



# Zika Pregnancy and Birth Defects Local Health Department Field Support

Informational Webinar on the Application Process

April 12, 2017



# US Zika Pregnancy Registry and Zika Birth Defects Surveillance

- CDC's Emergency Operations Center (EOC) has been activated for Zika emergency response since January 2016
- Since then:
  - Data collected on more than **4,500** pregnancies with laboratory evidence of Zika (includes US and US territories)
  - Data collection includes prenatal, neonatal, and infant follow-up information
  - Data collected has informed clinical guidance and knowledge of Zika virus infection during pregnancy
- On August 1, 2016 CDC disbursed initial funding to support pregnancy registry and birth defects surveillance participation

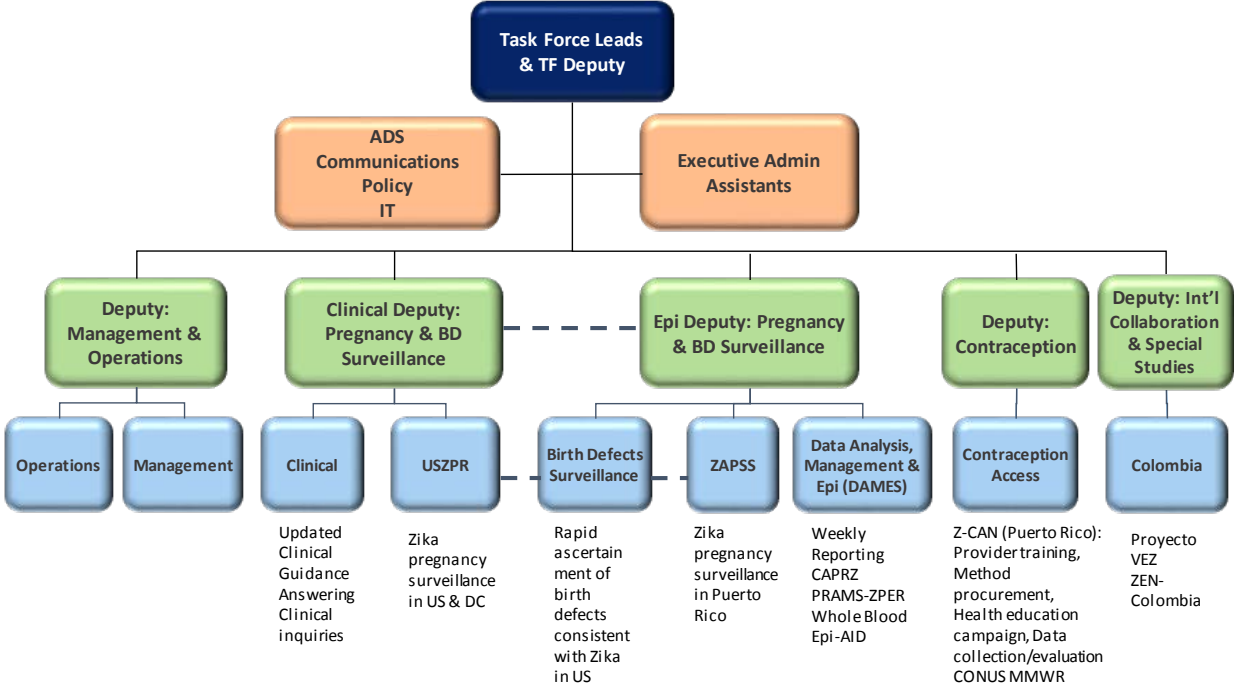
# Goals of Zika Pregnancy and Birth Defects Surveillance and Referral to Service

The goals of the US Zika Pregnancy Registry (USZPR), birth defects surveillance, and referral to service are interrelated.

US Zika Pregnancy Registry	Birth Defects Surveillance	Referral to Services
<p>Monitor pregnancy and infant outcomes to determine the timing, absolute risk, and spectrum of outcomes associated with maternal Zika virus infection to inform clinical guidance and direct public health action</p>	<p>Collect baseline rates of birth defects and identify infants with birth defects likely to be associated with Zika virus exposure not identified in prospective surveillance</p>	<p>Ensure pregnant women with laboratory evidence of Zika and infants born to these women receive appropriate services</p>
<p>Prospective</p>	<p>Retrospective</p>	
<p>Promote testing of pregnant women and infant and child follow up</p>	<p>Ensure referral of infants with birth defects to appropriate services</p>	

# The Pregnancy and Birth Defects Task Force

The task force is part of CDC’s Zika Virus Incident Management Structure.



