

Introduction to Telephone Interviewing

How is telephone interviewing related to Partner Services?

Two goals of Partner Services (PS) are to prevent the spread of STDs and reduce health complications from untreated STDs. Interviewing is one of the most important elements of PS work. Interviews are conducted with infected persons and others potentially involved in transmission. Interviews are utilized to identify the client's needs and connect them to care, and identify the client's sexual partners and others who may be at risk, and bring them to diagnosis and treatment. There are several ways that a PS provider can conduct an interview with a client, including meeting in person, speaking on the phone, or exchanging messages via the Internet. This module primarily focuses on the second option – telephone interviewing.

What are some basic principles of telephone interviewing?

Every telephone interview will be unique based on several factors, such as your client's age, diagnosis, and whether they have previous experience with partner services. Emphasize your client's strongest motivating factors early and often, because unlike an in-person interview, your client can easily end a telephone interview at any time by simply ending the call. Furthermore, you may only get one opportunity to speak with your client. Be assertive, confident, and ensure that your client understands the importance of this process – these are all strategies that will increase your chances for a successful telephone interview.

How does telephone interviewing differ from in-person interviewing?

1. Benefits:
 - If a client lives or works far away from your office, then a telephone interview may be more time-efficient
 - To avoid unnecessary conflicts with the client's family and/or friends, or if an area is particularly unsafe, then a telephone interview may be preferred
 - If the only identifying information you have is a phone number, then a telephone interview may be the only option
2. Drawbacks:
 - It may be difficult to establish rapport (a working relationship) with the client
 - You are unable to read body language, so you can only rely on tone of voice
 - Your client may become distracted by other things happening in the background
 - There is no way to use physical resources or other tools to aid with explanations

How can PS staff develop the skills and confidence required to conduct telephone interviews?

- Practice mock telephone interviews with coworkers
- Shadow other PS staff as they conduct telephone interviews (be sure not to violate the confidentiality of the client!)
- Discuss preparation strategies and best practices with supervisors and coworkers
- Conduct a telephone interview together with an experienced PS staff member

What are some best practices that will apply to any telephone interview?

1. **Professionalism:** Use a work phone (landline or cell phone), not a personal (home or cell) phone. Speak clearly, use professional language and a respectful tone. Be conversational rather than authoritative. Be patient, answer questions / respond to concerns, and express empathy. Do not be judgmental or combative, and do not overreact to unexpected information.
2. **Confidentiality:** Ensure you are speaking with the client by confirming their name, date of birth, and other identifying information as needed (multiple family members living at the same residence may have the same or similar names). Ensure client is using a private phone line. If not, ask for a better phone number to use. If privacy cannot be confirmed, you may need to schedule an in-person interview at another time. Ensure that the client finds a quiet place to conduct the interview that is free of distractions and interruptions. Background noise will make it difficult to accurately obtain the information that you need.
3. **Cultural Competency:** Understand health disparities for culturally and linguistically diverse populations. If your client does not speak English or prefers to communicate in another language, develop a plan with your supervisor and coworkers as needed. For effective communication, do not use complex or scientific language.

How should PS staff conduct a pre-interview analysis in preparation for a telephone interview?

1. **Review Records:** Check your client's field record and conduct record searches if needed. Consider factors that may require you to adjust your messaging and communications, such as age, literacy levels, language barriers, hearing impairments, etc. Prepare your interview questions accordingly.
2. **Research Treatment History:** Contact medical providers (if necessary) and research treatment history. Your client may have received partner services and/or STD treatments in the past. If that is the case, your client may already know what to expect, and you may be able to move through your interview more efficiently. If this is the first time that a client is receiving partner services, be prepared to answer questions about the partner services process, and provide information and additional details as needed.
3. **Determine Best Time of Day:** Determine the best time of day to call your client. Several factors will affect your decision. Do you know your client's work schedule? If possible, call your client outside of work hours, or during lunch or a break. Does your client go to school? If possible, call your client after school ends for the day. Does your client have any children? This may limit your client's availability throughout the day. Calling while the client's children are at school may work best.

What is the difference between an open-ended question and a close-ended question?

An open-ended question is a question that cannot be answered with a "yes" or "no" response. Generally, these questions start with who / what / when / where / why / how. Use open-ended questions whenever possible – this will allow you to gain more information than close-ended questions.

