Internet-based Partner Notification (IPN)

January 31, 2011

The West Virginia Department of Health and Human Resources’ Office of Epidemiology and Prevention Services has developed this IPN protocol to provide guidance and oversight of usage of Internet-based Partner Services (IPS) based on epidemiologic data collected, thorough review of the current peer-reviewed literature, recommendations established by the Centers for Disease Control and Prevention (CDC) and is consistent with what other state health departments have implemented conducting IPS. This protocol does not replace the policy already in place by the West Virginia Office of Technology regarding Social Networking and serves as only guidance for individuals using IPN.
I. Introduction

Internet-based Partner Services (IPS) is the system used by Disease Intervention Specialists (DIS) within the IPN as an investigative and case management tool that utilizes Internet locating information in the process of notifying sex partners of individuals who have been diagnosed with an infection.

IPS is similar to traditional partner services, but differences do exist. Because of these differences, careful attention must be paid to issues such as cultural competency, computer security, and supervision.

Due to the overtly sexual environments encountered within the Internet, DIS conducting IPS must be well prepared to view explicit content. Moreover, DIS must be thoroughly trained in how to best use the Internet for partner services in accordance with this protocol and be properly supervised.

OEPS recognizes that not all Disease Intervention Specialists (DIS) may be comfortable with using IPS because of the potential for viewing explicit content. Therefore, DIS who prefer not to use IPN for this reason should discuss alternative possibilities with their supervisor including the possibility of requesting that another DIS may be asked to assist with IPS if needed.

West Virginia’s STD federal funding is contingent on using IPS as indicated in this protocol effective March 31, 2011, and therefore strict adherence to the protocol is required by all OEPS staff.

II. Definition of Internet-based Partner Notification

Internet-based Partner Notification involves using Internet-based Partner Services (IPS) as an investigative and case management tool that utilizes Internet locating information (e.g. email and/or website screen names) in the process of notifying partners of individuals who have been diagnosed with HIV or an STD.

Internet-based Partner Notification is the function within the domain of Internet-based Partners Services, specially, the function of communicating (usually via email) with the partners of a confirmed HIV / STD case.

III. Compatibility with WVDHHR Policy

OEPS staff or Disease Intervention Specialists (DIS) participating in Internet interventions would fall within official job duties as related to disease intervention, and are covered within the scope of the current DHHR Policy.
IV. **IPN Website Access**

Disease Intervention Staff (DIS) will have access to social network sites as recommended by CDC for IPS, in order for OEPS to continue receiving federal funding.* Access to the websites listed below are for case investigations only. Personal use of these websites on state owned equipment is prohibited. Other sites may be added at the request or direction of OEPS or CDC. (*CDC letter to OEPS is attached)

Those sites include:

- Manhunt
- Adam4Adam
- MySpace
- Craigslist
- Facebook
- Gay.com

CDC reports that data from several states employing IPS suggests that many young adults reporting Chlamydia and gonorrhea infections met their sex partners through social networking sites or by texting. Continued federal funding is contingent on assuring DIS access to websites where sex seeking occurs, including traditional sex-seeking sites as mentioned in the last paragraph of Section I of this document.

Training that is specific to the Internet and this protocol must be conducted to ensure that employees are able to direct the investigation and conduct the interviews around the original patients (also known as “Client” or "Index Patient"). Further, training will provide an overview of the IPN protocol, language used in electronic partner communications and how to properly assist contacts with information that choose to follow up with their health care provider. In addition, the training will reiterate the importance of keeping detailed records of all online searches, site registrations and communications with the contact. DIS should be able to explain to their supervisor in detail how the IPN is to work and the document tracking that is required in case investigations prior to performing any portion of IPS.

V. **Supervision**

All forms of partner services require quality assurance and monitoring by the supervisor. Because DIS will have access to sexually explicit websites, particularly clear guidance must be given and quarterly monitoring of the DIS work must be conducted. Effective supervision will reduce the likelihood of error or IPS misuse, in addition to demonstrating the program’s effectiveness. This ensures supervisors are able to provide regular updates to the State Epidemiologist if needed. All DIS conducting IPS must be able to provide their supervisors with detailed documentation or logs that includes copies of all correspondence sent and received online as part of IPN investigation which is explained in the monitoring section of the protocol. This will be part of the DIS quarterly pouch review with supervisors.
VI. IPS Website Venues

If IPS is deemed necessary, the DIS will attempt to communicate with the partner via the Internet. Only DIS specifically designated and trained in Internet-based Partner Services (IPS) will carry out Internet-based Partner Notification (IPN).

