BACKGROUND
Historically, registered nurses have been the primary providers of STD clinical services in most North Carolina local health departments. However, in the early 1990s, a statewide shortage of adequately trained nurses to provide these services prompted a series of focus groups. Working with its partners, the Division of Public Health and the University of North Carolina at Chapel Hill (UNC-CH) established the first STD ERRN Course in 1994. As a result, this collaborative educational initiative helps to assure accessibility and availability of STD services throughout North Carolina. By standardizing the training of registered nurses and by following the Centers for Disease Control and Prevention (CDC) Guidelines, the North Carolina Public Health System can offer high quality, appropriate care in every county within the state. When integrated with community prevention and detection programs, better care means better disease control.

Offered through the UNC-CH Office of Continuing Education (OCE), the course combines online lectures from the Physical Assessment of Adult Course and the STD ERRN Course with a supervised clinical practicum. Another partnership formed in 2006 when CDC provided funding for the Alabama-North Carolina HIV/STD Prevention Training Center (PTC). The Prevention Training Center provides support for STD ERRN continuing competence by offering a two-day experiential training for STD ERRNs and other clinicians who need to keep their clinical skills current.

POLICY

The N.C. Department of Health and Human Services (DHHS) Consolidated Agreement with Local Health Departments, Agreement Addenda 536 declares that:

“STD services are defined as taking a medical history including sexual risk assessment, a physical examination inclusive of the upper and lower body, laboratory testing, treatment, counseling, and referral necessary for the evaluation of individuals with an exposure to or symptoms suggestive of a sexually transmitted infection. In the public health setting, this would include primary prevention such as STD screening in asymptomatic clients based upon the client’s site(s) of exposure. Appropriately, trained staff refers to MDs, NPs, PAs and STD Enhanced Role Registered Nurses (STD ERRN) who provide the exam component of the STD evaluation….

4) STD services are to be provided in accordance with the current Centers for Disease Control and Prevention (CDC) STD Guidelines and the North Carolina Division of Public Health (DPH) STD Treatment Guidelines as published in the current North Carolina Sexually Transmitted Diseases Public Health Program Manual.

5) All standing orders for the treatment of sexually transmitted infections are to be written in the North Carolina Board of Nursing format. Individual standing orders will be current, aligned with actual practice, readily available in the clinical setting, and signed annually for Registered Nurse providers by the LHD medical director and/or physician in charge of STD clinical services.

6) The STD ERRN must maintain competency to perform evaluation, testing, treatment, counseling and referral of clients seeking care for sexually transmitted infections through ongoing local health department quality assurance monitoring and through CDB Regional Nurse Consultant monitoring.

7) The STD Program in the local health department must have clinician oversight by a registered nurse, mid-level practitioner, or physician….
Performance Measure #3:
The Local Health Department will ensure all Registered Nurses who provide clinical assessment and management of clients with STD concerns complete the STD Enhanced Role Registered Nurse (STD ERRN) training course. After completion of initial STD ERRN training, the skill level of each nurse must be maintained through an acceptable level of practice. An acceptable level of practice is assessment and management of at least 50 STD male and female clients per calendar year and 10 hours of relevant clinical continuing education per calendar year. Alternatively, if the annual practice hour assessment and management requirements cannot be met locally, the STD ERRN must complete a designated STD Prevention Training Center (STD PTC) practicum within the calendar year. Exceptions to this requirement for assuring continuing competency will be considered on a case-by-case basis by making a request in writing to the Technical Assistance and Training Program Supervisor or designee.

Reporting Requirements: The Local Health Department must submit electronically a list of the STD ERRN providers, the date the initial STD Enhanced Role training was completed, a list of continuing education courses with number of relevant contact hours completed for each course, the total number and gender of STD clients assessed, and the dates of STD PTC courses attended, if applicable. Documentation of practice and continuing education will be reported annually, no later than January 15th of the following calendar year using DHHS form: STD ERRN Continuing Education and Skill Maintenance Verification. The Local Health Department must be able to list clients seen by each STD service provider using a unique identifier such as the Local Health Department medical record number.

DEFINITIONS
STD Client – Individual presenting for the following reasons:
1. Genital lesion(s) or other lesions suggestive of STD(s)
2. Genital discharge, dysuria, dyspareunia, or genital itching/pain
3. Partner with genital discharge, genital lesion(s), or other symptoms suggestive of STD(s)
4. Partner examination and treatment for STD(s)
5. Referral by Disease Intervention Specialist (local or state STD investigator)
6. Referral by private provider (local private practice, FQHC, local hospital emergency departments)
7. Positive test for STD
8. Individuals requesting testing or screening for STD(s)

STD Services – Secondary prevention activities (history, exam, testing, treatment, counseling, and referral) needed to evaluate and manage individuals who have symptoms, and/or history suggestive of an STD or exposure to an STD.