A close-ended question is a question that can be answered with "yes" or "no" and may not yield any additional information. Close-ended questions may disrupt the flow of a conversation, and not as much specific information is gathered.

Open-Ended Questions	Close-Ended Questions
1. Where do you typically meet your partners?	1. Do you meet your partners at bars?
2. What time can you come to the clinic tomorrow?	2. Can you come to the clinic tomorrow?
3. How many other sexual partners do you have?	3. Do you have any other sexual partners?

How can I use motivational interviewing during a telephone interview?

Capitalize on what matters most to the client – the mindset of many clients will be "What's in it for me?". You will need to explain to your client why partner services are important and beneficial to their health and well-being. Persuade your client by explaining the consequences of inaction versus the benefits of action. Some people will have their own health in mind. Others will be concerned about their spouse and/or other sexual partners. If your client is pregnant, her primary concern will likely be her child. Tailor your messaging for each client to motivate positive behavioral change.

Use the CHART acronym as an educational tool for motivating clients to take action: C = Complications of untreated disease; H = HIV and STD connection; A = Asymptomatic nature of disease; R= Reinfection risks; T= Transmission routes.

What are the keys to a successful telephone interview?

1. Know Your Key Phrases and Questions: Plan how to begin the call (introduce yourself, confirm client identity, how to transition to the interview). Plan your interview structure (what are the most important questions that you need to ask, and what are the most important pieces of information that you need?). Plan how to end the call (anticipate what your recommended actions will be, share your contact information and hours of availability if a future call is needed).
2. Use Your Personal Interview Style: Your client may sense discomfort if you are following a script that is too specific, and your transitions may not flow well. Preface sensitive questions as needed and validate any concerns and/or priorities that your client expresses to you. Remember, the tone of your voice is very important. Be confident, respectful, and assertive throughout the interview.
3. Have Information Ready: Have STD clinic hours, contact persons, and other information ready in case it is needed. Your client may have a specific need(s) outside of the realm of partner services (i.e. mental health counseling, substance abuse treatment, housing services, domestic violence prevention, etc.). Be prepared to provide referral(s) to other types of providers and services in your area by having names, addresses, and phone numbers ready. Know your hours of availability for the next 2-3 days. If your client needs to leave during the middle of your call, schedule a day and time to resume your conversation.
4. Confirm Your Client's Location: Confirm the geographic location of your client and update your records if needed. Be aware of out-of-jurisdiction (OOJ) policies. A good resource is the Interstate Communications Control Records (ICCR).

How should PS staff format their telephone interviews?

1. Introduction: Confirm client, introduce yourself, explain your role, explain purpose of the call, emphasize confidentiality
2. Client assessment: Resolve client's concerns, collect information about client's social history and medical history, assess client's disease comprehension

3. Partner elicitation: Collect information about sexual partner(s) and social contact(s), determine referral methods
4. Risk reduction: Help client to identify risks, overcome barriers, and create solutions for positive behavioral change
5. Conclusion: Resolve remaining concerns, reinforce commitments, summarize medication and referral plans, provide contact information as needed

What should PS staff explain during the “Introduction” part of a telephone interview?

1. Identify Yourself: To protect the confidentiality and safety of your client, do not mention anything about STDs or the purpose of your call until you are 100% sure that you are speaking with the correct person.
2. Confirm Client’s Identity: A family member living with your client may have the same first name as your client. Before you begin the interview, obtain a name and date of birth to ensure that you are speaking with the correct person.
3. Ensure Confidentiality: Other people may be in the same room or area as your client, or your client could be on speaker phone. To protect your client's confidentiality and safety, check to make sure that now is a good time to talk. If not, ask for a good time to call back, or schedule an in-person interview if needed. When conducting telephone interviews, there are more risks to your client's confidentiality and safety compared to an in-person interview. You do not have as much control over external factors that may arise during the interview. If possible, give your client an estimate of how much time you think the interview will require, and ensure that your client is in a safe and private area for the duration of your call.
4. Your Role as a PS Provider: Briefly explain your role within your organization, and clearly state your reason for calling.

What should PS staff explain during the “Client Assessment” part of a telephone interview?

