

REQUEST FOR RECORDS DISPOSITION AUTHORITY <i>(See Instructions on reverse)</i>		LEAVE BLANK	
TO GENERAL SERVICES ADMINISTRATION NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408		JOB NO	N1-44291-7
1 FROM <i>(Agency or establishment)</i>		DATE RECEIVED	3-22-91
2 MAJOR SUBDIVISION Department of Health and Human Services		NOTIFICATION TO AGENCY	
3 MINOR SUBDIVISION Public Health Service		In accordance with the provisions of 44 USC 3303a the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.	
4 NAME OF PERSON WITH WHOM TO CONFER Johanna O. Bonhellycke PHS Records Management Officer		5 TELEPHONE EXT	DATE
Centers for Disease Control		301-443-2055	10/29/91
6 CERTIFICATE OF AGENCY REPRESENTATIVE		ARCHIVIST OF THE UNITED STATES	

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records, that the records proposed for disposal in this Request of 5 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified, and that written concurrence from the General Accounting Office, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached

A GAO concurrence is attached, or is unnecessary

B DATE	C SIGNATURE OF AGENCY REPRESENTATIVE	D TITLE	
3/20/91	<i>Arundel Bann, Jr.</i>	HHS Records Management Officer	
7 ITEM NO	8 DESCRIPTION OF ITEM <i>(With Inclusive Dates or Retention Periods)</i>	9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN <i>(NARS USE ONLY)</i>
	(see attached) Public Health Practice Program Office Records 1. Model Performance Evaluation Program HIV-1, and HTLV-I/II Antibody Testing, and TLI 1989 to present. 2. National Profile of Local Health Departments (1987 to present)		

Copies sent to agency, NNA, NN-W, NNT, NAX, NCF 11/7/92

PUBLIC HEALTH PRACTICE PROGRAM OFFICE (PHPPPO)

PHPPPO directs and coordinates the development of public health systems, laboratory systems, and training. PHPPPO promotes the development, evaluation, approval and implementation of National Standards for laboratory practice to ensure that the quality of laboratory services is consistent with requirements for implementation of high priority prevention and control programs; interacts with public, private, academic, and voluntary sectors of the health community to develop and adopt public health practices and laboratory practices which are consistent with others and provide effective responses to the Nation's health problems; assists in consultation, design, production and evaluation of media services to deliver public health messages; and provides assistance to other nations in improving the training and performance of health agencies and workers.

1. Model Performance Evaluation Program (MPEP) HIV-1, and HTLV-I/II antibody testing, and TLI 1989 to the present.

These data bases contain performance evaluation data for assessing the quality of laboratories that test for diseases of public health significance. Currently this includes tests that detect antibodies to HIV-1 and HTLV-I/II, and TLI. The system helps determine indicators of HIV testing quality in laboratories. The system also helps determine the characteristics which distinguish laboratories HIV-1 testing practices. Data contained in the system includes information on laboratory testing results of the MPEP, descriptions of testing practices and demographic characteristics of laboratories enrolled in the HIV testing program. Data is collected from laboratories via sample testing surveys and demographic surveys. After the data are analyzed, reports are sent to laboratories regarding aggregate sample testing results, and laboratory characteristics and testing practices.

Some MPEPs are operated for CDC through private contractors and cooperative agreements which provide HIV positive blood to various laboratories for testing. Results of the tests and screening procedures are reviewed for the purpose of checking reliability of various testing procedures.

- a. Input. Data are received from laboratories in various hard copy forms. Data include type of test performed, Western blot patterns for each sample, reagents, specific internal controls, diluent, various control data, and other technical laboratory data.

Disposition: Retain in office six (6) years after tests results are reported to the laboratories. Transfer to the Federal Record Center. Destroy when fifteen (15) years old.

- b. Data are maintained in electronic form on the CDC mainframe.

Disposition: Destroy when no longer needed for administrative purposes.

- c. Outputs.

- (1) Copies of summary reports to laboratories regarding aggregate sample testing results.

Disposition: Retain in office six (6) years after reports are returned to participating laboratories. Transfer to the Federal Record Center. Destroy when fifteen (15) years old.

- (2) Records copies of substantive graphs, bar charts, reports and other records which document aggregate laboratory performance for HIV testing or other relevant trends in HIV testing.

Disposition: PERMANENT--Hold in office for six (6) years. Transfer to the Federal Record Center. Transfer to the National Archives when ten (10) years old.

- (3) Non-substantive and non-record copies of graphs, intermediate printouts, reports, bar charts, and other routine records.

Disposition: Destroy when no longer needed for administrative purposes.

2. National Profile of Local Health Departments (1987 to the present)

The purpose of this system is to gather data on the current capacities of local health departments (LHDs) to provide core activities of public health. The system contains data on local public health departments which is used to provide detailed primary source information for assessing the health of local communities, developing policies to promote public health, and assuring the public's health through direct or indirect service provision. The system provides general descriptions of the nation's local health departments. The system includes information on the demographic characteristics of 2,932 local health departments. Some of these data include information on local health officer budget, employees and assessment policy development, and assurance activities and functions.

Data for this system are collected by the National Association of County Health Officials (NACHO) in cooperation with the U.S. Conference of Local Health Officers (USCLHO), directly from the local health departments across the United States.

Various reports are developed from the data in the system and are used for a variety of purposes including the presentation of speeches, for use in professional articles and for use in making program decisions on public health.

- a. Input. The data are collected from NACHO, and include such information as agency name and address, county, local health officer, staffing size, types of health services provided (ie, AIDS care etc.) budget expenditures, and other characteristics. These data are converted to electronic media via a database on the mainframe. The database contains one (1) year of data (1989).

Disposition: Maintain in office for two (2) years. Transfer to the Federal Record Center. Destroy when five (5) years old.

- b. Data base. Data maintained in electronic form on CDC mainframe.

Disposition: PERMANENT--Transfer a "snapshot copy" of this data base and all relevant documentation to the National Archives at five (5) year intervals. The first transfer will occur in 1991. (Note: the data will be transferred to NARA on computer tapes formatted in accordance with NARA regulations noted in 36 CFR 1228.188, transfer of machine-readable records to the National Archives.)

- c. Output.

- (1) National Profile of Local Health Departments Publication prepared by NACHO which shows trends in the functions, activities and other characteristics of local health programs and operations.

Disposition: PERMANENT: Maintain a record copy of these publications. Transfer to NARA in five (5) year blocks when 20 years old.

- (2) Record copies of journal articles and professional speeches and/or presentations developed from the data base.

Disposition: PERMANENT: Maintain a record copy of these publications. Transfer to NARA in five (5) year blocks when 20 years old.

Concurrences:

Lee Hughes
(name)
Supervisory Computer Systems Analyst
Public Health Practice Program Office

2/25/91
Date

Jimmy A. Harrison
Jimmy A. Harrison
CDC Records Officer

3/11/91
Date