- STD services are designed to intervene in transmission of disease. In the public health setting, this includes primary prevention such as STD screening in asymptomatic clients.

STD Exam – Includes examination above as well as below the waist. Components are: oropharynx, lymph nodes, skin, genitalia (including bimanual and speculum examination for all non-pregnant females), anal visualization for lesions. Specimens will be collected from all exposure sites as directed in the laboratory standing orders.

Client-centered – Counseling tailored to the behavior, circumstances, and special needs of the individual. Focus is on personal risk assessment and development of a personalized action plan.

Relevant Communicable Disease Rules and Regulations
- 10A NCAC 41A .0202
- 10A NCAC 41A .0204
THE STD ENHANCED ROLE REGISTERED NURSE COURSE

COURSE REQUIREMENTS

Registered Nurses who wish to enroll in the STD ERRN Course should contact Kasey Decosimo at kasey_decosimo@unc.edu 919-960-1125.

The course coordinator will forward a copy of the Required Joint Planning Agreement – STD Nurse Clinician Training document to the Director of Nursing and the participant along with other course information upon receipt of registration for the course. Once this document is signed by the local agency, a copy should be forwarded to the course instructor at UNC-SPH OCE and STD Communicable Disease (CD) Technical Assistance & Training Program (TATP) nurse consultants.

The STD ERRN Course is a partnership between the Local Health Department, the University, and the Division of Public Health. This partnership is officially documented via sign-off on the Required Joint Planning Agreement – STD Nurse Clinician Training by the following parties: Registered Nurse participant, clinical advisor, supervisor/manager, and the Course Instructor. A copy of this agreement is also sent to the STD TATP Communicable Disease Nurse Consultant for approval of clinical advisor(s).

COURSE EXPECTATIONS

Registered nurses will acquire the knowledge and skills necessary to evaluate and manage individuals who have symptoms or history suggestive of sexually transmitted infection or exposure to sexually transmitted infection. The practicum assures skills that meet standards of care as outlined in standing orders for assessing clients with STD concerns, ordering and interpreting lab data, and treating/managing STDs.

COURSE FORMAT

The course is a combination of self-paced, independent study (viewing videos and presentations, completing reading and other assignments), a one-hour orientation webinar and six self-paced modules, followed by a five-month clinical practicum. The STD ERRN Course requires Physical Assessment of the Adult (PAA) as a prerequisite. Currently the University offers the combined courses of PAA & STD ERRN twice a year if there is at least 10 participants. The classes are not required to be taken conjointly. Please contact the University if your agency has special needs.

HIV Prevention Counseling and Testing

HIV counseling, testing and referral training is NOT offered in the context of this course. However, participants must complete this training prior to completion of the STD Nurse Clinicians Training clinical practicum. The approved training is available at no cost to the participant through Whetstone Consultations (http://whetstoneconsultations.com/). Alternative training may be acceptable as long as the Communicable Disease Branch (NC DPH) approves it. Participants may also get information on HIV counseling, testing and referral training by contacting your Communicable Disease Regional Nurse Consultant (http://epi.publichealth.nc.gov/cd/lhds/manuals/cd/tat/TATPMap.pdf).

COURSE FACULTY

Coordinator: Kasey Decosimo, MPH, Distance Learning Specialist, N.C. Institute for Public Health/Office of Continuing Education

Instructor: Jean Davison, RN, DNP, FNP-BC.

STD COURSE STRUCTURE

Participants must:
- Complete all modules
- Submit all AL/NC PTC transcripts
- Pass a written final exam with 80% or better.
- Complete a course evaluation
- Successfully complete the practicum using DHHS Form 4046 - Clinical Examination Coaching Tool
- Submit required logs of clinical exams
- Complete the HIV Counseling and Testing training

Didactic – Six modules presented via online course

Practicum – Five-month practicum working with an approved clinical advisor. The clinic must have sufficient client volume to support the following requirements:
- Competency in assessing and managing at least 4 males with STD concerns
- Competency in assessing and managing at least 8 females with STD concerns
- Documentation on STD ERRN student log form all exams performed competently in accordance with standing orders.

Combined Physical Assessment of Adults (PAA)/STD Practicum – RNs may elect to take the PAA course and STD course back-to-back and complete the PAA practicum in conjunction with the STD practicum. Combined PAA/STD participants must meet the following exam requirements:
- Ten (10) must be head-to-toe exams.
- Four (4) must be male with STD assessment
- Fifteen (15) must be female; 8 of these must include STD assessment.
- Documentation on PAA/STD log form all exams performed competently in accordance with standing orders.

