

Infertility Prevention Project Region VIII

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Disclaimer: The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.

Topics

- Budget
- CSPS Process Update
- Current Project Priorities

Budget

- CSPS 2008
 - » Funded at final 2007 levels less 1.747%
- Continuing Resolution 'till March 2009
- Expect significant reductions
 - » % unknown

CSPS Process Update

- Technical Reviews
 - » Data Usage for Program Planning and Program Improvement
- Budget Reviews
 - » PGO Negotiation calls
- Chlamydia Evaluation Initiative
 - » No funds currently available

Current Project Priorities

– CSPS & IPP

- Using your “local” data
- Resource Allocation
- Screening Women under 26 years of age
- Targeted gonorrhea screening
- Timeliness of Treatment/Partner Treatment

– Infrastructure Activities

- Evaluation
- National Infrastructure Objectives

CSPS-IPP 2009

- 5 year Cooperative Agreement
 - Division of STD Prevention Priorities
 - » Infertility Prevention
 - Women under 26
 - CT and GC
 - » Integration and Health Disparities
 - American Indian Alaskan Native
 - Gonorrhea
 - » Data-Driven Implementation Plans
 - 3% Positivity
 - » Evaluation
 - Performance Measures

Program Collaboration and Service Integration (PCSI)

- PCSI is focused on improving collaboration between programs in order to enhance integrated service delivery at the client level, or point of service delivery. The goal of PCSI is to provide prevention services that are holistic, evidence-based, comprehensive, and high quality to appropriate populations at every interaction with the health care system.

PCSI

Summary of top three priorities:

Integrated Surveillance Efforts – data sharing across geographic areas and programs

Integrated Training Efforts – increased development and cross training of work force

Integrated Funding Efforts – develop and promote integrated program announcements, allow flexibility of funds to accomplish state/local objectives

Regional Gonorrhea Meetings

- One day add-ons to scheduled regional IPP meetings
 - Audience should overlap IPP meeting participants
 - Project area STD program managers
 - STD Epidemiologists
 - Project areas would present a Gonorrhea epidemiologic profile and describe GC programmatic activities
 - *Note: Not yet approved by OD*

Project Area Performance Measures

- Timeliness of Treatment for Chlamydia and Gonorrhea among women attending prevalence monitoring family planning clinics (STD clinics added in 2008)

Performance Measure Data

Timeliness of Treatment for CT (14 Days)

Prevalence Monitoring Family Planning Clinics

	2005	2006	2007
Region VIII 14 Days	0.81	0.90	0.88
National 14 Days	0.70	0.64	?

CSPS-IPP 2009 (1)

- Continued emphasis on completing required IPP activities
 - » Ensure CT and GC screening and treatment
 - Do not screen if you cannot treat
 - » Support laboratory testing
 - » Ensure collection and reporting of all CDC core data elements
 - » Program Management
 - » Provider Training

Infrastructure Evaluation

- Performance Measures
 - Estimates of CT Screening Coverage
 - » Female Title X Family Planning clients
 - » FPAR 2005 and 2006
 - Proportion of tests, stratified by age
 - » Female Clients of participating CT prevalence monitoring facilities
 - » IPP Prevalence Monitoring Data System
- National Objectives
 - Pregnancy-test Only
 - Native American Alaskan Native Health Care Delivery Systems

Infrastructure Performance Measures

Estimated Screening Coverage (%)

Females 24 years old and younger

Region	2005	2006
I	40	34
II	44	45
III	48	51
IV	50	54
V	41	43
VI	47	55
VII	46	42
VIII	35	36
IX	51	56
X	30	37

Infrastructure Performance Measures

Proportion of Tests
Females 15-24 years of age (%)

Region	2005	2006
I	61	62
II	59	60
III	45	63
IV	No Data	65
V	73	71
VI	67	66
VII	84	82
VIII	74	72
IX	63	63
X	81	78

Questions/Discussion