Strengthening STD Prevention and Control for Health Departments
STD PCHD 19-1901: Kickoff Webinar (Year 1)

January 17, 2019

Today’s speakers:
Ricardo Albarran – Evaluation Team, PDQIB
Marion Carter – Evaluation Team, PDQIB
Mary McFarlane – PDQIB
Kenya Taylor – Program Team, PDQIB
Lizzi Torrone – Surveillance and Data Management Branch
Today’s Agenda

- STD PCHD program support
- STD AAPPS closeout information
- STD PCHD application review process
- Technical assistance planning
- Dates to remember
- Questions and Answers
Program Support Model

- Continuous Quality Improvement
  - Facilitate and Provide TA / CB
  - Guide and Monitor Award
  - Facilitate Information Sharing
PS19-1901 Strengthening STD Prevention and Control for Health Departments (STD PCHD) 2019-2023

**SURVEILLANCE**
- Conduct chlamydia (CT) surveillance
- Conduct gonorrhea (GC) surveillance
- Conduct syphilis surveillance
- Conduct congenital syphilis (CS) surveillance
- Conduct surveillance of adverse outcomes of STDs

**DISEASE INVESTIGATION AND INTERVENTION**
- Respond to STD-related outbreaks
- Conduct health department disease investigation and intervention for pregnant women with syphilis and other reproductive-age women with syphilis
- Promote Expeditied Partner Therapy (EPTI) (where permissible) to partners of chlamydia and/or gonorrhea cases
- Conduct health department syphilis disease investigation and intervention for men with primary and secondary syphilis

**PROMOTION OF CDC RECOMMENDATIONS**
- Promote quality STD specialty care services
- Promote CDC-recommended treatment for gonorrhea and syphilis
- Promote CDC-recommended screening, diagnosis, and treatment of STDs among high priority populations

**PROMOTION OF PREVENTION AND POLICY**
- Promote STD prevention to the public
- Promote STD prevention and reporting to provider community
- Monitor STD-related policies and policy development

**DATA USE FOR PROGRAM IMPROVEMENT**
- Conduct epidemiologic analysis, translation, and dissemination
- Conduct data-driven planning, analysis, monitoring, and evaluation for program improvement

**CROSS CUTTING:** Promote STD-Related HIV Prevention • Develop, Maintain, and Leverage Partnerships

For more info: e-mail STD_PCHD@cdc.gov
Before we discuss STD PCHD

Closing out STD AAPPS
Check GrantSolutions!

The Technical Review for Annual Performance Report (APR)

- Program team has reviewed all of the documents submitted in August 2018
  - 2017 Final progress report
  - 2018 Midyear progress report

- All technical reviews will be available in GrantSolutions by January 25, 2019.

- Responses to the technical review are not required

- Comments or questions about technical reviews can be addressed to the Prevention Specialist or STD_PCHD@cdc.gov
STD AAPPS 14-1402 Closeout

- **Submission Method**
  - GrantSolutions.gov as a Grant Note
  - Grant Note Category Type: Closeout

- **Submission Deadline is** *March 30, 2019*

- **Questions or Concerns**
  - Programmatic documents: Email your assigned Prevention Specialist or STD_PCHD@cdc.gov
  - Administrative documents: Email your assigned Grants Management Specialist Portia Brewer yfa2@cdc.gov
STD AAPPS 14-1402 Closeout continued

- **Required documents**
  - Final Federal Financial Report (FFR)
  - Invention Statement
  - Equipment Inventory Form
  - Final Performance Report
  - STD AAPPS Supplemental Funding report
  - Reporting of Publications (citations for journal articles and major conference presentations)
  - 2018 AAPPS Work Plan Annual Progress Update

- **If Applicable:**
  - Congenital Syphilis Progress Report
  - GISP Final Progress Report
  - Evaluation Final Report Summary Narrative
STD PCHD
STD PCHD Application Technical Reviews

Your REVISIONS due February 4

- Technical reviews conducted by Division of STD Prevention staff New Approach for Application Reviews
  - Each application received an in-depth review by
    - Prevention Specialist (*comprehensive review*)
    - Surveillance Team (*reviewed work plan Strategy Area I*)
    - Evaluation Team (*reviewed evaluation components*)
    - PDQIB Branch Chief (*final review*)

- STD PCHD Kickoff calls for each site with their prevention specialist or primary reviewers

- Revisions due February 4, 2019 – discuss how to upload your revisions with your Prevention Specialist
Revisions due on *February 4*

- You have received from us:
  - Technical Review
  - Recommendations Summary
  - “Unlocked” Work Plans for editing

- What’s required?
  - Revised Work Plans
  - Revised Budgets (if applicable)
  - Cover letter
  - Narrative Response: Responses to the Recommendations Summary

- Ask your prevention specialist how to submit your response in GrantSolutions
Technical Review Findings

- In the Five-Year Work Plan, you told us, on a scale of 1 (low) to 5 (high):
  - How *important* is the strategy?
  - How *strong* is your program in this strategy?