Once the DIS has joined the social network website as a user, they will receive a username and password. This is required before any search can be completed. Once a DIS registers with a site, they will likely be e-mailed a confirmation. A copy of the confirmation should be provided to the supervisor. This document should include the current username and password being used by the DIS in their investigation. In the event no e-mail is received from the website as a confirmation, the DIS should note the registration date, time, username and password generated. This information should be given to the DIS' supervisor.

When joining any social networking website, DIS are required to agree to their terms of service (TOS). These service agreements will ultimately define how confidential communication between persons relating on that specific website will be. All TOS are a legally binding agreement that outlines the site's operating policies. See the detailed E-mail / Instant Messaging Guidelines, sections IX and X of this protocol, before communicating with the contact.

VII. Computer Security

OEPS understands that network security policy is to reduce security risks and all IPS efforts will comply with existing Firewalls, Anti-virus, and backup strategies that are already in place. IPS efforts will comply with all computer security measures already in place by the West Virginia Office of Technology. This includes acceptable use, password usage, the use of email, specifications on browsers and their configuration/restrictions, remote access, and server configuration. DIS using IPS may be subject to increased security monitoring.

VIII. Routine Investigation

Before any IPS is initiated, the DIS will attempt to contact the potentially (STD/HIV/AIDS) infected person at a current or previously known physical address. Should the person not be at that known location, the DIS would ascertain if the person has an online presence in one of the social networking websites mentioned in this protocol. If the answer is yes, the DIS would ascertain the names of the social network websites used and any known username the person is using. The DIS would then log into the social network website and begin a search for that username. If the person or username is found, the DIS would make contact with the subject in the manner(s) explained in section IX. The DIS must keep a detailed record citing the reasoning for making an online contact. If the DIS does not have an account with the social networking website, then one should be created as explained previously in section VI. Only sites recommended in the IPN are accessible to the DIS.
IX. Instant Messaging /E-mail

E-mail communication is to be used rather than instant messaging. However, when e-mail communication is not possible, instant messaging may be carried out. Should instant messaging be instigated by the contact, the DIS would request that the contact call their office as soon as possible. The DIS may request a telephone number to reach the contact, or the DIS may request the contact’s number to initiate the investigation. Instant messaging should be the exception and not the rule. All instant messaging conversation must be printed and attached to the field record to document the conversation. If printing the conversation is not available on the website, then the DIS must complete a computer screen shot, by depressing the Control key on the keyboard and click the print screen button located at the top right of the keyboard. This will copy the screen onto the DIS clipboard. You can then open a Word document and paste the screenshot into that document. Right click that image and resize by cropping as needed.

DIS must be aware that instant messaging provides no assurance as to whom one is speaking with. E-mail is the preferred method of communication.

X. Detailed E-mail / Instant Messaging Guidelines

Initial Contact

When contacting the partner via the Internet, the DIS will use as the subject Line:

“I’m interested in meeting you” or “Worthwhile to meet me” or other approved message.

The message should begin with a statement that says: “The following is a confidential message and should only be read by the person whose email is xxx.aol.com.” Then the message should read: “Hi, My name is _____ with the West Virginia Department of Health and Human Resources and I need to speak to you about an urgent health matter. Please call me Monday-Friday from 8:30-5:00 pm EST at ______ or e-mail me at _____@wv.gov. Thanks in advance for your immediate response.”

If there is no response from the partner in two to three days, another e-mail should be sent.

The subject line will read, “Haven’t heard from you”. The message should read “Hi, this is _____ with the West Virginia Department of Health and Human Resources again. I urgently need to speak to you regarding a serious personal health matter. Please call me Monday-Friday from 8:30 AM-5:00 PM EST at ____________ or at _____@wv.gov.”