The USZPR and Birth Defects Surveillance work together to collect accurate, timely, and complete data on pregnant women and infants affected by Zika from jurisdictions across the country.

# The Pregnancy and Birth Defects Task Force Goals and Objectives

PBDTF Goals							
Reduce the impact of Zika infections across borders		Provide family planning services to women of reproductive age in Zika affected areas		Collect and report accurate, timely, and complete data		Ensure Zika-infected pregnant women and children are referred to needed services	
PBDTF Objectives							
Collect critical information about Zika virus infection in pregnancy through surveillance	Provide technical assistance domestically and internationally	Educate audiences about Zika prevention and CDC's activities	Provide clinical consultations about Zika and pregnancy	Conduct research to understand Zika virus infection in pregnancy	Provide family planning services to women of reproductive age in Zika affected areas	Engage and share information with partner organizations	Understand knowledge and behaviors about Zika prevention

# Local Health Department (LHD) Initiative

The goal of the LHD Initiative is to improve Zika pregnancy and birth defects surveillance and referral to service by providing a field assignee

## Objectives



Provide field assignee capacity development assistance



Strengthen coordination across local, state, and federal public health systems



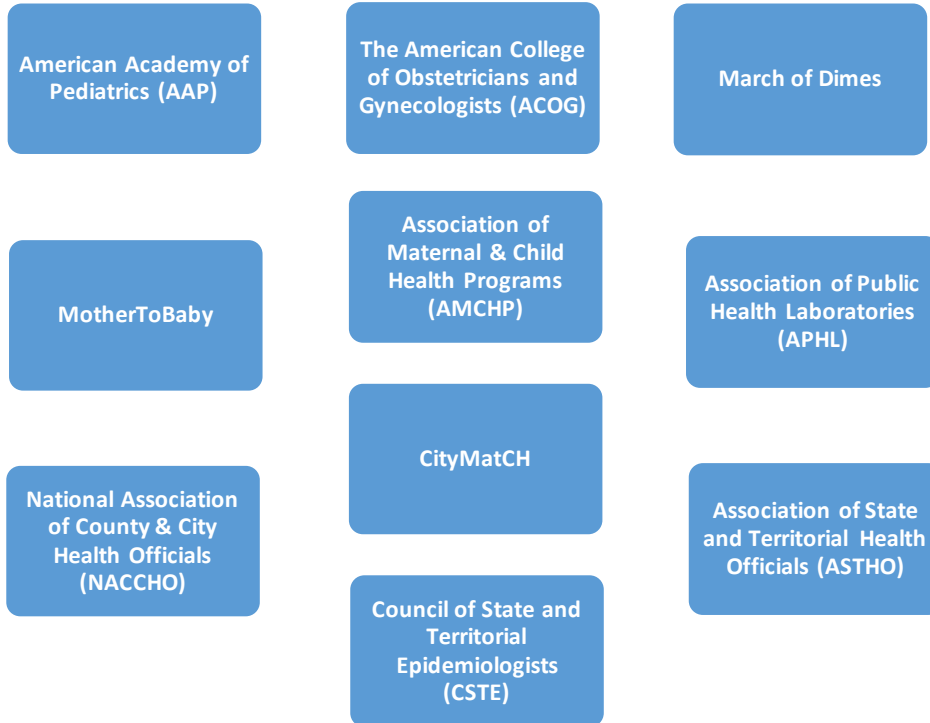
Improve collaboration with healthcare systems, providers, allied health professionals, and other networks



