A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for collecting SOGI data.**

**23) Use a Trauma-Informed Approach to Sexual Health Promotion & Clinical Care**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
The mission statement for the department or program requires that services are trauma informed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strategic planning or goal setting requires that services are trauma-informed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies or procedures are in place requiring clinicians to obtain patient histories while patients are clothed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies or procedures are in place to allow the presence of a support person for the patient during a clinical encounter.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies or procedures are in place requiring clinicians to inform the patient that the patient is in control and is able to stop any clinical encounter at any time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies or procedures are in place requiring clinicians to use language patient uses for their own anatomy throughout the clinical encounter. EHR templates and/or patient questionnaires reflect this requirement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health education programs always inform the audience of upcoming content -- sometimes called giving a trigger warning -- to empower participants to choose whether or not to engage with the material.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health education programs always affirm at the beginning that participants are free to leave for any reason at any time during the program to take care of themselves.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health education programs relevant to sexual health always set an expectation that participants will use inclusive language and honor participants' use of terms to describe themselves and their bodies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff are required to be trained in trauma-informed practice.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This question only appears if Do Not Intend to Implement is selected in question 23

**23A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for using a trauma-informed approach to**

**sexual health promotion & clinical care.**

**24) Address Confidentiality Concerns**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policy is in place protecting patient confidentiality to the maximum extent permitted by state law (e.g., explanation of benefits [EOB] is sent to patient, not policyholder).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Website, EHR templates and/or patient questionnaires inform patients of the ways in which their health information is kept private and/or confidential, as well as any circumstances when information may be disclosed (e.g., Clery Reporting, Title IX). Patients are also informed that they do not have to answer any questions they do not want to answer when receiving services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual health services are provided at low or no cost for patients who do not wish to bill their insurance for these services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient bills or account charges list services generically (e.g., "Student Health Center Fee" instead of "Birth Control Visit").	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Online student health portal explicitly encourages students to have different passwords than ones used for other university accounts, and to avoid sharing those passwords with anyone.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 24**

**24A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for addressing confidentiality concerns.**

**25) Make Referrals Appropriate**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Organization maintains a referral list for sexuality professionals on campus and in the broader community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place to refer a student and/or patient who discloses sexual or relationship violence to services not provided in-house (e.g., mental health services, academic accommodations, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies or procedures are in place regarding reporting of student and/or patient disclosures of sexual or relationship violence to institution's Title IX and/or non-discrimination office (if required).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place to refer a trans patient to any gender-affirming care not provided in-house.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place for linking patients newly diagnosed with HIV to comprehensive medical and mental health care, including referral to Partner Services/Disease Intervention Specialists.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place to direct clinical staff to refer patients to specialists for complicated STI diagnoses.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 25**

**25A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for making referrals appropriate.**

**26) Evaluate Your Efforts**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Quantitative data are collected, analyzed and used to evaluate and improve services and programming at least once per year.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Qualitative data are collected, analyzed and used to evaluate and improve services and programming at least once per year.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Qualitative and quantitative data collection and analysis is disaggregated to identify and address health disparities for different populations (i.e., by race, ethnicity, sexual orientation, gender identity, first generation status, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Qualitative and quantitative data collection and analysis include examination of utilization rates for sexual health services by different populations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A summary of evaluation efforts and responses made to improve services and programming is shared with community stakeholders at least once per year.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 26**

**26A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for evaluating your efforts.**

**Guidelines and Best Practices Assessment: HEALTH PROMOTION**

**27) Use the Socioecological Model to Improve Sexual Health**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Interventions emphasize primary prevention.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interventions focus on campus life and the many environments in which students live, work and play.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interventions address individual, interpersonal, organizational, community and societal levels.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interventions are designed in partnership with the student community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 27**

**27A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for using the Socioecological Model to improve sexual health.**

**28) Implement an Inclusive, Evidence-Based Availability Program for Safer Sex Products**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Safer sex supplies are available to students free of charge.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safer sex supplies are located in multiple spaces that are accessible to a variety of students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safer sex product program is publicized to students (e.g., through social media, websites, posters in student spaces, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-latex safer sex supplies are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental dams are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
External condoms are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Internal condoms are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-lubricated condoms are available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Latex and/or nitrile gloves are available in multiple sizes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Water-based lubricant is available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Silicone-based lubricant is available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 28**

**28A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for implementing an inclusive, evidence-based availability program for safer sex products.**

**29) Leverage Social Media**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Social media is used to provide positive, engaging messaging about sexual health.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social media metrics (e.g., impressions, shares, reach, etc.) are analyzed to assess effectiveness of content and measure engagement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social media content is created in consultation with students to amplify their voices regarding sexual health.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This question only appears if Do Not Intend to Implement is selected in question 29

