

## 2008 Performance Measures – Quick Reference Guide

**Where to Report:** Performance Measure data should be reported using the online Performance Measures database. The database can be found at the following URL:

<https://webappa.cdc.gov/STD-PM/jsp/appmain?action=logoff>

**Where to Direct Questions:** Please refer questions about the Performance Measures to your CDC Program Consultant.

**For More Information:** Visit the Division of STD Prevention’s Program Tools webpage at <http://www.cdc.gov/std/program>. There you will find this document, the full Performance Measures guidance document and the online Performance Measures database User Guide.

### I. Medical and Laboratory Services (MLS)

**1. Chlamydia Testing in Juvenile Detention Facilities (CSPS -MLS1):** Proportion of female admittees to large juvenile detention facilities who were tested for chlamydia.

*(Refer to the guidance document for key definitions)*

**Numerator:** For each county juvenile detention facility, the number of female admittees tested for Chlamydia.

**Denominator:** For each county juvenile detention facility, the total number of female admittees, or bookings. If a female walks in the door, she’s counted. Duplicated count, so if a female walks through the door four times in a reporting period, she’s counted four times.

Reporting Criteria:

- Project areas must report on each county juvenile detention facility that books 500 or more adolescent females annually. Please report on each facility individually. The Performance Measures database will automatically total data for all the facilities in your project area.
- Project areas with no county juvenile detention facilities that booked 500 or more adolescent females annually must report on one or more county juvenile detention facilities of their choice.

### II. Partner Services (PS)

For this set of measures (PS1-PS5), the cases used in the numerator and denominator may not be the same. In the STD\*MIS canned reports, cases in the numerator are based on the date assigned, whereas cases in the denominator are based on the date reported. For example, a case may be reported as morbidity in June, but not assigned for interview until July.

**1. Timeliness of Primary and Secondary (P&S) Syphilis Interviews (CSPS-PS1):** Ratio of P&S syphilis cases interviewed within 7, 14, and 30 calendar days from the date of specimen collection, per P&S syphilis case.

**Numerator:** Number of persons with P&S syphilis who were interviewed within 7, 14, and 30 days from the date of specimen collection (count all interviews reported during the performance measurement period)

**Denominator:** Total number of P&S syphilis cases reported as morbidity during the performance measurement period, regardless of whether there was an interview.

**2. Timeliness of Treatment for Contacts to P&S Syphilis Cases (CSPS-PS2):** Ratio of contacts prophylactically treated or newly diagnosed and treated within 7, 14, and 30 calendar days from day of interview of index case, per case of (P&S) syphilis. *Refer to guidance document for definitions of A and C dispositions.*

**Numerator:** Number of contacts of persons with P&S syphilis with dispositions of Preventive Treatment (A) or Infected, Brought to Treatment (C), and within 7, 14, and 30 days after the date of the interview of the index case. Contacts named by more than one index case should be counted only once for each time they are treated (count all contacts treated on reported cases during the performance measurement period).

**Denominator:** All cases of P&S syphilis reported for the same time period, regardless of whether there was an interview.

**3. Associates and Suspects Tested (CSPS-PS3):** Ratio of associates and suspects tested, per case of P&S syphilis. *Refer to guidance document for definitions of associates, suspects, and disposition codes.*

**Numerator:** Number of associates and suspects identified and tested for syphilis via the interview process on P&S cases. This includes disposition codes A, B, C, D, and F. (Count all suspects and associates tested on reported cases during the performance measurement period)

**Denominator:** All cases of P&S syphilis reported for the same time period, regardless of whether there was an interview.

**4. Associates or Suspects Treated (CSPS-PS4):** Ratio of associates and suspects treated for newly diagnosed syphilis, per case of P&S syphilis. *Refer to guidance document for definitions of associates, suspects, and disposition codes.*

**Numerator:** Number of associates and suspects treated for newly diagnosed syphilis (disposition code “C”) on P&S cases. (Count all associates and suspects treated on reported cases during the performance measurement period)

**Denominator:** All cases of P&S syphilis reported for the same time period, regardless of whether there was an interview.