1. Disease Comprehension: Your client may not understand why treatment is necessary. Make sure your client has at least a baseline level of disease comprehension by outlining the signs, symptoms, and ways that STDs are spread. Do not make any assumptions about how the client acquired an STD. During telephone interviews, you will not be able to share visual tools with your clients (such as STD picture cards), so be prepared to discuss symptoms in greater detail than an in-person interview. Answer questions and concerns as needed.
2. Severity and Risks: Your client may not recognize the severity of their situation. Briefly explain what may happen if no treatment is received. Tailor your messaging for each client; for example, pregnant women will need to know the risks associated with congenital syphilis. During a telephone interview, your client cannot see your body language, so the tone of your voice is extremely important. If your client reacts negatively in any way, remain calm and patiently provide additional information as needed.
3. Treatment Options: Ensure that your client knows about treatment options and places where treatment can be obtained. Provide names, addresses, and phone numbers as needed.
4. Ensure Motivation and Remove Barriers: It is your goal as a PS provider to stop the spread of STDs to others. To accomplish this, ensuring that your client receives proper treatment is a top priority. Assist in removing/reducing physical or mental barriers to treatment that your client is experiencing. Continue to motivate your client to receive treatment by building on and supporting the things that are most important to your client.

What should PS staff explain during the “Partner Elicitation” part of a telephone interview?

Discuss partners and social contacts within the interview period for whichever STD(s) are present. Obtain information about your client (number of sexual partners, types of behaviors, settings, etc.) and your client’s partners and social contacts (names, exposure information, locating information, descriptive information, clustering). You may need to be a bit more assertive when trying to obtain partner information, but always maintain a respectful tone of voice. Express your appreciation for the client's time and cooperation as needed.

Work with your client to resolve issues regarding:

1. Confidentiality: Assure your client that they will remain anonymous throughout all communications with partners and social contacts.
2. Shame: Your client may be embarrassed about their sexual partners or behaviors. Always use a respectful tone and create a comfortable atmosphere by providing support and reassurance whenever possible.
3. Safety: Your client may fear a negative reaction from their partners. Emphasize that all communications are confidential, and provide referrals to other types of services if needed or requested.
4. Indifference: Your client may not care about the health of their partners. Motivate your client by explaining that if their partners do not receive treatment, then your client is at risk for reinfection. Use other motivators and emphasize the consequences of inaction as needed.

After you have collected information about your client’s partner(s), you need to choose your method(s) for partner notification. There are five types of referrals:

1. Provider: A partner services provider with the health department confidentially notifies a partner or social contact of possible exposure.
2. Third Party: A professional from outside of the health department (such as a private physician) notifies a partner or social contact of possible exposure.
3. Contract: Your client identifies a specific partner or social contact to notify of possible exposure and agrees to do so within a specific time frame, with the understanding that if notification does not occur within the designated time frame, you (the partner services provider) will notify the partner or social contact.
4. Dual: Your client, together with a provider (a partner services provider or third party) notifies a partner or social contact of possible exposure. This allows the provider to give direct support to your client during the notification process and provide the partner or social contact with immediate access to counseling, testing, and other information resources.
5. Self: Your client informs a partner or social contact of possible exposure and refers the partner or social contact to appropriate services. You help your client to determine when, where, and how to notify the partner or social contact as well as how to cope with potential reactions.

Generally, provider referral is the most effective method for notifying partners and social contacts. If confidentiality and/or safety is a concern, use either provider referral or third-party referral. Self-referral is generally the least effective method for notifying partners. Work with your client to establish a referral plan for each partner and social contact that was identified.

What should PS staff explain during the “Risk Reduction” part of a telephone interview?

The last part of your discussion is risk reduction. Do not make assumptions about what will work best for your clients. Instead, allow your clients to identify risk reduction methods that work best for them. If your clients are unsure how to protect themselves, offer suggestions and create a plan for safer, healthier behaviors in the future.

Customize your client's risk reduction plan based on the STD(s) being discussed and behavioral factors such as injection drug use. Prioritize high impact and achievable solutions. During telephone interviews, you will not be able to provide clients with condoms or any other resources. Inform your client where condoms and other resources can be obtained if needed.

