



February 15, 2008

Dear Colleague:

I am pleased to provide you an update on the implementation of the Centers for Disease Control and Prevention (CDC's) national HIV prevention program data reporting requirements.

As you may know, over the past two years, CDC has worked closely with our national partners to review the required variables that are part of the Program Evaluation and Monitoring System (PEMS).

- November 2006: CDC convened a stakeholders' meeting to focus on reducing the required variables for HIV testing, which resulted in the current revised HIV Test Form.
- In 2007, CDC and an external workgroup, consisting of representatives from state and local health departments, community-based organizations (CBOs), and national partners (i.e., NASTAD, UCHAPS, CHAMP), worked to revise the remaining variables. The result of this collaboration is a substantially reduced set of required variables that are relevant, feasible, and directly related to the Division of HIV/AIDS Prevention's (DHAP's) national monitoring and evaluation questions. The process is almost complete, and the variables review related to Partner Counseling and Referral Services (PCRS) will take place this year. The reduced set of variable requirements is being phased in to allow agencies to make any necessary changes to forms, systems, or policies.
- September 7, 2007: A Dear Colleague Letter was issued that outlined the variable requirements for the initial phase of data reporting.
- January 1, 2008: All grantees were required to begin collecting data for HIV Testing programs in compliance with CDC's revised variables. Grantees were also required to begin inputting data for a reduced set of required variables for agency, budget, contract agencies, sites, program plans, and community planning.
- May 15<sup>th</sup>, 2008: Submission of these data to CDC will begin.
- July 1, 2008-January 1, 2009: The second phase of data collection and reporting requirements will begin and will include client-level data for interventions such as the Diffusion of Effective Behavioral Interventions (DEBIs) and Comprehensive Risk Counseling and Services (CRCS). The attached document provides a summary list of these client-level variables. Note that the list provided does not include the HIV Testing requirements, which have already been implemented, or PCRS requirements, which are still under review. We will provide information on PCRS variable requirements after the review process for PCRS is completed. PCRS reporting requirements will not begin until January 1, 2009, at the earliest.

After reviewing the requirements for client-level data collection and assessing the readiness of your agency and your contract agencies to collect these data, ***please provide a letter to your CDC Project Officer stating whether you will begin data collection for these variables on July 1,***

**2008, and if not, your timeline for beginning data collection and any support or technical assistance you need. By January 1, 2009, all funded agencies should be collecting all required variables. Keep in mind, these dates are for data collection and that dates for data submission will be 45 days after the end of each quarter as outlined in the program awards.**

The timeline for phasing in data collection requirements aims to balance data reporting needs with the need to be adequately prepared to report client-level data. This includes ensuring grantees have adequate time to revise data collection forms, train staff, ensure confidentiality and security procedures, and revise locally-developed data systems. Additionally, CDC will be providing training, technical assistance, and guidance materials to support grantee data collection and reporting requirements.

The timeline also takes into consideration the varying stages of readiness among grantees to collect and report the required data. CDC recognizes that some grantees have been collecting client-level data using PEMS variables and are prepared to submit and begin quality assurance and analyses on these data. We also will be responsive to those that need more time to begin reporting these data.

Our collaborative effort to sustain and improve HIV prevention programs nationwide is critical in our fight against the epidemic. The implementation of the national variable reporting requirements is important to strengthening national and local monitoring and evaluation. The efforts of grantees to collect and report quality data will lead to more effective monitoring of HIV prevention activities and improvements in development of priorities, policies, programs, and resource utilization at national and local levels. Thank you all for your efforts in this endeavor, and for your continued support of and commitment to HIV/AIDS prevention.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert S. Janssen", with a long horizontal flourish extending to the right.

Robert S. Janssen, M.D.  
Director,  
Division of HIV/AIDS Prevention  
National Center for HIV/AIDS, Viral Hepatitis, STD and  
TB Prevention