PS19-1901 Sexually Transmitted Disease Prevention and Control for Health Departments (STD PCHD)

CDC's Division of STD Prevention aims to supports 59 state, local, and territorial health departments to conduct STD surveillance, prevention, and control through the new PS19-1901 STD PCHD cooperative agreement. This NOFO is the successor to PS14-1402 STD AAPPS, which ends December 31, 2018.

Purpose and focus

- To prevent and control three major STDs: chlamydia (CT), gonorrhea (GC), and syphilis
- To contribute towards the following national aims:

Elimination of congenital syphilis	Prevention of STD-related reproductive health problems
Prevention of antibiotic resistant gonorrhea	Effective response to STD-related outbreaks
Reduction of primary and secondary syphilis	Reduction of STD-related health disparities

 Priority populations include adolescents and young adults, men who have sex with men, and pregnant women

Strategies

- Represent a core program of STD prevention and control for health department STD programs
- Builds on important work done under the previous funding cycle (STD AAPPS), and includes some new strategies, such as enhanced GC surveillance and more work to assure recommended syphilis treatment
- Organized into five Strategy Areas, with surveillance as the top priority, followed by disease investigation and the promotion of CDC-recommended clinical prevention services (see next page)
- Affirm the need for recipients to tailor and prioritize their work to their own context
- Promote collaboration with CDC-funded HIV programs, National Network of STD Prevention Training Centers, and National Coalition of STD Directors, various other federally-funded and non-governmental partners at national, state, and local level

Administration

- Estimated 2019 funding is \$89,000,000, with awards ranging from \$300,000 to over \$5,000,000, calculated from a funding formula based on population and STD morbidity
- Eligible recipients include the 50 states, District of Columbia, Puerto Rico, US Virgin Islands, Los Angeles (CA), San Francisco (CA), Baltimore (MD), Philadelphia (PA), New York City (NYC), Chicago (IL)
- Period of performance runs 5 years, from January 1, 2019-December 31, 2023
- DSTDP's Program Development and Quality Improvement Branch (PDQIB) administers the cooperative agreement, in collaboration with numerous other Branches in the Division
- Program Official and contact for technical questions is Dr. Jennifer Fuld, Chief, PDQIB (<u>JFuld@cdc.gov</u>)

NOFO release date on grants.gov: [TBD] Anticipated award date: November 1, 2018

Application deadline: [TBD] July 16, 2018 Project start date: January 1, 2019

STD PCHD Strategy Areas

Disease Investigation Surveillance

Disease Investigation & Promotion of prevention & use of policy

Surveillance

Promotion of prevention & use of policy

Analysis prevention & use of policy

Cross cutting

- Partnerships
- STD-related HIV Prevention

Strategy Area I: Conduct Surveillance

- 1. Conduct Chlamydia (CT) surveillance
- 2. Conduct Gonorrhea (GC) surveillance
- 3. Conduct syphilis surveillance
- 4. Conduct congenital syphilis (CS) surveillance
- Conduct surveillance of adverse outcomes of STDs

Strategy Area II: Conduct Disease Investigation and Intervention

- 6. Respond to STD-related outbreaks
- 7. Conduct health department disease investigation for pregnant women and other reproductive-age women with syphilis
- 8. Promote Expedited Partner Therapy (EPT) (where permissible) to partners of chlamydia and/or gonorrhea cases
- Conduct health department syphilis disease investigation and intervention for men with syphilis

Strategy Area III: Promote CDC-Recommended Screening, Diagnosis, and Treatment

- 10. Promote quality STD specialty care services
- 11. Promote CDC-recommended treatment
 - a. Gonorrhea
 - b. Syphilis
- 12. Promote CDC-recommended screening for, and treatment of, STDs among priority populations
 - c. Pregnant women
 - d. Young Adults
 - e. MSM

Strategy Area IV: Promote STD Prevention and Policy

- 13. Promote STD prevention to the public
- 14. Promote STD prevention and reporting to provider community
- 15. Monitor STD-related policies and policy development

Strategy Area V: Analyze and Use Data for Program Improvement

- 16. Conduct epidemiologic analysis, translation and dissemination
- 17. Conduct data-driven planning, analysis, monitoring and evaluation for program improvement