



Consent & Confidentiality

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❖ The AYAH Center recently released a brief report, *Improving Receipt and Preventive Care Delivery for AYAs: Initial Lessons from Top-Performing States*, that describes and discusses an inquiry of promising strategies for improving access and preventive care delivery in selected high-performing states. To read this report, [click here](#). To access extended state-level examples and resources for each identified strategy, read the AYAH Center's compendium [here](#).

Greetings from the Adolescent and Young Adult Health National Resource Center (AYAH Center)!

Your friends and colleagues are pleased to be sharing our bi-monthly newsletters with you. Throughout the year, we will use this newsletter to:

- Provide information about trending topics in adolescent and young adult health and health care
- Share our resources, including resources from the Collaborative Improvement and Innovation Network (CoIIN)
- Keep you up-to-date about upcoming events related to adolescent and young adult health and health care

To subscribe to the newsletter, email Karissa Charles at kcharles@amchp.org. We welcome your ideas and feedback, and you are free to unsubscribe at any time.

From the Experts

Minor Consent & Confidentiality: Public-private partnership driving efforts in Mississippi

The Mississippi (MS) State Department of Health and Mississippi First are partnering to improve the provision of confidential care to adolescents. AYAH-NRC staff recently spoke with project leaders to learn more about their experiences in this effort. Participating in the conversation were:

- Danielle Lampton, Adolescent Health Coordinator, MS State Department of Health
- Emily Feher, Director of Teen Health Mississippi at Mississippi First, an advocacy and training non-profit organization
- Abigail English, Director of the Center for Adolescent Health & the Law, with expertise in adolescent consent and confidentiality laws.



Ms. Lampton and Ms. Feher are part of Mississippi's AYAH-CoIIN, supported by the AYAH National Resource Center. Ms. English is a consultant to the AYAH National Resource Center.

In 2014, [Mississippi First](#) (MSF) was funded to improve the capacity of teachers and clinics to provide sexual health education and services, as part of a larger effort to improve adolescent sexual and reproductive health in Mississippi. With this funding,



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News You Can Use

❖ The Adolescent and Young Adult Health Research Network (AYAH-RN) developed a review article that was recently published in the *Journal of Adolescent Health*. The article, *Research on Clinical Preventive Services for Adolescents and Young Adults: Where Are We and Where Do We Need to Go?*, by Harris et al., reviews research on strategies to increase and improve delivery of preventive services for adolescents and young adults (AYAs), includes relevant research on parents and highlights emerging technologies while preserving privacy and confidentiality. To access this article for free, click [here](#).

MSF conducted a survey to assess policies and services in the state's publicly-funded health centers. Survey results indicated confusion among clinic staff and providers on issues shaping the provision of confidential care, such as whether their services were supported by the federal Title X family planning program and the significance of this designation. Ms. Feher noted, "This is important since Title X status trumps state laws. This survey highlighted the need to clarify for clinics how state and federal laws impact confidentiality in sexual health services."

In response, MSF partnered with the State Department of Health to help providers and clinic staff better understand the complex web of laws related to consent and confidential care. MSF began spearheading the creation of a comprehensive guide for health care providers on confidentiality laws, minor consent laws and reporting responsibilities, but they recognized the need for expertise to ensure the accuracy of the resource. Through the AYAH-CoIIN, MSF and the state health department were connected to Ms. English. With her guidance, they created the [Minor Consent & Confidentiality in Mississippi](#).

After the resource guide was released, health care providers voiced additional questions around consent and confidential services. "It seems like when we answer one question, it leads to five more," said Ms. Lampton. As a next step, MSF and the state MCH program convened a one-day training to help providers understand both the laws and how to ensure that clinic policies are aligned with state and federal laws. Ms. English participated as a subject matter expert in the planning of the training and went to Mississippi to teach in person. The conference was attended by providers and other staff from the state's Federally Qualified Health Centers, adolescent health clinics and public health clinics. Members of the MSF's youth council were also invited to share their perspectives and experiences with accessing confidential care. Following the conference, MSF created [webinars](#) on confidentiality and sexual/reproductive health services for partners in the Mississippi Delta. The next phase of this project will focus on translating the resource guide into materials for young people.