- Strategies that were very *important*, but where programs felt less *strong*
  - Conduct data-driven planning, analysis, monitoring and evaluation for program improvement
  - Respond to STD-related outbreaks
  - Conduct congenital syphilis surveillance
  - Promote STD prevention and reporting to provider community
  - Promote STD prevention to the public
Technical Assistance Planning

- Priority strategies as noted by review of the proposals
  - Enhanced surveillance for gonorrhea
  - Using program and epi data in decision-making
  - Outbreak response
  - Congenital syphilis

- Goal for 2019: provide technical assistance on priority strategies
  - Meet the need for effective and timely technical assistance within the time constraints of busy programs
  - Collaborating with partners to provide technical assistance that will best serve programs
  - Affinity Groups and other peer-to-peer sharing
Types of Technical Assistance

- Fact sheets
- Guidance documents
- E-newsletter
- Technical notes

- Conference calls
- Webinars
- Video conferences

- Short courses
- Communities of practice
- Quality improvement cohorts
- Learning collaboratives

- Regular calls with prevention specialists
- Site visits
- On-site consultations
Strategy-specific Technical Assistance Plans: Surveillance Strategies
Surveillance-related resources

- **STD Surveillance Report**
- **STD Surveillance Coordinator’s quarterly calls**
  - Next call: Monday, January 28th 1 pm EST
  - Contact Ashley Vineyard (avineyard@cste.org) to be added to list
- **NCSD User Groups (Maven, PRISM, NBS)**
  - Contact Marvin Fleming (mqf6@cdc.gov) to be added
- **CSTE STD Surveillance Capacity Framework**
  - Coming soon!
1. Conduct chlamydia (CT) surveillance
2a. Conduct gonorrhea (GC) surveillance
3a. Conduct syphilis surveillance

Collect, manage, analyze, interpret and disseminate data on identified cases of CT/GC/syphilis (all stages) ensuring timely capture of core epidemiologic variables

<table>
<thead>
<tr>
<th>Core variables</th>
<th>CT</th>
<th>GC</th>
<th>Syphilis (all stages)</th>
</tr>
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<tbody>
<tr>
<td>Age</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Sex</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>County</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Diagnosing facility type</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Specimen collection date</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Anatomic site of infection</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
1. Conduct chlamydia (CT) surveillance
2a. Conduct gonorrhea (GC) surveillance
3a. Conduct syphilis surveillance

Suggestions

- Focus on processes to improve data quality and timeliness
- Begin discussions about transition to the STD Message Mapping Guide (MMG)

TA Resources

- **STD Data Management & Information Technology website**
  Updates coming soon on LGV reporting and coding of the case status variable
- **NNDSS modernization Initiative (NMI) technical assistance**
2b. Conduct enhanced GC surveillance

Conduct provider follow-up and, if needed, brief patient interviews of a random sample of GC cases from a well-defined high morbidity area or the project area as a whole. Ensure timely and quality capture of core epidemiological variables:

- Age
- Sex
- County
- Diagnosing facility type
- Specimen collection date
- All anatomic site(s) of infection
- Race/ethnicity
- Gender identity/sexual orientation
- Sex of sex partner(s)
- Clinical Symptoms and signs
- Pregnancy status
- HIV status
- Previous history of GC
- PID
- Disseminated gonococcal infection
- Treatment provided
- Date of treatment
- Co-infection with other STDs
- History of substance abuse
- Partner treatment (e.g., EPT provision)
2b. Conduct enhanced GC surveillance

**Suggestion**

Take an incremental approach based on level of experience with enhanced surveillance. For example, for a jurisdiction with no experience:

**Year 1**
- Identify well, defined geographic area; gain local jurisdiction support
- Develop and validate methods for taking a random sample of *all cases* in that area

**Year 2**
- Finalize data collection protocols, hire interviewers
- Modify (if needed) surveillance information system to store and export enhanced data
- Pilot interviews and methodology for weighting

**Year 3**
- Conduct interviews
- Conduct non-response analyses to monitor implementation
- Analyze data using weights to generate representative estimates

**Years 4 & 5**
- Ongoing implementation & quality improvement activities
2b. Conduct enhanced GC surveillance

TA Resources

- PCHD Technical assistance (TA) note on enhanced surveillance
- STD Surveillance Network (SSuN) protocol
- Webinar on random sample methodology and best practices (early March)
- CSTE Enhanced Gonorrhea Surveillance Tool Kit (fall 2019)
- Investigating options for peer-to-peer TA
3b. Conduct P&S syphilis surveillance