Competency in assessing and managing twelve (12) STD clients as described above may require more than 12 STD patient encounters in order to develop competency. If client volume does not allow adequate opportunities to develop required competencies for managing male and female clients with STD issues, consult with the CD TATP nurse consultant to develop strategies for assuring competence.

CLINICAL ADVISOR QUALIFICATIONS

- Acceptable clinical advisor credentials include family nurse practitioner certification, PA, MD, OB/GYN nurse practitioner with certification inclusive of male exam, STD Enhanced Role RN with at least 12 months experience in provision of HIV/STD services.
- Knowledge of current CDC Treatment guidelines

CLINICAL ADVISOR RESPONSIBILITIES

- Clinical advisor present in the exam room with the trainee during the practicum period
- Clinical advisor assures current STD standing orders guide practice
- DHHS Form 4046 - Clinical Examination Coaching Tool should be utilized to assess trainee strengths and needs and guide coaching for competency
- Clinical advisor assures lab observation of stat lab procedures for STD specimens
- Clinical advisor assures appropriate documentation of STD visit
- Clinical advisor signs-off on STD client encounters conducted proficiently per standing orders
FINAL SIGN-OFF

- Upon completion of the practicum with clinical advisor(s), the log sheet documenting proficiency, per clinical advisor sign-off, on 4 male and 8 female STD encounters will be forwarded to the course instructor at UNC-SPH OCE.
- Arrangements will be made for an onsite visit by UNC-SPH OCE nurse practitioner to observe the trainee in provision of appropriate STD assessment and management for one female and/or one male client in accordance with HIV/STD standing orders.
- The final check-off tool (Final Clinical Check Off for STD Assessment and Treatment Clinical Practicum) will be used for scoring the following elements of the patient encounter:
  - Appropriate STD history
  - Appropriate STD exam
  - Appropriate labs and specimen collection
  - Appropriate plan for management
  - Consultation and referral as indicated
  - Client-centered Counseling
  - Documentation

COURSE CHALLENGE

Registered nurses with prior STD clinical experience may challenge the course. After passing the challenge exam with 80% or greater, the RN may go directly to the practicum portion of the course.

In the interest of public health, STD services that meet standards of care must be available while health department nurses are awaiting entry into the STD Enhanced Role Course. In the past, the North Carolina Board of Nursing has advised that potential STD Nurse Clinicians can provide STD services within practice parameters if they receive onsite training that includes a didactic component, as well as a “hands on” clinical component with a skills check-off list. This onsite training is not intended to be a long-term substitute for meeting the agreement addenda, but only as an interim solution to maintain service provision while registered nurses are waiting to attend the next available training. In order for onsite training to take place, it is essential that current standing orders and STD Program policies are signed and available to guide practice.

If a local health agency wishes to request a temporary, alternative arrangement for providing STD services, the agency should contact Tammy DuBrey or Vivian Mears, N.C. Division of Public Health, Communicable Disease Branch. A final decision will be made in conjunction with the OPHN&PD and the N.C. Board of Nursing.

RECIPROCITY

Registered nurses who have experience and training in providing STD clinical services while working in another state or U.S. territory are eligible to challenge the STD ERRN Course.

ANNUAL STD ERRN RE-ROSTERING REQUIREMENTS

In 2015 revisions were made in the re-rostering process. From January 1 through December 31 of each year, a currently rostered STD ERRN must provide STD services for a minimum of 50 STD clients and obtain 10 continuing education contact hours relevant to assessment, evaluation, treatment, management, and prevention of sexually transmitted infections.

Medicaid Billing

It is the responsibility of the STD ERRN and the employing agency to assure that the STD ERRN meets re-rostering requirements in order to bill Medicaid for the STD services provided. The Office of Public Health Nursing and Professional Development advises that the STD ERRN services are billable in 15 minute increments using code T1002. Services provided by RNs who are not rostered STD ERRNs cannot be billed to Medicaid but can be reported to HIS using the local use code LU242. The STD ERRN may observe clinical findings requiring a referral to a medical provider during the same clinical visit. Under these circumstances, the STD ERRN should use local use code LU282 to record her time.

STD ERRN Description of Clinical Services in Public Health  rev10/2015
Those agencies with insufficient STD patient volume to meet the re-rostering practice requirements should at a minimum assure RN attendance annually in one of the Alabama-North Carolina Prevention Training Center (AL/NC PTC) STD Intensive courses.

SUMMARY
The STD ERRN has an integral role in STD control and treatment in local health departments. The STD ERRN must be properly trained and credentialed and maintain their continued competency while working in the STD clinical setting.