Ms. Lampton and Ms. Feher expressed that the public-private partnership made this project more effective.

"It was great to partner with a non-profit that could do the policy research and make this resource available online. It would have taken a year to get state approval," stated Ms. Lampton.

Ms. Feher believes that partnering with the state gave them access to a large network of clinics.

"We couldn't have had the same reach if we did it on our own."



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News You Can Use

❖ The AYAH Center is now offering monthly interactive web-based trainings and discussion forums focused on creating youth-centered care and well-visit youth marketing! These monthly trainings will allow state MCH professionals and colleagues to connect, explore and share ideas about what works to improve health care for youth (adolescents and young adults, ages 10-25). See details for the first web-based training in the save the date section below.

Save the Date

❖ [Health Care 101: Overview of Health Care System for Adolescents/Young Adults](#)
Feb. 28, 2017. 2-3 pm ET.
Join state MCH professionals and colleagues in this interactive web-based training to learn about the health care system that serves adolescents/young adults. Participants will explore the systematic arrangement of how care is delivered and learn about opportunities where improvements can take place to ensure youth-centered care.

Ms. English appreciated that the day-long training allowed participants to gain a greater understanding of the laws.

“This is the first time I’ve been invited to a state to give an all-day training on this issue. Usually I am invited to give a one-hour presentation. My talks are generally well-received, but this training allowed for real engagement with the participants to increase understanding of complex information. I know what the laws are, but I can’t bring knowledge of how those laws are playing out on the ground in the state.”

When asked if they had advice for other states, Ms. Lampton said, “For people who work inside a large state agency: be able to justify why confidentiality should be a big focus. Have your data! Also, it’s important to have personal stories. For us it was connecting with our youth council and highlighting their personal stories about why this topic is important that helped drive our work.”



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When Students become the Teachers: Wisconsin PATCH Program

We have seen through social media and recent youth movements that many youth in this society want to be leaders and to have their voices be heard. When they do open up to adults, they want the information that is shared to be handled with care and respect. Learning to hear youths’ voices in regards to their health care is critical for providers to deliver high-quality, youth-friendly services. This critical component to care also provides an opportunity for youth to take charge of their health as well as share openly and honestly with their health care provider about their questions or



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Save the Date

❖ AMCHP 2017:

Engagement with Intention: Inclusivity, Diversity & Non- Traditional Partnerships

**Mar. 4-7, 2017. Kansas City
Marriot Downtown. Kansas
City, MO.**

Connect and network with more than 800 public health officials who share an interest in maternal, child and adolescent health.

Conference session topics will include using technology to advance MCH outcomes, cultural competence, family-centered care, and health care financing and coverage.

It is also a firsthand opportunity to learn about changes occurring in the MCH field, such as the Block Grant transformation and Affordable Care Act transition. Be sure to also learn from your colleagues in the AYAH CoIIN states at the AYAH Center's skills building workshop on Saturday, March 4, from 9:30 a.m. to noon.

concerns. The Wisconsin Alliance for Women's Health recognized these key factors and used them to start the Providers and Teens Communicating for Health (PATCH) program seven years ago.

PATCH is an innovative, youth-driven program working to ensure all adolescents are able to access high-quality, youth-friendly health care services in their community. It gives adolescents and young adults the opportunity and tools to be leaders and teachers for their community providers. At the beginning of each project year, PATCH community sites recruit, hire and train adolescents and young adults as teen educators. Using a year-long curriculum, young people engage in bi-monthly enrichment education and are trained to facilitate two types of workshops: PATCH for Providers and PATCH for Teens. These teen educators vary in race, socioeconomic status, sexual and gender identity, geographic location, family life and overall experiences, but they all share the same vision – improving the health of their generation.