**5. Timeliness of “Priority” Gonorrhea Interviews (CSPS-PS5):** Ratio of “priority” gonorrhea cases interviewed within 7, 14, and 30 days from the date of specimen collection, per priority gonorrhea case. Priority populations are determined locally, and should be based on local epidemiology.

**Numerator:** For each priority population identified, the number of reported priority gonorrhea cases interviewed for partner notification purposes within 7, 14, and 30 calendar days of the date of specimen collection during the performance measurement period

**Denominator:** For each priority population, the total number of reported priority gonorrhea cases for the same time period.

*For programs receiving syphilis elimination funding, reporting on this measure is optional.  
For programs not receiving syphilis elimination funding, reporting on this measure is required.*

### III. Statistics and Data Management (SDM)

For this set of measures (SDM1 – SDM3), proportions do not have to be calculated locally. Results are provided by DSTDP and are uploaded into the Performance Measures database.

**1. Completeness of Data (CSPS-SDM1):** Proportion of reported cases of gonorrhea, chlamydia, P&S syphilis, EL syphilis, and congenital syphilis sent to CDC via NETSS that have complete data for age, race, sex, county, and date of specimen collection.

**2. Timeliness of Data (CSPS-SDM2):** Proportion of reported cases of gonorrhea, chlamydia, P&S syphilis, EL syphilis, and congenital syphilis sent to CDC via NETSS within 30 and 60 days from the date of specimen collection.

**3. Completeness of Data (CSPS-SDM3):** Proportion of reported cases of P&S syphilis and EL syphilis sent to CDC via NETSS where the sex of the sex partner(s) is known.

### IV. Infertility Prevention Program (IPP) Clinical Services (CS)

**1. Timely Treatment of Women with Chlamydia at Family Planning Sites (IPP-CS1):** Among clients of IPP family planning clinics, the proportion of women with positive CT tests who are treated within 14 and 30 days of the date of specimen collection. *Refer to the guidance document for key definitions.*

**Numerator:** Number of women treated for chlamydia within 14 and 30 days of the date of specimen collection.

**Denominator:** Total number of women who tested positive for chlamydia.

**2. Timely Treatment of Women with Gonorrhea at Family Planning Sites (IPP-CS2):** Among clients of IPP family planning clinics, the proportion of women with positive GC tests who are treated within 14 and 30 days of the date of specimen collection. *Refer to the guidance document for key definitions.*

**Numerator:** Number of women treated for gonorrhea within 14 and 30 days of the date of specimen collection during the performance measurement period.

**Denominator:** Total number of women who tested positive for gonorrhea for the same time period.

**3. Timely Treatment of Women with Chlamydia at STD Clinics (IPP-CS3):** Among clients of STD clinics, the proportion of women with positive CT tests who are treated within 14 and 30 days of the date of specimen collection. STD clinics selected for this measure must be recorded in the Performance Measures Database. *Refer to the guidance document for key definitions.*

**Numerator:** Number of women treated for chlamydia within 14 and 30 days of the date of specimen collection during the performance measurement period.

**Denominator:** Total number of women who tested positive for chlamydia in an STD clinic for the same time period.

**4. Timely Treatment of Women with Gonorrhea at STD Clinics (IPP-CS4):** Among clients of STD clinics, the proportion of women with positive GC tests who are treated within 14 and 30 days of the date of specimen collection. STD clinics selected for this measure must be recorded in the Performance Measures Database. *Refer to the guidance document for key definitions.*

**Numerator:** Number of women treated for gonorrhea within 14 and 30 days of the date of specimen collection during the performance measurement period.

**Denominator:** Total number of women who tested positive for gonorrhea for the same time period.

## V. Syphilis Elimination (SE) Enhanced Surveillance (ES)

**2. Syphilis Testing of Women at Adult Jails (SE-ES2):** Proportion of female admittees entering selected project area adult city and county jails who were tested for syphilis (*refer to the guidance document for key definitions and a list of selected jails*).

**Numerator:** Number of female admittees tested for syphilis during the performance measurement period.

**Denominator:** Total number of female admittees for the same time period. If a female walks in the door, she's counted. Duplicated count, so if a female walks in four times during the reporting period, she's counted four times.