Conduct provider follow-up and, if needed, brief patient interviews of all cases of P&S syphilis. Ensure timely and quality capture of core epidemiologic variables

<table>
<thead>
<tr>
<th>Core variables</th>
<th>Syphilis (all stages)</th>
<th>All P&amp;S syphilis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
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<td>Specimen collection date</td>
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<tr>
<td>Race/ethnicity</td>
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<td>Gender identity</td>
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<td>Sex of sex partners</td>
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<td>Pregnancy status</td>
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<td>Clinical signs/symptoms</td>
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<td>HIV status</td>
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<td>Substance use</td>
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<td>Treatment received</td>
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</tr>
<tr>
<td>Date of treatment</td>
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<td>✓</td>
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<tr>
<td>History of syphilis</td>
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</tbody>
</table>
3b. Conduct P&S syphilis surveillance

Suggestions

- Focus on improving percent complete of variables with lowest percent complete
- Match with eHARS to improve completion of HIV status

TA Resources

- Recommendations for syphilis surveillance in the U.S.
- **CSTE webinar on syphilis staging** (CSTE/CDC Syphilis Webinar 1)
- **NCSD User Groups**
  Email Marvin Fleming to be added (mqf6@cdc.gov)
4. Conduct congenital syphilis (CS) surveillance

All recipients

To better understand CS epidemiology, conduct provider and mother follow-up and review medical records of all reported CS cases

Suggestions

- Use correct CS case report form
- Ensure complete treatment & testing information on case report

TA Resources

- CS case report form & reporting instructions
  More guidance coming soon via CSTE CS workgroup
- Contact Sarah Kidd (hgk9@cdc.gov) with CS reporting questions
4. Conduct congenital syphilis (CS) surveillance

Recipients with ≥10 CS cases

*Improve methods to match syphilis surveillance data and vital statistics birth and mortality data*

*Strengthen CS morbidity and mortality case review boards*

**Suggestions**
- Start with retrospective matches
- Consider semi-annual matching

**TA Resources**
- Protocols, tools, lessons learned, and best practices from CS supplement areas
- List of commonly-requested Vital Stats variables
- FIMR-HIV resources from CityMatCH
- CS Special Interest Group: to be continued
5. Conduct surveillance of adverse outcomes of STDs

Conduct active surveillance of adverse outcomes of adult syphilis including neurosyphilis and otic and ocular syphilis

Suggestions

- Consider how to collect, store, and report these clinical manifestation data elements

TA Resources

- Syphilis case definitions, including definitions of clinical manifestations
- CSTE webinar
  (CSTE/CDC Syphilis Webinar 2)
Wow. That was a lot of information!

- Don’t worry if you missed something or couldn’t copy down a link, slides will be available
- We are here to help!
  - Start with your prevention specialist, but DSTDP surveillance and data management staff are available as needed
  - Suggest other surveillance-related TA resources that would be useful
Strategy-specific Technical Assistance Plans: Outbreak response
6. Respond to STD-related outbreaks

Review **STD surveillance data at regular intervals to identify outbreaks**

Develop and maintain an outbreak capacity plan

**TA Resources**

- [CSTE Syphilis Outbreak detection guidance](Overview of Syphilis Outbreak Detection Guidance) & webinar
- DSTDP STD Outbreak Response and Coordination Effort (SOURCE)
  - If you suspect an outbreak: contact your prevention specialist who will connect with SOURCE
- Template HANs (in preparation)
- Table top exercise focusing on resistant GC (in preparation)
- Best practices for responses (in preparation)
Strategy Specific Technical Assistance Plans: Data Use for Program Improvement
Introducing . . . the Evaluation and Program Improvement Capacity Project

- New project with the National Network of Public Health Institute and its affiliate, the Rocky Mountain Public Health Training Center
- For any STD PCHD project area staff that want to strengthen skills and capacity in evaluation and program improvement
- Supports implementation of Strategy Area V, Strategy 17
  - Conduct data-driven planning, analysis, monitoring and evaluation for program improvement
Evaluation and Program Improvement Capacity Building Project: Overview

- Prepared to support up to 30 project areas
- Flexible participation and support model
- No cost to participate, except for time
- No prerequisites, except interest and intent to commit
- Run throughout 2019, starting in March
Interested? How to find out more

- Jan 24: Informational webinar by NNPHI (optional)
  - Overview and registration information were sent out earlier this week through STD_PCHD email
- Feb 8: Registration to join, due to NNPHI
  - Brief & online
- Mar 1: Engage participants with coaches
Update on Evaluation and Performance Measurement for STD PCHD
Refresher on NOFO requirements

“Recipients will be required to submit a *more detailed Evaluation and Performance Measurement plan*, including a *Data Management Plan*, within the first 6 months of award . . . .” (p.26)

- What are these?
- What will be required?
- When?
- What next?
Evaluation and Performance Measurement Plan

- For STD PCHD, we are only requesting a Targeted Evaluation Project (TEP) Plan
- Performance measures are still under development, so we cannot ask for a plan around those at this time

For STD PCHD Year 1 = Evaluation Plan
Targeted Evaluation Project or TEP: What is this?