The workshops that the teen educators facilitate include practical presentations, interactive teaching techniques and meaningful conversations that are specifically tailored towards providers and teens. In the PATCH for Providers workshop, teen educators give health care professionals insight into the concerns and preferences for the current generation of youth. Learning objectives for this workshop include:

1. Increased knowledge about the concerns, fears, preferences and priorities of teen patients, as well as skills and resources to facilitate open, honest and effective communication with teens
2. Increased confidence in personal ability to provide high-quality care to teens by creating a confidential, non-judgmental environment that allows teens to be open, honest and feel supported
3. Behavioral intentions to utilize knowledge, skills and resources to create a confidential, non-judgmental health care environment that allows teens to be open, honest and feel supported

The PATCH for Teens workshop is designed for teen educators to inform, engage and empower their peers to be active participants in their own health care experience. This workshop uses the voices and images of PATCH teen educators, as well as experiences of the students in the classroom, to ultimately review three key topics: Relationships, Rights and Responsibility. The workshop explores teens' health care rights (such as confidentiality, emotional support and access to certain adolescent health services), engages in conversations about their responsibility to be open and honest with health care providers, and ultimately empowers them to take advantage of the knowledge, advice and treatment that health care providers offer.



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Save the Date

❖ [30th Annual Research & Policy Conference on Child, Adolescent and Young Adult Behavioral Health](#)

Mar. 5-8, 2017. Hilton Tampa Downtown. Tampa, FL.

Join national and international participants to talk about important issues impacting the behavioral health of children, youth and families and to learn more about cutting-edge behavioral health research and best policy practices for these key populations.

❖ [2017 SOPHE Student Case Study Competition](#)

Mar. 29, 2017.

Association of Schools & Programs of Public Health. Denver, CO.

The SOPHE Case Study Competition is designed to give undergraduate and graduate health education majors the opportunity to display expertise they have developed during their time as students. Teams of two to three students are challenged to solve a real-world health problem using the competencies required of a school or community health educator.

This model has proven to be unique and rewarding for teen educators, providers and other young people because it gives power back to the youth by letting them be leaders in their community. Teen educators have reported that the program has allowed them to 1) Gain positive mentors; 2) Build meaningful relationships with community providers; 3) Advocate for their peers; 4) Have a clear understanding of their health care rights for themselves and their peers and 5) Impact their community. It also provides a way to bridge the communication gap between providers and youth by allowing providers to hear the values and needs of the population they serve directly from the teen educators.

This program has made a clear impact in the communities of Wisconsin over the past seven years. Its success encourages other communities to adopt this model to improve youth-provider relationships and provide high-quality, youth-friendly care. For more information about Wisconsin PATCH, visit their website [here](#). To see how your community can launch its own PATCH program, see the [Planning for PATCH guidebook](#).



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What do we know about engaging parents in supporting confidential care for adolescents?

Confidential care is a key component of care for adolescents and is recommended by professional health guidelines. Time alone with a clinician provides an opportunity to discuss and address sensitive issues, such as sexual health, mental health and substance use. When confidentiality is not assured, adolescents are more likely to forego needed care and less likely to disclose health risk behaviors and return for follow-up care. Confidential care also helps adolescents to develop an independent



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❖ [Conference on Adolescent Health](#)
Apr. 24-25, 2017. Ann Arbor, MI.

Join the Adolescent Health Initiative and other healthcare and public health professionals to learn about adolescent health-related research, evidence-based practices related to adolescent health topics such as mental, sexual and nutritional health, and evidence-based communication skills for working with adolescents.

❖ [National Conference on Health Disparities](#)
May 3-7, 2017. New Orleans, LA.

Participate with health professionals around the country to learn ways to reduce health disparities through sustaining and strengthening healthy communities.

relationship with a provider and begin learning how to navigate the health care system which they will ultimately have to do as adults. However, many providers do not routinely provide adolescents with confidentiality assurances or time alone, thus missing opportunities to screen and counsel them on important health issues. A key barrier to the provision of confidential health services is the potential negative reactions from parents.