What should PS staff explain during the “Conclusion” part of a telephone interview?

Inform your client whether you will need to contact them again. Schedule another telephone or in-person interview if needed. Reiterate the confidential nature of your call and address any remaining concerns or issues. Briefly recap the key commitments that your client has made and be sure to thank your client for their time. Provide your contact information (work phone or work email address) in case your client needs to contact you in the future.

What should PS staff do when a third party answers the phone?

1. **Identify Yourself:** To protect the confidentiality and safety of your client, do not mention anything about STDs or the purpose of your call until you are 100% sure that you are speaking with the correct person.
2. **Confirm the Identity of the Call Recipient:** A family member living with your client may have the same first name as your client. Before you begin the interview, obtain a name and date of birth to ensure that you are speaking with the correct person. If the information provided to you does not match the description of your client, then you are likely speaking with a “third party” (a family member, friend, spouse, partner, etc.).
3. **Third Party Interaction:** When speaking with a third party, respectfully request to speak with your client, and emphasize the importance of your call. The third party will probably want more information about why you are calling, especially if the third party your client’s parent, spouse, or partner. This person may be concerned, distrusting, or angry, and they may react negatively. Remain calm, and do not provide any specific information about why you are calling.
4. **Connecting with Your Client:** Provide the third party with several options for how you can connect with your client, and support whichever choice they make. If you need to leave a phone number for the client to call, use a confidential phone line if available. Or, if you provide your work phone number, make sure that your voicemail message does not include any STD/HIV-related information.
5. **Leaving a Message:** When leaving a message with a third party, choose your words carefully. The third party may still be trying to get information out of you. Protect the confidentiality and safety of your client by leaving a message with only your name, a confidential phone number, and what time to call. If the third party refuses to cooperate, try calling back at a different time, or on a different day. If repeated attempts to connect with your client are unsuccessful, work with your supervisor to develop an alternate plan, such as an in-person interview.

What should PS staff do when nobody answers the phone?

1. Leaving a Voicemail: To protect the confidentiality and safety of your client, do not mention anything about STDs. Leave a brief message with only your name, a confidential phone number, and what time(s) to call you back. If you provide your work phone number, make sure that your voicemail message does not include any STD/HIV-related information.
2. Attempting to Contact Your Client: If your client does not call you back, you will likely need to make another call. Try calling at a different time of day, and schedule your calls around your client's other obligations, such as work or school. Leave additional voicemails as needed and continue to emphasize the importance of your call.
3. Exploring Other Options: In some cases, despite multiple attempts, you might not be able to contact your client. You may have an incorrect phone number, or your client may not want to speak with you. Work with your supervisor to determine next steps, which will likely include attempting to contact the client in another way. Possibilities include an in-person interview, or any method of Internet partner services (IPS), such as email, text message, social media, and sexual networking applications.

What are the advantages and disadvantages of Internet Partner Services?

IPS Method	Advantages	Disadvantages
Email	Most email addresses are private (except for work email addresses), so you may be able to include disease-specific information in your communications. Refer to your program's guidelines and policies.	Your email may appear as spam, so your client may never read your message.
Text Message	96% of US adults own a cell phone, so almost all clients will be able to receive a text message.	Like voicemails, text messages may be seen by others. Therefore, your messaging will need to be generic with no reference to STDs.
Social Media	Social media profiles are generally private (except for shared accounts, or accounts monitored by parents), so you may be able to include disease specific information. Refer to your program's guidelines and policies. Some platforms will let you know whether a client has seen or read your message.	If your client thinks your message is spam, then you may be ignored and/or blocked.
Sexual Networking Applications	This is often the best option in terms of privacy, so you may be able to include disease-specific information in your communications. For some applications, this may be a requirement. Refer to your program's guidelines and policies.	Your options may be limited by the applications' terms of service and other membership rules.

For more comprehensive information on Internet partner services, please read the CDC IPS Online Toolkit.

How should PS staff conduct a post-interview analysis after a telephone interview concludes?

After your telephone interview is complete:

- Document all information collected, complete interview record and field record
- Contact provider(s) to confirm receipt of treatment by client (if necessary)
- Record search partners and social contacts to determine next steps
- Work with your supervisor to determine priorities, next steps, and case closure