

Referral System for Sexual and Reproductive Health Services

History: CT P.A. 92-119 amended Subsec. (a) to clarify that consent of a parent is not a prerequisite to testing of a minor and added Subsec. (d)(5) concerning involving a minor's parent or guardian in decisions and provision of medical treatment and to require counseling for a minor at the time of communicating test results; P.A. 97-111 added Subsec. (e)(10) re exemption for repeat tests; P.A. 09-133 amended Subsec. (a) by replacing provisions re specific informed consent for HIV-related testing with provisions re general consent for such testing and by deleting provisions re obtaining written consent.

Teens report many barriers to accessing sexual and reproductive health services (e.g., STD/HIV testing, pelvic exams, pregnancy testing) including accessibility (i.e., inconvenient clinic hours), transportation, confidentiality and cost.* In an effort to reduce barriers to health services for teens, schools can play a pivotal role in connecting adolescents to sexual and reproductive health services directly through school based health centers or the provision of services such as counseling on school grounds or through a linkage and referral system to community-based providers. School nurses, as well as other school personnel, are cited as critical sources of information by students and routinely manage confidential student health information.

Relative to sexual health services, Waterbury Public School nurses, in compliance with board policy may:

- Provide medically accurate information and resources to students and staff
- Provide referrals and counseling relative to pregnancy, STD and HIV testing
- Provide counseling to pregnant teens, or teens who think they might be pregnant.

WPS counselors, teachers, administrators and other staff can also be sources of referrals to appropriate, reputable youth friendly community resources.

Referral Process:

1. If a student is requesting information on STD/HIV or pregnancy testing, school nurse/school personnel will refer the student to the School Based Health Clinic (SBHC) if one is available at the student's school.
2. If there is no SBHC available, then school personnel will refer the student to the School Nurse or provide the student a list of community health youth friendly providers. All school personnel must maintain strict student confidentiality.
3. If the student needs assistance in making the initial contact to the community based provider, school personnel can assist in facilitating this contact.
4. If the School Nurse or school personnel refers a student for services, such personnel will follow up with the student to be sure the student receives care.

**Brindis, C et al. Meeting the reproductive health care needs of adolescents: California's Family Planning Access, Care and Treatment Program Journal of Adolescent Health Vol. 32(6) pages 79-90 June 2003, School Health Manual Revisions/STD Referral 2016*

Referral System for Sexual and Reproductive Health Services, continued

Legal References

- Sec. 1-1d. "Minor", "infant", "infancy", "age of majority", defined.
- Sec. 17a-688. (Formerly Sec. 19a-126h)
(d) Minors, consent to treatment and liability for costs.
- Sec. 19a-14c. Provision of outpatient mental health treatment to minors without parental consent.
- Sec. 19a-216. (Formerly Sec. 19-89a). Examination and treatment of minor for venereal disease. Confidentiality. Liability for costs.
- Sec. 19a-285. (Formerly Sec. 19-142a). Consent by minor to medical, dental, health or hospital services for child
- Sec.19a-582. General consent required for HIV-related testing. Counseling requirements. Exceptions.
- Sec. 19a-592. Testing and treatment of minor for HIV or AIDS. Confidentiality. Liability for costs.

Chapter 368y - Abortion:

- Sec.19a-601. Information and counseling for minors required. Medical emergency exception.