How can we ensure the provision of confidential care and support parents as they help their child navigate through a myriad of challenges and changes during adolescence? Providers and parents share common goals: they both want adolescents to be safe, healthy and to take greater responsibility for their health and behaviors as they transition to adulthood. While research in this area is limited, studies do suggest some ways in which parents can be engaged in supporting confidential care:

- Acknowledge the important role parents play in the lives of teens and encourage teens and parents to talk together.
- Whenever possible, prepare parents early on during the patient's transition from middle childhood to early adolescence that subsequent visits will include time alone with the teen and help parents understand the benefits of confidentiality.
- Educate parents that a normative part of adolescent development is to become increasingly self-sufficient, responsible and eventually independent. Confidential care provides an opportunity for providers to support adolescents with gradually taking greater responsibility for making decisions about their own health and for navigating the health care system more independently.
- Confidentiality can also help adolescents to develop a trusting relationship with a provider which allows teens to obtain accurate information and make it easier for the teen to tell the provider what's really bothering him/her.

Helping parents understand and appreciate the value of confidential care for adolescents, through improved partnerships between parents and providers, may prove to be an effective strategy to further increase adolescents' access to comprehensive confidential preventive health services. While clinicians can do some of this in the context of a visit, state Title V programs and other public health partners can also lead efforts to educate and support parents through this important time in development.



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Save the Date

❖ [2017 National Sexual Health Conference](#)

July 6-8, 2017. Denver, CO.

Attend the 2017 National Sexual Health Conference where the varied disciplines of education, advocacy, clinical care and others come together to share information, efforts and best practices around sexual health across the lifespan.

❖ [2017 International Conference on Adolescent Nursing, Adolescent and Young Adult Health](#)

July 17-18, 2017. Rome, Italy.

Join leading academic scientists, researchers and research scholars to exchange and share experiences and research results on all aspects of adolescent nursing and adolescent and young adult health. It also provides a platform for researchers, practitioners and educators to present and discuss the most recent innovations, trends and concerns – as well as practical challenges and solutions – in the fields of adolescent nursing and adolescent and young adult health.



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Selected Resources From AYAH Center



Check out resources the AYAH Center has for you on consent and confidentiality!

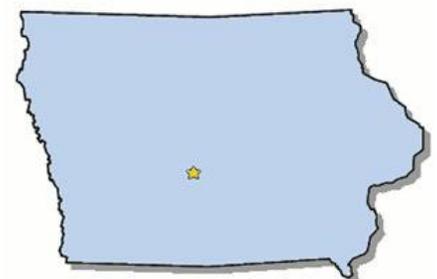
- [Resources on Confidential Care](#) (NAHIC): This page offers an assortment of resources on AYA consent and confidentiality, including brief reports on Explanation of Benefits (EOBs) and state-level readiness in California and New York State to fulfill confidentiality and consent policies.
- [Confidential Risk Assessment for Adolescent Sexual Health Services](#) (SAHRC/Michigan State University): This webcast reviews the literature, laws and guidelines on adolescent risk assessment and confidentiality, discusses practical ways to implement confidential risk screening in a clinical setting and provides best practices for addressing risk behavior with patients and parents.

CoIIN Corner

Stay informed with our state-by-state CoIIN highlights!

Iowa

One of the areas the Iowa CoIIN team has focused on is the sports physical as a way to drive education, marketing and emphasis on the more comprehensive adolescent well-visit. Recently, Dr. Ken Cheyne from UnityPoint applied and was awarded an AAP Community Access to Child Health ([CATCH](#))





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Save the Date

❖ [2017 National Conference on Health and Domestic Violence](#)
Sept. 26 – 28, 2017. San Francisco, CA.

Connect with the nation's leading medical, public health and family violence experts from across the U.S. with increased international participation to advance the health care system's response to domestic violence. Workshops, scientific posters and plenary sessions highlight the latest research and most innovative clinical responses to domestic violence, with a focus on the work being done by health care and public health professionals.

Quick Links

- ❖ [AMCHP](#)
- ❖ [NAHIC](#)
- ❖ [NIPN](#)
- ❖ [SAHRC](#)

[implementation grant](#). Using the communications plan developed by CoIIN members, the proposal submitted would be able to provide funding to do promotion of the adolescent well-visit through the high school state athletic tournaments in Iowa during the spring and summer of 2017.

