

Council of State and Territorial Epidemiologists



CSTE UPDATE

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NATIONAL SURVEILLANCE MEETING

More than 40 years ago, Alex Langmuir convened state epidemiologists to discuss a national organization for surveillance and disease control methods—Alex's meeting followed the previous one by 40 years. By 1994, it was high time to have such a conference again. It was originally conceived as a small meeting for approximately 15 persons. Over the summer, however, it became clear that all states and territories should have the opportunity to attend. CDC provided additional funds to pay for travel of at least one person from each state. Led by Executive Committee members Gus Birkhead of New York, Becky Meriwether of North Carolina, Michael Osterholm of Minnesota, CSTE member Matt Cartter of Connecticut, National Headquarters staff Willis Forrester and Kathy Getz, Denise Koo, Donna Stroup, Melinda Wharton, Jim Buehler, Robert Pinner, and Joel Greenspan of CDC, and myself the National Surveillance Conference was scheduled for November 30 through December 2. After months of planning it began grandly and energetically.

Midway through the second day, a fog crept over the participants—it wasn't pretty. We habitually like to have efficient, organized, semi-rehearsed, on-schedule meetings, but with this one, we were forced to improvise, to be creative and spontaneous. There was pressure to push forward our thinking and approaches to disease surveillance to accomplish something concrete, i.e. modify the national notifiable disease surveillance system.

By the last morning of the conference, we had position statements concerning:

- 1) the new name of our surveillance system, the National Public Health Surveillance System (NPHSS), which recognizes that there are other methods of disease surveillance besides named reporting of all cases in a given location;
- 2) a process for developing criteria to prioritize disease surveillance;
- 3) a better appreciation for and near consensus around the draft document—"Blueprint for a National Public Health Surveillance System

for the 21st Century;" and,

- 4) a list of conditions to be added to the NPHSS, a list of conditions to be deleted from the NPHSS, and modifications to existing case definitions.

I was proud of the constructive work done by the participants—CSTE and CDC—no one gave up in frustration.

Our direction for the next six months was laid out clearly. Position statements will be sent to the membership, and voting (one vote per state or territory) will take place soon. In mid-January 1995, the Executive Committee will review and act on an updated, interim CDC policy on dissemination of AIDS data that was presented and discussed at a break-out session during the surveillance conference. We will appoint a working group to work with Donna Stroup to prepare a general data dissemination policy by May, and then present both policies to the membership at our annual meeting. I will appoint

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a subcommittee to develop position statements on surveillance of non-infectious diseases for consideration at the annual meeting in May. Finally, at the annual meeting, we will want to have more discussion concerning electronic laboratory reporting, use of 2° data sources (e.g. hospital discharge data), and how to work with health information systems being developed by managed care companies. It sounds exciting!

Richard E. Hoffman, President

CSTE ANNUAL MEETING: AUSTIN TEXAS MAY 14 - 18, 1995

Dennis Perrotta, CSTE President-Elect, announces that the 1995 CSTE annual meeting will be held at the Hyatt Regency in Austin, Texas May 14 - 18, 1995. The hotel is a first-rate facility which has just completed a Texas-styled renovation. There is plenty of meeting space for all our needs.

A block of rooms has been reserved at \$65.00 per night, single, \$75.00 per night, double. The hotel has plenty of amenities and is located on the south bank of Town Lake in downtown Austin. More information and reservations cards will be coming soon.

All CSTE members are encouraged to submit their ideas, suggestions, and interests for agenda items to Dennis Perrotta (TX) before March 4, 1995. The agenda should reflect the desires and interests of the membership and your input is actively solicited. Send your ideas by fax to (512) 458-7689 or by CDC WONDER E-mail to DMP5.

CSTE NATIONAL HEADQUARTERS OFFICE UPDATE

Executive Director Appointed

Willis Forrester was appointed Executive Director, CSTE, effective August 15, 1994; he had been serving in an acting capacity since May 31 at the request of the Executive Committee.

He succeeds McWilson Warren who resigned May 31, 1994.

Mr. Forrester retired from the Centers for Disease Control and Prevention (CDC) April 30 after 32 years of government service. His most recent position with CDC was Chief, Field Services Branch, Division of HIV/AIDS, National Center for Infectious Diseases. He had previous positions in the National Center for Prevention Services in the Division of Tuberculosis Elimination and the Division of Quarantine. He served in CDC field assignments in Arkansas, Missouri, and Connecticut.