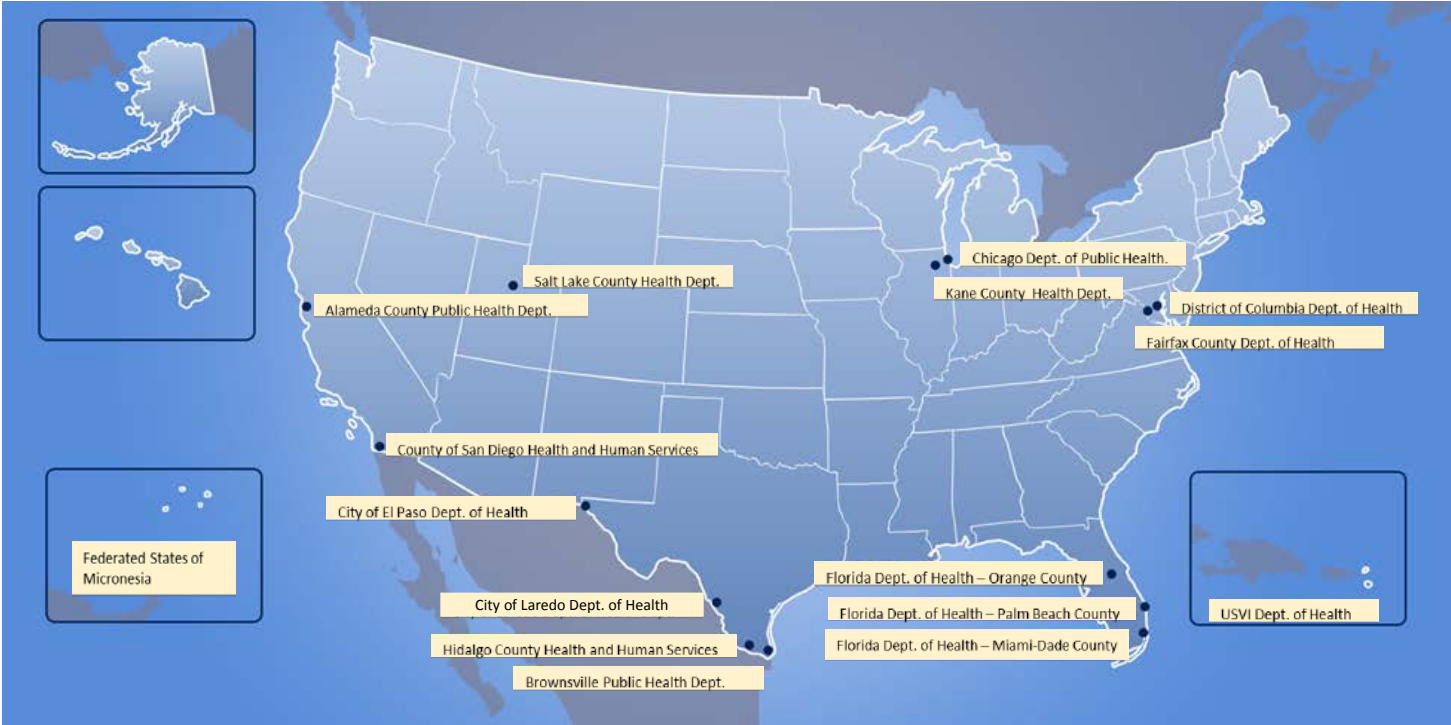
Mobilize local, state and national resources to build capacity

# LHD Initiative Partners

Several national organizations have agreed to partner with the CDC in its assessment of LHD need and in the provision of local health department capacity support in 1) data reporting and surveillance and 2) referral to service. The following organizations will play active roles in supplementing field support. This list may change as additional needs are identified.



# LHD Initiative Participants



16 LHDs highlighted on this map have been granted field support.



## Types of LHD Capacity

Field support will be tailored to local health department needs and existing capacity. Field support will be provided on-site by trained personnel who can provide assistance in one or more of the following areas:

- 1) Assistance with timely data sharing, reporting, and coordination among providers, state health departments, laboratories, and CDC
- 2) Assistance with data collection and reporting processes, including medical chart abstraction and pregnancy and birth defects surveillance
- 3) Using surveillance data to predict, plan, and prepare for increased demand for services
- 4) Supporting case management so that pregnant women infected with Zika and their families receive the services they need
- 5) Assistance with the HIPAA-compliant sharing of patient health information among different service providers to ensure coordinated care
- 6) Assistance with coordination of Zika response efforts targeting pregnant women and families
- 7) Assistance with clinical outreach to healthcare providers to improve testing and adherence to clinical guidance

# Eligibility for US Zika Pregnancy Registry and Birth Defects LHD Field Support

Field support opportunities are limited; eligibility currently requires presence of Zika in the jurisdiction.

To be eligible for field support, local health departments must be located in communities that have cases of pregnant women with laboratory evidence of Zika and/or the need for additional support because of a greater than expected number of infants born with birth defects that could align with congenital Zika syndrome.