If the partner contacts the Health Department via the telephone, the DIS should ask questions regarding their physical description or distinguishing characteristics gathered from the original patient interview. They should also ask the contact what city and state they are calling from and attempt to get their full name, address and phone number so that a local DIS can contact them if they are out of the counselor’s jurisdiction. The DIS should also ask if they are the only user of the email account.
If the partner contacts the DIS via e-mail, an attempt should be made to get the partner to call the DIS by telling the partner that the information is highly confidential and to protect their privacy, it would be better to speak on the phone. If the patient insists on the DIS telling them via e-mail and refuses to call the DIS, the DIS should attempt to verify their identity with the limited information that was given by the Original Patient, e.g., physical description, ask if they are the only user of the email account, then tell them that the health department has reason to believe they have been exposed to a serious communicable disease. The DIS should inform the contact of the need for testing and treatment and recommend that they go to their local health department.

XI. Contact requests to visit their local health care provider

If the contact prefers to go to their private provider, the DIS should email the contact, as an attachment, a letter to give to their provider. The letter should read as follows:

Dear _______ (physician name):

Your patient may have been exposed to an infectious disease. Please call me at _______ so that we may discuss the recommended testing and treatment regimen.

Please refer to the unique identifier at the bottom of this letter when contacting me.

Thank you for your cooperation in this matter.

Sincerely,

__________, Disease Intervention Specialist
West Virginia Department of Health and Human Resources

Important: When the physician contacts the DIS, the DIS should ask the physician for the unique identifier number on the letter. The DIS should get the number to the physician and call them back to verify their legitimacy. After obtaining verification, the DIS should reveal the disease that the contact was exposed to and discuss the recommended test and treatment. In addition, the DIS should ask when the results will be expected and attempt to get a disposition from the physician.

XII. IPS Documentation Requirements

All correspondence must be printed and attached to the field record. All printed material, such as emails, chat sessions, or any other printable correspondence, should be attached to the field record and will be part of the quarterly pouch review for quality assurance.
XIII. Out of Jurisdiction Considerations (OJJ)

Geographic and jurisdictional boundaries are not recognized by the Internet. Patients and their partners frequently cross jurisdictions. OEPS will continue to share information with OJJ partners as is done with routine investigative practices. Questions regarding OJJ issues should be directed to the supervisor.

XIV. Monitoring and Evaluation

IPS quality assurance and monitoring must be conducted through frequent, routine and standardized evaluation by the supervisor.

Appropriate supervision will allow programs to assess and evaluate their efforts on the Internet, not only to quantify successes, but to avoid any potentially harmful/unintended consequences.

Every month, IPS surveillance data will be collected and analyzed. Due to the limited surveillance precedent for this type of data collection, successful IPS is still in the formative stages however, some standards still apply:

Always conduct IPS activities in a professional, sensitive and timely manner.

   A. Initiate all Internet cases within 24-48 hours of assignment.
   B. Follow e-mail and online messages according to Bureau's Internet Protocol and Guidelines.
   C. Maintain neat and legible Internet Logs including dates and dispositions.
   D. Disposition Internet cases within 2 weeks of assignment.
   E. Constantly communicate with the supervisor to report the online efforts of the IPN by DIS.

XV. Noncompliance / Abuse

Failure to comply with this protocol or misuse or inappropriate use of the websites listed in this protocol will be subject to the disciplinary actions explained in DHHR Office of Management Information Services’ Policy IT-0500 Section 4.10.

XVI. Attachments

1. Site registration proof
2. Sample log
3. CDC letter to OEPS requesting IPN / IPS
4. Employee Acknowledgement
Attachment 1

**Sample Log 1 (Account Registration)**

If you receive an e-mail confirmation that you have registered with the site and it has your username and password on it, then simply print it and give a copy to your supervisor.

If you do not receive an e-mail confirmation from the social network site when creating your account, then document the accounts in a format similar to this:

2/1/2011        Created an account on Facebook @ 2:00 p.m.

Username: MikeAnyone@wv.gov

Password: 565555LK

2/1/2011        Created an account on Craigslist @ 2:20 p.m.

Username: (Whatever)

Password: (Whatever)

Again, this would be printed and given to the supervisor. The supervisor needs a current username and password for these sites for quality assurance reviews. If even a username or password changes, the supervisor should be advised.
Attachment 2

**Online Contact Search (IPS) or Instant Message or Email Log:**

Sample of what a log might look like:

2/1/2011  Rec’d user name “_______” (username) from _________for _______(site).