**29A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for leveraging social media.**

**Guidelines and Best Practices Assessment: CLINICAL CARE**

**30) Be Proactive about Sexual Health with All Patients and Take an Inclusive, Comprehensive Routine Sexual History**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Clinicians engage patients in conversations about sexual health, as appropriate, during preventive visits -- not just during problem-focused sexual health visits.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires use the "8 Ps approach" to obtain sexual history (i.e., Preferences, Partners, Practices, Protection from STIs/HIV, Past History of STIs, Pregnancy, Pleasure, and Partner Violence).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires on sexual history use open-ended questions with nonjudgmental tone and demeanor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires include specific field for an organ inventory to guide screening and management of specific complaints for trans and non-binary patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This question only appears if Do Not Intend to Implement is selected in question 30

**30A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for being proactive about sexual health with all patients and taking a inclusive, comprehensive routine sexual history.**

**31) Assess Patients' Reproductive Goals**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates and/or patient questionnaires include field for patient's reproductive goals for the next year.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires direct clinicians to counsel students desiring pregnancy or not using reliable forms of contraception or who are otherwise capable of pregnancy (i.e., transmasculine students having penis-vagina sex) to take a supplement containing 0.4-0.8 mg of folic acid daily for the prevention of neural tube defects.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 31**

**31A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for assessing patients' reproductive goals.**

### 32) Assess for Trauma and Violence

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates and/or patient questionnaires screen patients for trauma and trauma symptoms using non-gendered language, in private, annually.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place to provide patients who screen positive for trauma and trauma symptoms with ongoing support or referred to appropriate agencies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 32**

**32A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for assessing trauma and violence.**

### 33) Orient Clinical Care Toward Prevention

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates, patient questionnaires, and/or other clinical decision support tools are used to remind clinicians of testing, vaccination, and other preventive care needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 33**

**33A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for orienting clinical care towards prevention.**

**34) Vaccinations**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
EHR templates and/or patient questionnaires for all patients age 45 years and younger include a question about human papillomavirus (HPV) vaccination status.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to recommend HPV vaccine to all patients age 45 years and younger who are not fully vaccinated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to recommend vaccination against hepatitis A virus (HAV) for any patients who are men who have sex with men (MSM), who have not previously been vaccinated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to recommend vaccination for Hepatitis B virus (HBV) for patients not previously vaccinated, patients at risk for HBV infection (i.e., through sexual exposure) or patients requesting protection from HBV without a specific risk factor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 34**

**34A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for vaccinations.**

**35) Cervical Cancer Screening**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policies and/or procedures are in place for clinicians to recommend screening for cervical cancer (via Pap test) for all patients with a cervix based on current national guidelines, regardless of sexual activity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to decide whether to perform a pelvic exam based on medical history or symptoms, in partnership with the patient.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to offer smaller-sized speculums during pelvic exams for patients who have never had penetrative vaginal sex, patients with a physical or psychological sensitivity, or if the patient expresses a preference.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 35**

**35A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for cervical cancer screening.**

**36) STI and HIV Screening**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policies and/or procedures are in place to allow asymptomatic patients who have not had a known exposure to be screened for STIs/HIV without a provider visit.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place to provide routine, opt-out HIV screening following recommendations published by the CDC.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4th-generation rapid HIV Ab/Ag POC testing is available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and procedures are in place to ensure an HIV test is offered when STI testing is requested, and STI testing is offered when HIV testing is requested.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place for clinicians to screen for STIs at all appropriate anatomical sites, following recommendations published by the CDC and USPSTF, regardless of patient's sexual orientation or gender identity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Policies and/or procedures are in place to permit patients to self-swab when possible, including oral and rectal samples, for self-motivated patients as indicated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 36**

**36A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for STI and HIV screening.**

**37) Implement Expedited Partner Therapy (EPT) Where Legal**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
At least once per year, the legal status of EPT in the state is reviewed with staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If legal, policies and/or procedures are in place to require clinicians to offer EPT to students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 37**

**37A) Please share any additional information/details that would help ACHA understand the challenges**

associated with meeting the Best Practices recommendations for implementing EPT.

**38) Offer Pre-Exposure Prophylaxis (PrEP) as Appropriate**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policies and/or procedures are in place to require clinicians to offer PrEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires used during routine wellness visits include questions about PrEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EHR templates and/or patient questionnaires used during PEP visit includes a question about PrEP, especially if the patient is in a sexual relationship with someone who is living with HIV.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patients eligible for PrEP are provided with resources to navigate insurance and enhance access (i.e., patient assistance programs, community resources, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PrEP patients are sent reminders for follow-up appointments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PrEP patients who miss their follow-up appointments are contacted to be rescheduled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**This question only appears if Do Not Intend to Implement is selected in question 38**

**38A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for offering PrEP.**

**39) Offer Post-Exposure Prophylaxis (PEP) as Appropriate**

	Do Not Intend to Implement	Intend to Implement, but have not yet Begun	Implementation in Progress	Implemented & Maintaining
Policies and/or procedures are in place to require clinicians to offer PEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This question only appears if Do Not Intend to Implement is selected in question 39

**39A) Please share any additional information/details that would help ACHA understand the challenges associated with meeting the Best Practices recommendations for offering PEP.**

**The End**

**Contact [Christine Kukich](#) at ACHA for specific questions about this survey. Thank you for taking the time to complete this survey.**

**When you hit the "submit" button below, your responses will be recorded and a summary of your submission will be displayed. You may download a PDF of your submission for your records.**