Mississippi

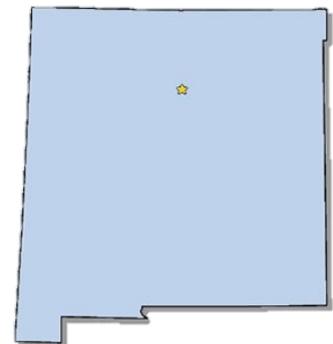


The Mississippi CoIIN team continues to build relationships with the large number of health care providers who attended the CoIIN stakeholder meeting (10/16) and expressed interest in improving health care for youth in their clinics. This ongoing outreach to providers explores the areas of quality improvement they're most interested in pursuing and developing a communication method to stay connected.

In addition, the MS State Department of Health and Mississippi First (both CoIIN members) continue to expand work on confidentiality resources and trainings (see the *Minor Consent & Confidentiality: Public-private partnership driving efforts in Mississippi* article in this newsletter).

New Mexico

New Mexico CoIIN team member Xavier Barraza is collaborating with AMCHP staff and representatives from Iowa, Vermont, Texas and Mississippi to prepare for the AMCHP Conference pre-session. By sharing their experiences, the team will work with participants to engage young people, apply QI strategies to their work and develop action steps to improve AYA health care access and quality in their states/communities.



Texas

Texas Title V funds three clinics to focus on adolescents and well-visits (AWV) through the Texas Healthy Adolescent Initiative (THAI). In Houston, they are working within schools (through school nurses) to identify youth that need adolescent well visits. A THAI-funded school nurse conducts initial screenings in order to make appropriate referrals and follow up. In Austin, the People's Community Clinic (PCC) has outreach in area schools. Youth Advisory Council (YAC) members recently attended Austin's youth career event for high school students. PCC staff support a



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school-based health center (SBHC) in a neighboring town (through other funding). They provide primary care and reproductive care (Title X). The SBHC is a collaboration with a behavioral health agency and the school district. The BH agency provides onsite therapists. PCC refers youth to them and participates in case discussions. PCC also works closely with other school nurses – one example is a “GOALS” program focusing on youth with developmental and behavioral issues. They work with school nurses, special-education coordinators and school psychologists. The GOALS advisory council has school administrators and program directors attending to discuss collaboration, best practices, etc. Several PCC health advocates teach comprehensive sexual education in local charter schools as well. In Laredo, the THAI-funded health department is working with the Laredo School District to develop a functional referral system. The goal is to have the school nurses refer students that currently have no Medical Home and/or need health services to the HD’s clinic.

Vermont

The Youth and Health Advisory Council continues to develop posters to promote the adolescent well-visit. While they initially gave feedback on materials created by the VT CoIIN team, they have now taken over the full development of the materials and will be doing the graphic design and content on their own. The Vermont team is excited about the momentum the YHAC has gained and are looking to broaden their reach within other Vermont projects that address adolescent and young adult health.



From the MCH Community



See what the MCH community has to offer on consent and confidentiality for youth and young adults!

- [Ask the Expert](#) is an archived five-part webinar series, hosted by the School-Based Health Alliance, that highlights adolescent confidentiality in health care, featuring Abigail English, JD, director of the Center for Adolescent Health & the Law.



