



March 21, 2013

**Dear partners in prevention,**

I hope you are doing well and are able to take advantage of the additional hours of daylight! As we move into spring, things are blooming in CDC's Division of STD Prevention (DSTDP) and I want to make sure that you are aware of changes and opportunities.

**New Division Leadership**

I am very pleased to announce the selection of two Branch Chiefs for DSTDP.

Dr. Jill Huppert assumed the Chief position for the Program Development & Quality Improvement Branch (PDQIB) last month. Jill received her Bachelor's and Master's Degrees from Johns Hopkins University and her Doctorate from Washington University School of Medicine in St. Louis, Missouri. Jill comes to CDC from Cincinnati where she most recently held the position of Associate Professor of Pediatrics and OB/GYN at the Cincinnati Children's Hospital Medical Center. Jill's expertise in continuous quality improvement was utilized thoroughly as she designed, implemented, and interpreted research with the ultimate goal to improve clinical care, especially for the underserved. Jill was also the medical director of the Cincinnati STD Prevention Training Center from 2005 through 2011. Prior to her tenure at the Children's Hospital, Jill was an Assistant Clinical Professor of OB/GYN at the University of Cincinnati where she spent seven years in academic OB/GYN practice sharing time training residents, caring for the underserved, and providing clinical care as a clinical provider. Jill also spent five years in a public health OB/GYN practice at the Tuba City Indian Medical Center Hospital with the Indian Health Service. Jill has contributed to the STD scientific literature in the area of clinical management of STIs among adolescents with over 38 publications in peer-reviewed journals. Please join me in welcoming [Dr. Jill Huppert](#) to CDC as Chief of PDQIB.

Dr. Kevin Karem has accepted the Chief position for the Laboratory Reference and Research Branch (LRRB) and will join the Division on April 1. Kevin received his Bachelor's Degree from the University of Louisville, his Ph.D. in Medical Sciences from the University of South Alabama College of Medicine, and completed his Post-Doctoral Fellowship training at the University of Tennessee, Knoxville's College of Veterinary Medicine. Kevin began his CDC career in 1999 as a Microbiologist in the Human Papillomavirus Branch, Division of Viral and Rickettsial Diseases. Kevin will be leaving his current position as the Team Leader and Supervisory Microbiologist in the Poxvirus and Rabies Branch, Division of High Consequence Pathogens and Pathology, in the National Center for Emerging and Zoonotic Infectious Diseases. Kevin has a broad laboratory science background including engagement in clinical trial efficacy studies for vaccine development against smallpox, diagnostic efficacy testing for infectious agents, and oversight and regulatory compliance for select agents. He has 4 patents and has published extensively with more than 88 publications in the scientific literature covering a variety of infectious organisms including pox viruses, HPV, Bartonella, and Salmonella. Please join me in officially welcoming [Dr. Kevin Karem](#) to DSTDP as the permanent Chief of LRRB.

**Status of Funding Opportunity Announcement**

I understand that many of you are concerned about the status of the 2014 STD Prevention Program FOA, currently titled the Comprehensive STD Prevention Systems (CSPS), and what this means for your

ability to develop a timely response. While I do not know the exact date the FOA will become available, I do not anticipate that it will be released before the end of April 2013. CDC and staff within the Division realize that responding to applications is very time consuming and requires you to shift your focus. As soon as we know something more definitive about the release date we will share it with you.

In addition, please be aware that the template for CDC FOAs has changed. The information we will be asking you to provide as part of the application process will be different than what we have asked for in the past. Examples of FOAs using the new template are the recently published [DASH](#) and [SSuN](#) funding opportunity announcements.

Thank you for your patience and understanding in this matter.

### **Opportunity to Hire Public Health Associates**

If you haven't done so already, you may want to consider the opportunity to enhance your agency's ability to deliver public health services through the Public Health Associate Program (PHAP). PHAP is a two-year, entry-level, on-the-job training program for recent college graduates and is funded by CDC. Host sites are expected to provide office space, supervision, and a front line public health experience for assigned associates. CDC pays the personnel costs and oversees the program. This unique, national partnership with CDC enables you to contribute to developing of our nation's next generation of public health professionals while filling program gaps.

To be eligible, health departments must propose two one-year assignments for each public health associate requested. Assignments may be in any of the key public health areas including: STD, tuberculosis, HIV, and other communicable diseases prevention; chronic disease prevention; environmental health; public health preparedness; immunization; injury prevention; and maternal and child health promotion. STD/HIV programs have consistently competed well because of our ability to offer formal training, strong supervision, and a very real public health experience. Agencies can submit applications between March 1 and April 5, 2013. PHAP anticipates placing new associates in July. More information regarding this opportunity is available at the [PHAP website](#).

### **STD-related Reproductive Health Training and Technical Assistance Centers**

The STDRRHTTAC Billing and Reimbursement Needs Assessments are in full swing. The regional coordinators should have sent you a request to fill out the state/project area needs assessment, and will soon be asking for your cooperation in distributing a needs assessment to non-Title X clinics certified by your health department for 340B. Given that you have certified these clinics we would like you to support this important assessment by identifying and sharing contact information; working with the TTACs to send out a letter explaining the rationale for the assessment; and helping them follow-up with non-responders to ensure a high response rate. CDC is working with the TTACs to provide training and technical assistance to build billing capacity in these clinics and the labs used by these clinics. If you have any questions about this assessment, please do not hesitate to contact me.

The Division continues to work diligently to meet your needs and recently revived its newsletter, [DSTDP Connect](#). The newsletter highlights Division events as well as the work of grantees and partners. We will begin actively soliciting article submissions soon, but do welcome your feedback and story ideas in the meantime. Please send any comments to [DSTDPConnect@cdc.gov](mailto:DSTDPConnect@cdc.gov).

We are also planning for the 2014 STD Prevention Conference in conjunction with the IUSTI World Conference, which will be held next June 9-13 in Atlanta, GA. Please save the dates and expect to hear from us in the coming months, as we begin reaching out for input.

And as always, if you have any programmatic questions, please do not hesitate to contact your assigned Program Coordinator.

Best Regards,

Gail

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Director

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