- A small-scale, feasible evaluation project that helps you better understand or improve your program
- Topic, scope, methods, timeframe will vary across project areas
- Planning tool greatly simplified compared to STD AAPPS
- The planning tool, with guidance, will be issued in next few weeks

More guidance: Coming soon to an inbox near you!
Targeted Evaluation Project or TEP: Next steps?

- Each project area will have its own TEP TA provider
- TEP TA providers will reach out in February to start to help you understand the TEP requirement and plan a good TEP
- Complete, final TEP plan due by June 30, 2019
Refresher on NOFO requirements

“Recipients will be required to submit a more detailed Evaluation and Performance Measurement plan, including a *Data Management Plan*, within the first 6 months of award . . . .” (p.26)

- What are these?
- What will be required?
- When?
- What next?
Data Management Plan or DMP: What to expect?

- A plan that helps ensure that all data collected under a NOFO are accessible and stored appropriately
- Complements PCSI confidentiality and security guidelines
- Must be more than a checklist or statement of assurance
- Sample template, with instructions, will be issued in a few weeks
- Also due by June 30, 2019
TEPs and DMPs: Recap

February 2019
- Guidance issued for both

Feb-May 2019
- Consult your local colleagues and your DSTDP TEP TA provider on TEP
- Consult your local data stewards and your DSTDP prevention specialist on DMP

June 2019
- Submit both, together, to DSTDP = “Evaluation and Performance Measurement Plan” required within 6 months of award

Bottom line:
- Don’t worry about these for now
- Stay tuned for more
- There is time to both understand and work on them
Update on STD PCHD Performance Measures Development
Refresher from the NOFO

“CDC expects recipients to send data to CDC on a regular basis, so that CDC can track progress towards achieving certain key outcomes of the NOFO. **CDC will finalize these measures, their specific definitions, benchmarks, submission frequency, and submission templates in consultation with recipients within 6 months of award.**” (p.22)
Aim for STD PCHD Performance Measures

A common set of measures that is:

- Relatively small in number
- Within the control of each project area to obtain and calculate
- Reflective of more of the work that STD PCHD funds in your area
- Useful for you and us to see in comparative perspective and over time
Performance Measures: Where are we?

STD AAPPS POM

STD PCHD NOFO development (Nov-Feb 2018)

More DSTDP discussion (June-July 2018)

Some feedback in STD PCHD Applications (Aug)

More feedback from recipients (Jan)

Prep discussions with recipient work group (Oct-Dec)
Another feedback opportunity

- Current list of measures ≠ List provided in NOFO
- Optional and anonymous feedback on feasibility, utility, other suggestions or concerns
- Survey link will be sent out next week to all project areas
- Results of feedback will be included in deliberations of recipient work group meeting (mid-Feb)

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<tr>
<th>Performance Measures</th>
<th>Work Group reps are from:</th>
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<tbody>
<tr>
<td>California</td>
<td>Florida</td>
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<tr>
<td>New York City</td>
<td>Georgia</td>
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<tr>
<td>Pennsylvania</td>
<td>Tennessee</td>
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<td>Puerto Rico</td>
<td>Michigan</td>
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<td>Vermont</td>
<td>New Mexico</td>
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<tr>
<td>Wyoming</td>
<td>Kansas</td>
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Performance Measures: Where are we?


More DSTDP discussion ➔ Recipient work group in-person meeting (Feb) ➔ More feedback from recipients (Jan) ➔ Prep discussions with recipient work group (Oct-Dec)

OMB ➔ First data submission (TBD)
Resources & Important STD PCHD Dates
Resources

- Work Plan templates and other helpful documents for communicating with DSTDP
- Internal protocols and plans for supporting the programs
- Plans for creating a web space for sharing program information among all recipients
- Commitment to providing clear and helpful reports and feedback to programs
- Plans to collaborate externally to provide optimal support to programs
# Deadlines for STD PCHD 19-1901

<table>
<thead>
<tr>
<th>Requirement/Deliverable</th>
<th>Submission Method</th>
<th>Deadline</th>
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<tr>
<td>STD PCHD Technical Review Responses</td>
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<td>February 4, 2019</td>
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Program Contacts

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- STD PCHD Questions  STD_PCHD@cdc.gov