He has received numerous awards during his career, including the U.S. Public Health Service Superior Service award in 1993 and the CDC Employee of the Year for International Health in 1988. He served for six years as President, President-elect, and Treasurer of the Watsonian Society, a CDC-recognized organization of public health advisors.

Mr. Forrester has a master of public health administration degree from the University of Hartford and a bachelor of science degree from Arkansas State University.

Office Manager

Kathy Getz continues to serve the CSTE National Office as Office Manager. Ms. Getz joined CSTE in 1991, and has performed her duties in an excellent manner. She has been instrumental in helping CSTE administer the many projects funded by CDC and in communicating with the membership.

When you have the occasion to call the National Office and Ms. Getz answers the telephone, you can always be assured that she will try to be of assistance in any way possible.

Part-Time Secretary

Earla Campbell has been recruited to serve the CSTE National Office as a part time secretary. She recently retired from CDC and came to CSTE in early November. Her most recent

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position at CDC was in the Epidemiology Program Office (EPO) where she provided support to the EIS Officers and others working in EPO. Some of you may have had the pleasure of working with Ms. Campbell in the past. For those of you who haven't, you can be assured that Ms. Campbell will do her best to assist you in any way possible. Welcome Earla!

Contract Accountant

Jack Hamilton continues as the CSTE contract accountant, providing services approximately one day per week. The CSTE budget currently exceeds \$1.2 million.

HIV Community Planning Epidemiologists

Joyce Neal began service with CSTE on July 5, 1994 as an epidemiologist to provide technical assistance and consultation to the States as they implement HIV prevention community planning. Joyce previously worked in the Surveillance Branch, Division of HIV/AIDS, National Center for Infectious Diseases, CDC as an EIS Officer.

Joyce's main responsibilities are to serve as a resource in using surveillance and epidemiologic data in guiding the HIV prevention community planning. Joyce has a doctor of philosophy degree in epidemiology from the University of California at Los Angeles, a masters degree in public health in biomedical laboratory sciences, and a bachelor of science degree in biology.

Since beginning her work, Joyce has:

- o provided epidemiologic technical assistance in the analysis, interpretation, synthesis, and presentation of HIV/AIDS surveillance data to State health department personnel developing and presenting their local epidemiologic profiles to community planning groups;

attended community planning group meetings where data were being presented to observe the process;

represented CSTE at a behavioral risk factor surveillance system surveillance workshop on

needs for better behavioral data;

- o represented CSTE at CDC-ISDA-NIH workshop on prevention of opportunistic infections in persons with HIV/AIDS;
- o conducted "Epi 101" workshops at Community Planning Co-Chairs meeting;
- o conducted a "Projections of HIV Seroprevalence" workshop for California State Community Planning; and
- o developed a three-hour interactive workshop covering HIV/AIDS surveillance, epidemiology, and simple methods for projecting AIDS cases and HIV seroprevalence for community planning groups. The workshop was conducted initially in Elizabethtown, Kentucky, November 10, 1994, at a statewide community planning meeting.

Cibele T. Barbosa is expected to begin service with CSTE in early February 1995 as the second epidemiologist providing technical assistance for community planning. She received her medical doctor degree from the School of Medicine, Federal University of Parana, Brazil, and her masters of public health degree in epidemiology from the School of Public Health, Emory University, Atlanta, Georgia. Cibele has worked as an EIS officer with CDC and an epidemiology consultant with the World Health Organization.

Welcome Joyce and Cibele to CSTE!

SURVEYS

When was the last time you were asked to complete a survey? Five minutes ago? Yesterday? Three factors—electronic communication, the competent staff at the CSTE National Headquarters, and the important day-to-day work performed by CSTE members—have combined to stimulate an increasing number of requests to survey our members. I can count at least five survey requests in the past few

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months. It is not a major problem for the CSTE National Headquarters to distribute the surveys, but there is considerable workload to follow-up on non-respondents. We would like opinions and guidance from CSTE members about ways to handle requests from curious researchers to conduct surveys of our membership. How should we screen requests? Should we limit the number of questions per survey? Should the surveys be batched, sending them to you only once or twice per year? Please feel free to express your opinions by contacting the CSTE National Headquarters Office by fax (404-982-0576), telephone (404-982-0878), or E-mail to Willis Forrester.