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- State confidentiality guides for providers are helpful tools for providers to learn and understand the ins and outs of adolescent and young adult confidentiality and consent specific to their state. See the state specific guides that have been developed below:
 - Arizona: [Consent & Confidentiality in Adolescent Health Care: A Guide for Arizona Health](#)
 - California: [California Minor Consent and Confidentiality Laws](#)
 - Colorado: [Understanding Minor Consent and Confidentiality in Colorado](#)
 - Maryland: [Maryland Minor Consent Laws](#)
 - Michigan: [Michigan Laws Related to Right of a Minor to Obtain Health Care without Consent or Knowledge of Parents](#)
 - Minnesota: [Consent and Confidentiality: Providing Medical and Mental Health Services to Minors in Minnesota \(Legal Guidelines for Professionals\)](#)
 - Mississippi: [Minor Consent and Confidentiality in Mississippi](#)
 - Oregon: [Minor Rights: Access and Consent to Health Care: A resource for providers, parents and educators](#)
 - Texas: [Adolescent Health: A Guide for Providers](#)
- [“Teen Self-Advocacy: How to Be Your Own Health Care Advocate”](#) is one video among a series developed by the Adolescent Health Initiative at the University of Michigan that lets you hear directly from teens, parents and providers about improving the health care experience for adolescents.
- [Understanding Confidentiality and Minor Consent in California: An Adolescent Provider Toolkit](#) is a module of the Adolescent Provider Toolkit series, produced jointly by the Adolescent Health Working Group and the California Adolescent Health Collaborative. It includes materials such as charts on minor consent and confidentiality, practice tools, resource sheets, updated legal information, resources for youth, information for parents/guardians and much more.
- [Minors Access Cards](#) are brief fact sheets developed by Physicians for Reproductive Choice that summarize the complex laws surrounding the provision of reproductive health services to minors in 13 states.
- [The Health Insurance Portability and Accountability Act \(HIPAA\) Issue Brief](#) was developed by The Network for Public Health Law. It highlights specific details in HIPAA related to minors’ rights to privacy such as when a parent/guardian would not act as the minor’s personal representative; the federal/state laws HIPAA defers to when the parent/guardian is not the minor’s personal representative; and the duties/restrictions the health care provider faces.
- [Confidentiality Protections for Adolescents and Young Adults in the Health Care Billing and Insurance Claims Process](#) is a position paper developed by the Society for Adolescent Health Medicine and American Academy of Pediatrics that was published in the Journal of Adolescent Health. The paper emphasizes the need for policies and procedures to be established so that health care billing and insurance claims processes do not impede the ability of providers to deliver essential health care services on a confidential basis to adolescents and young adults covered as dependents on a family’s health insurance plan.



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- [*Patient Privacy and Confidentiality: A Survey of Healthcare Providers in Oregon*](#) is a report of results from an online survey that the Oregon Health Authority conducted with health care providers across the state to better understand the impact of patient confidentiality concerns on provider practice and policies. It also examines practices in place to strengthen confidentiality protections.
- [*Teens Visiting a Healthy Clinic*](#) is a webpage developed by CDC that includes an infographic on what a teen-friendly reproductive health visit should look like as well as a checklist of confidentiality, privacy and consent activities for providers.
- [*Confidentiality in Health Care: Adolescent and Young Adult Clinical Care Resources*](#) is a collection of key resources located on Society for Adolescent Health and Medicine website that provides adolescent and young adult health care providers and youth serving professionals easy access to existing confidentiality clinical care guidelines and resources that are: free of cost, specific to adolescents or regarding a population which includes adolescents, open-access or accessible after the creation of a free login and nationally applicable.
- [*Adolescent Care*](#) is a collection of resources and materials located on the Oregon Pediatric Improvement Partnership website for providers, parents and teens. It outlines and describes the process of an adolescent well-visit and a teen's transition to becoming primary contact for their health care (including practical resources on confidentiality). It also outlines issues to consider with regard to measuring claims, the importance of adolescent well-visits and strategies to improve them.
- [*Confidentiality in School-Based Health Care: EOBs, Billing and Health Insurance Claims*](#) is an archived webinar that features Abigail English, JD, director of the Center for Adolescent Health and the Law, aimed to clarify the confidentiality laws related to EOBs, billing and health insurance claims and explore potential strategies for addressing these complex issues.
- [*The Guttmacher Institute*](#) has developed a variety of policy reports on confidentiality and health insurance state policies. Some of these reports are listed below:
 - [*Confidentiality for Individuals Insured as Dependents: A Review of State Laws and Policies*](#)
 - [*A New Frontier in the Era of Health Reform: Protecting Confidentiality for Individuals Insured as Dependents*](#)
 - [*Protecting Confidentiality for Individuals Insured as Dependents \(State Policies in Brief\)*](#)



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Upcoming Newsletter Issue



Stay tuned for the Apr/May issue: *How Medicaid intersects with clinical-medical systems/How to partner with your Medicaid agency!*