2/2/2011  Online to make contact with ____________ 3:00-3:30pm. Sent e-mail one (print a copy from your sent folder and attach)

2/5/2011  Online to see if there was a reply 1:00-1:30p.m. Checked again at 2pm, still no reply. Then sent e-mail 2 2:03 p.m. (print a copy from your sent folder and attach)

2/5/2011  Received phone call from subject. Subject wants to see his doctor. E-mailed attachment for doctor.

2/6/2011  Attached to pouch.

** Remember to attach all hardcopies to the field record

*** If you are unable to print your message that you sent, you should do a screen shot.

While depressing the control button, click the print screen button. This will put a copy of your screen on your clip board. Open Microsoft Word and click paste into a new document. This will copy your screen image. You can enlarge. If you need to crop that image, you can right click the image directly and then click size. Put numbers in the crop box to adjust the final look.
January 25, 2011

Loretta Haddy, Ph.D.
State Epidemiologist/Director
Office of Epidemiology and Prevention Services
350 Capitol Street, Room 125
Charleston, WV 25301-3517

Dear Loretta:

I am writing this letter to support your efforts to enhance Internet Partner Services (IPS) for persons infected with or exposed to sexually transmitted diseases (STD), including HIV. As you know, the Internet has become one of the most popular venues for meeting sex partners, especially among men who have sex with men (MSM) and young adults 15-24 years of age. Within West Virginia, according to the information contained in the latest interim progress report, four cases of early syphilis were reported during January-June 2010, all of which reported MSM activity. Moreover, two of the four were coinfected with HIV and reported elicitation of sex partners through the Internet. During the first six months of 2010, 78 percent (1398/1790) of all reported chlamydia infections and 68 percent (151/224) of all reported gonorrhea infections occurred in young adults 15-24 years of age during this same time period. Preliminary data from several states employing IPS suggests that many young adults reporting these two infections met their sex partners through social networking sites or by texting.

The Division of STD Prevention has issued two Dear Colleague letters (in 2005, and again in 2010) encouraging public health programs to adopt and incorporate use of the Internet and other emerging technologies into STD and HIV prevention efforts. Additionally, as a condition for continued STD funding, all STD programs must have IPS protocols in place and ready for implementation no later than March 31, 2011, as specified by the 2011 CSPS continuation guidance. Failure to do so will result in funding restrictions and ultimately, withholding of some CSPS funds.

Specifically, the West Virginia Division of STD, HIV and Hepatitis must ensure access to sites where sex seeking occurs, including traditional sex-seeking sites such as Manhunt and Adam4Adam, as well as social networking sites such as MySpace, Craigslist, and Facebook. The Internet can no longer be considered as an emerging venue, but rather as a venue that STD and HIV prevention programs must use to meet the public and provide education to help stem the spread of disease.

I look forward to continuing to work with you to ‘stand-up’ Internet Partner Services in West Virginia. Please let me know if you have any questions or need additional assistance.

Sincerely,

Ronald Turski
Unit Chief
DSTD/PTB
EMPLOYEE ACKNOWLEDGEMENT
INTERNET PARTNER PROTOCOL

I acknowledge that I have read and understand the Internet Partner Notification (IPN) protocol for the West Virginia Department of Health and Human Resources’ (DHHR) Office of Epidemiology and Prevention Services. I understand that I must be trained before I can use IPN as a tool for HIV/STD/AIDS investigations. Further, I understand that when conducting IPS, I must attach documentation required in the protocol to the field pouches that are reviewed by my supervisor.

I acknowledge and understand that by having increased access to websites listed in the protocol which are normally deemed inappropriate and blocked by the DHHR, I will subject myself to increased Internet monitoring by DHHR Management Information Services (MIS) and/or the State of West Virginia’s Office of Technology personnel. I understand personal use of the websites, listed in the protocol, on state owned computers are prohibited during work time. I understand that failure to abide by the protocol will result in employee disciplinary action.

Employee Signature: ____________________________________________________________

Date: _________________________________________________________________________

NOTE: Print, sign and return to your immediate supervisor. Employee may keep a copy for their records. The original signed copy of this acknowledgement form is to remain in the employee’s personnel file.