Richard E. Hoffman, President

BEING A PARTICIPANT

Of all the meetings I regularly attend (Grantees meetings, EIS Conference, APHA, Family Thanksgiving, Colorado Golf Association, etc.), the CSTE Annual Meeting is the best. The subject matter is designed to be useful to us, and it's fun seeing and talking with my peers and colleagues. It's why I became involved in this organization, and fortunately, the organization welcomed my participation. Please let me, Willis Forrester, or any members of the Executive Committee know what interests you, what you want to work on, what you want CSTE to be.

Richard E. Hoffman, President

EXECUTIVE COMMITTEE MEETINGS

The 1994-1995 CSTE Executive Committee met in Atlanta September 20-21, 1994, during the CSTE Surveillance Conference November 30 - December 2, 1994 and again on January 18 - 19, 1995. The next meeting is March 8 - 9, 1995 and May 1995 at the annual meeting.

1994 - 1995 CONSULTANCY APPOINTMENTS

At the 1994 meeting in Vail, Dr. Reginald Finger, Kentucky, presented proposals to the membership for formalizing the consultancy process for CSTE. The proposals were adopted, and were incorporated into the CSTE Constitution and By-Laws (copy enclosed). As a result of these changes, a new survey of the membership was conducted in June 1994 to determine those interested in serving as consultants. At the September 20-21, 1994 meeting of the Executive Committee, the President, Richard Hoffman (Colorado) nominated epidemiologists to be lead and co-consultants, and alternate consultants; the Executive Committee confirmed the nominations. A roster of available consultants has been distributed widely at CDC. Many thanks to all who responded to the June 1994 survey, and for those who indicated a willingness to serve CSTE.

WONDER/PC GROUP FOR STATE/TERRITORIAL EPIDEMIOLOGISTS

The National Office and the CDC WONDER/PC support staff have established a State/Territorial Epidemiologists group that is now available in WONDER/PC. This enables any WONDER/PC user to access the group for electronic mail. A small number of State and Territorial Epidemiologists are not in the group, although the group is proving to be a very efficient and timely way of communicating. If you do not have a WONDER/PC account, we encourage you to arrange for one, and drive out on the information highway. The number to call at CDC to arrange for an account is: 404-332-4569.

To access the group to send messages directly, the group must first be added to your CDC WONDER personal address book. To do this, follow these steps:

- o Log on to CDC WONDER, and at the initial screen, select Utilities.
- o From the Utilities menu, select Group.

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From the Group menu, select Add.

- o From the Add menu, select Group to Personal Address Book.
- o From the list of Groups, scroll to State/Terr Epidemiologists.
- o Select Add.

The group will then be added to your personal address book. Then, to send the group a message, just use the WONDER message compose feature as you would for an individual. When you enter the address in the "To:" select State/Terr Epidemiologists from your personal address book. It is best not to send mail to large groups "Priority R" as this is a burden on the system.

CSTE BROCHURE NOW AVAILABLE

Enclosed are two copies of a brochure describing CSTE which we hope you will find useful as you invite others to join our organization. If you need more copies, just let us know, and we'll be pleased to provide more.

1995 DUES NOTICES AND MEMBERSHIP ROSTER

In late December 1994, the National Office mailed 1995 dues notices. We encourage you to pay your annual dues promptly (\$15.00) and to check the information we have on you regarding name, degrees, titles, addresses, and telephone/fax numbers.

INFORMATION ON VACCINE AVAILABILITY

Approximately 68 million doses of influenza vaccine will be available for use during the 1994-95 influenza season. The 68 million doses for the current season is the largest number of trivalent influenza vaccine ever produced in the United States and represents a 28% increase

over the 53 million doses available for the previous (1993-94) influenza season. In fact, influenza vaccine has been produced in increasing amounts since the mid 1980's when approximately 20 million doses were available each year. The increased production of influenza vaccine has been driven by an increasing awareness on the part of health care providers and consumers of the importance of influenza vaccination, particularly for individuals who are at high risk of developing serious complications following influenza infection. In order to meet the increased demand for influenza vaccine, the companies manufacturing influenza vaccine have had to extend their production times, resulting in some reported delays in delivery of vaccine. It now appears that all vaccines ordered by health care providers should be available for distribution by the end of October.

STRATEGIC PLANNING MEETING

The Association of State and Territorial Health Officials (ASTHO) conducted a strategic planning meeting with affiliate organizations January 12-13, 1995 in Washington, D.C. The meeting will help devise organizational strategies for more effectively developing state public health agencies' capacity to meet national objectives. Dr. Richard Hoffman, Colorado, and Willis Forrester, National Headquarters, are on the planning committee.