*Application questions regarding current Zika status include:*

- Total number of people in the general population with laboratory evidence of Zika that meet the CDC case definition
- Number of pregnant women with laboratory evidence (molecular or serologic) of possible Zika
- Current number of infants with laboratory evidence (molecular or serologic) of possible Zika and a birth defect potentially associated with Zika
- Number of live births in jurisdiction in the past year

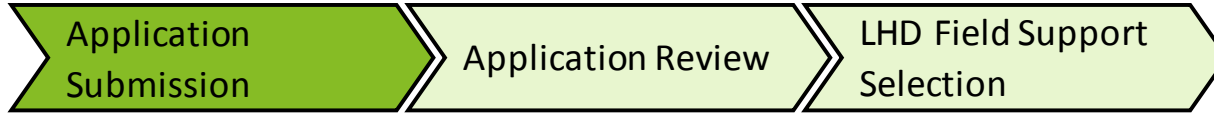
Those LHDs with a higher burden of Zika-positive cases at time of record will have priority in securing field support assistance. Up to 10 LHDs will be selected for field support assistance.

# Application Process: Pre-Selection

Providing details on the application process, criteria for eligibility, and other pre-selection activities.

# Pre-Selection: Application Submission

Applications will be assessed on a number of criteria, including the application information submitted on current Zika status in the jurisdiction, self-identified areas of LHD need, and a telephone interview with the applicant conducted by the CDC.



## Application Submission (April 10-21, 2017)

- Two-page application
- Requires information about current Zika status in jurisdiction
- Requires convening a team that includes epidemiologists, maternal child health staff, and representatives from the SHD
- Seven areas for capacity development assistance (see slide 9)
- See <https://www.cdc.gov/zika/public-health-partners/field-support.html> for details

## Pre-Selection: Application Review

Applications will be assessed on a number of criteria, including the application information submitted on current Zika status in the jurisdiction, self-identified areas of LHD need, and an interview with the applicant conducted by the CDC.

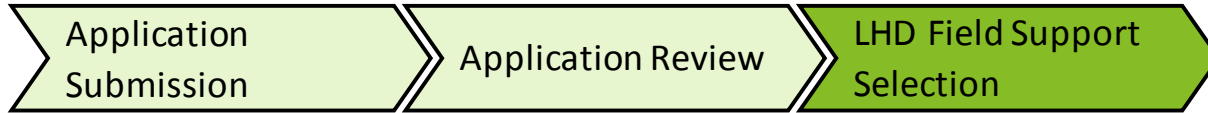


### Application Review

- CDC will review application responses
- CDC will conduct an interview with LHD lead and team members, in order to supplement application responses

# Pre-Selection: Application LHD Field Support Selection

Applications will be assessed on a number of criteria, including the application information submitted on current Zika status in the jurisdiction, self-identified areas of LHD need, and an interview with the applicant conducted by the CDC.



## LHD Field Support Selection

- Based on CDC understanding of LHD need and existing capacity (e.g., application, interview), CDC will make a decision on LHD field support
- It is our goal to make a decision regarding field support shortly after the application interview

# Application Process: Post-Selection

Providing an overview of the activities in the post-selection process, including an on-site assessment to tailor field support to health department needs and field support deployment.

# Post-Selection: On-Site Assessment and Field Support Design

Once an LHD is selected to receive a field assignment, field support is tailored to the needs of the LHD. CDC will work with LHDs to formalize a scope of work.



## On-site Assessment

- Conduct a rapid, on-site assessment, by CDC team to refine its understanding of LHD existing capacity (includes interviews with key LHD staff to understand existing processes, actors, and challenges)
- Tailor field design to findings from LHD visit

## Field Support Design

- Using the information gained from the application, interview, and on-site visit, CDC will work with the LHD to formalize field support scope of work (SOW)



# Post-Selection: SOW and Field Assignee Deployment

Once an LHD is selected to receive field assignment, field support is tailored to the needs of the LHD. CDC will work with LHDs to formalize a scope of work.



## Field Support Statement of Work (SOW)

- CDC will formalize field assignment SOW with the LHD (e.g., propose SOW for LHD review and further discussion)
- Within the agreement, there will be:
  - Shared expectations for the field assignment
  - Identification of how partner organizations can play a role in supplementing the field assignee's work in data reporting and surveillance; and/or referral to services

## Field Assignee Deployment

- Field assignee on-boards at CDC and on-site
- Field assignee will submit weekly reports to CDC team

## Follow-up

- Questions?
- Comments?
- Please contact [eocevent101@cdc.gov](mailto:eocevent101@cdc.gov)
- The application and supporting materials (e.g., FAQ) can be found at <https://www.cdc.gov/zika/public-health-partners/field-support.html>