1994 - 1995 COOPERATIVE AGREEMENT

The Centers for Disease Control and Prevention awarded CSTE \$964,277 for new and continuation activities for the September 30, 1994 - September 29, 1995 budget period. CSTE is managing an additional \$243,311 in funds for projects granted no-cost extensions for a combined total of \$1,207,588. Five projects requesting \$606,727 were approved but not funded; we are optimistic that some additional funds will become available for these projects.

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The 1995-1996 budget period will be the last year of the current cooperative agreement project period. We will be sending information soon about potential proposals for next year's cooperative agreement application.

WELCOME NEW MEMBERS

The following individuals have recently joined CSTE:

James V. Altamirano, Michigan
Edward Belongia, Minnesota
Susan Blank, New York
Jean Brender, Texas
Mark Canfield, Texas
Richard Danila, Minnesota
George T. DiFerndinando, New York
Ruth Ann Dunn, Michigan
Kathleen A. Fessler, Wisconsin
M. Lyn Finelli, New Jersey
Kenneth Gershman, Colorado
Samuel Groseclose, CDC
William Hall, Michigan
Cathleen Hanlon, New York
Sharon Heber, Florida
Craig Hedberg, Minnesota
Jeanette Jackson-Thompson, Missouri
David R. Johnson, Michigan
William R. MacKenzie, CDC
William D. Osei, Canada
Henry Potter, Navy Environmental Health Center
Charles Rabin, Illinois
Patricia Schnitzer, Texas
Susan Schoenfeld, Vermont
Catherine Slemp, West Virginia
Donald T. Wigle, Canada

Welcome all new members to CSTE!

POSITIONS AVAILABLE

- o Michigan Department of Public Health is seeking candidates for the positions of Chief of the Bureau of Infectious Disease Control. This position is available immediately. Requirements include broad public health

training and experience along with a proven ability to provide administrative and scientific leadership. The department is located in Lansing, Michigan. Applicants should send a curriculum vitae and names of three professional references by March 10 to Ms. Winnona Jackson, Division of Human Resources and Administrative Hearings, Michigan Department of Public Health 3423 North Martin Luther King, Jr., Blvd., P.O. Box 30195, Lansing, Michigan, 48909.

- o Oklahoma Department of Public Health is seeking candidates for the position of state epidemiologist. Please contact Phillis McKee at the Oklahoma Department of Public Health, 1000 North East 10th Street, Oklahoma City, Oklahoma 73117-1299.
- o CSTE is seeking an individual to serve as a Special Projects Officer in the National Headquarters office. The position is to assist with activities of the office, and to have lead responsibility for a number of current projects. Qualifications, experience, and responsibilities include the following:

Qualifications and Experience

- (1) Undergraduate degree from an accredited institution (required); advanced degree in public health or public administration (desired).
- (2) A minimum of eight years experience working in a public health setting, preferably in a Federal, State, or local health agency or unit. Experience working in an environmental health or infectious disease public health program (desired). An advanced degree in public health or public administration will be considered equivalent to two years experience.

Responsibilities

- (1) Become knowledgeable of assigned projects which are components of the CSTE/CDC cooperative agreement.

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Individual will have lead responsibility for handling all aspects of assigned projects.

- (2) Gain expertise in the cooperative agreement application process, including writing proposals and preparing budgets and justifications.
- (3) Assist CSTE Executive Director and Executive Committee in carrying out functions of the National Headquarters, including supervision of staff.
- (4) Represent CSTE on committees, work-groups, and at meetings, as assigned.

Skills/Abilities

- (1) Ability to express self clearly, explain issues succinctly, make effective verbal presentations, and prepare well-written materials.
- (2) Ability to use basic computer software, such as word processing, Quattro Pro, Filemaker Pro, electronic mail.
- (3) Ability to use interpersonal skills for contacting, informing, and motivating individuals and organizations.

The salary range is \$40,000 - \$45,500 depending upon qualifications and experience. Applicants should submit a letter indicating interest in the position and supporting information (letters of reference from CSTE members are welcome) by **February 15, 1995** to Willis Forrester, Executive Director, CSTE, 20 Executive Park - Suite 2018, Atlanta, GA. 30329.

CSTE UPDATE

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