

WATSONIAN NEWSLETTER OCTOBER 4, 2006

NEW MEMBERS COMMITTEE NEWS
CONDOLENCES LEAVE DONATION

MEMBER NOTES

SPECIAL NOTICES HAVE YOU HEARD?

CDC LEADERSHIP PROFILE

RETIREMENTS SHARE

POSITION VACANCY



HAPPY HALLOWEEN!

WELCOME TO OUR NEW MEMBERS

Ron L. Lindsey, (CDC/CCHIS/OD) FULL MEMBER

Chris Stansbury – FULL MEMBER

Margaret Brome, (CDC/CCEHIP/NCIPC) - FULL MEMBER

Dawn Holland (CDC/CCID/NCHSTP) (CTR) ASSOCIATE MEMBER

John M. Flynn, (CDC/CCID/NIP) FULL MEMBER (John sent us his bio)

John Flynn is a Public Health Advisor at the Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Disease assigned to the Wisconsin Immunization Program. In his current position he is responsible for the development and execution of the program's continuous quality improvement initiative, including contract negotiations with local health departments, AFIX programmatic activities, and utilizing existing data to drive programmatic activities to meet Healthiest Wisconsin 2010 and Healthy People 2010 goals. Prior to joining CDC, he worked at a community-based organization in Chicago focusing on syphilis elimination. In 2002, he was part of a team of six that traveled to China to work with the Zhejiang Provinical Health Bureau and the

Chinese Centers for Disease Control to address HIV prevention and education to high risk populations. He has a BA in Sociology and is pursuing his MPH at the University of North Carolina, Chapel Hill.

COMMITTEE NEWS

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE MEETING

EXECUTIVE COMMITTEE MEETING LOCATION & MEETING DAY CHANGE

Thursday October 26, 2006 3:00 PM - 4:30 PM

Corporate Square, building 8, room 6B

Call In: Toll free #: 866-732-9603, Passcode 873632

Executive Committee Meeting is open to all

Note: With the banquet. This month it will be our social event.

SPECIAL EVENTS:

ONLY 10 DAYS 'TIL THE BANQUET.

The 21st Annual Watsonian Society Banquet

When: Friday, October 13; Social Hour, 4:30 pm; Dinner, 6 pm

Where: Petite Auberge

(Toco Hill Shopping Plaza, 2935 North Druid Hills Road, Atlanta)

<u>Guest Speaker:</u> Our guest speaker is <u>Dr. Harold Jaffe</u>, international leader in the fight against HIV and AIDS. In 1971, Dr. Jaffe joined The Centers for Disease Control as a clinical research investigator with the venereal disease control program. In 1981, he became an Epidemic Intelligence Service Officer and joined the CDC Task Force assigned to study the earliest cases of AIDS. Since leaving the CDC in 2004, he has become Head of the Department of Public Health at Oxford University (United Kingdom) and was recently elected to the Institute of Medicine of the National Academy of Sciences (US).

<u>Tickets Sales</u> Tickets are \$20 in advance, \$25 for tickets picked up at the door (although tickets and entree MUST be reserved in advance).

REMEMBER there is <u>limited seating</u> so be sure to purchase your ticket *before* the BANQUET to ensure you will be able to participate!

Remember, the cost is **ONLY \$20** in **advance**! So, reserve your place now! (remember that even if you reserve, but have not actually paid for your tickets prior to October 12, the cost to you will be \$25 at the door)

The sellers (listed below) will accept cash and checks, made payable to the Watsonian Society. With door prizes possibly available, all ticket purchasers will need to print their name and phone number *legibly* on the back of each ticket.

Ticket Sellers:

Clifton: Valerie Kokor (Bldg 21)

Corporate Center: Marcia Brooks (Bldg 11; ; Heather Duncan (Bldg 8); Bob Kohmescher

(Bldg 8); Kathryn Koski (Bldg 10,)

Century Center: Kim Geissman

Koger Center: Michelle Rose Phyllis "Janie" Nichols; Chris Thomas

Executive Park: Dianne Ochoa Retiree Sales: Fred Martich

HELP! HELP! HELP!

Folks, we need help for EVENTS planning.

Our Events coordinator had to resign to take care of ill family, and I can't do it alone. We need new volunteers to comprise the committee. The mission of the committee is to:

Purpose: To develop and organize activities and special events bringing members, prospective members, friends, and families together.

Key Activities: Coordinate annual meeting, social events, receptions, picnics, etc.

Out of 691 members, if a few dozen of you volunteer to do one half-hour shifts, we'll be covered. You get to socialize a little, and work a little, and you'll have fun at the same time. You don't have to volunteer for a lifetime, nor for EVERY activity.

Here's a list of areas where just one half hour will make a difference:

PIG ROAST November 4

Help roast the pig (we have a master BBQ champ who'll command this operation, but he needs a few folks to assist, and we'll keep the costs down)

Help set up
Help clean up
Ticket sellers for the pig roast
Ticket takers for the pig roast
Barkeeps for the Pig Roast
Drink coupon sellers for the Pig Roast

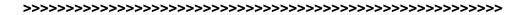
Many hands make light work! !!!! I saw how you all came together to help me make banners-what I thought would be a 12 hour job became a one and one half hour job! If you didn't make banners, then come take tickets or help clean up at an event for just a little while.

And if you love the holidays, I have just the job for you-planning the December Holiday Party!!! So, contact me if you can help, and I'll be in your debt forever.

Thanks, Stacy

COMMUNICATIONS COMMITTEE

Please remember to notify us (R. Varga) of a change in your email address. Remember the WATSONIAN WEBSITE is located at http://www.cdc.gov/watsonian/default.htm



CONDOLENCES

We just learned that past President of the Watsonian Society **Paul Turner's** youngest son Robert Turner died late Monday night October 2nd. Tentative funeral arrangements are being made at the South Canton Funeral Home in Canton, GA for Friday October 6th.

The Global AIDS Program (GAP) sadly announces the death of **Steven Sloane**. Steve passed away on September 5, 2006.

Steve recently retired from his position as a Public Health Advisor with GAP. During his 33-year tenure with CDC, he has held assignments with the National Immunization Program (NIP), National Center of HIV, STD, and TB Prevention (NCHSTP) Division of Sexually Transmitted Diseases Prevention (DSTDP), Division of HIV/AIDS Prevention (DHAP), the International Activities Branch, and GAP. His assignments and duties with DSTDP included New York City, New York State (Nassau, Suffolk, and Westchester), and Chicago, Illinois. He also worked in the Immunization Program with assignments in Ohio, New Jersey, and Vermont. In 1994, Steve transferred to the International Activities Branch, where he served as a logistical support officer providing assistance to HIV/AIDS research projects in Cote d'Ivoire, Thailand, and Uganda.

In October 2000, Steve joined GAP, where he served as the team leader for 15 months along with maintaining his role as country program support officer to Brazil, Mozambique, Uganda, and Zimbabwe. Steve holds a BS degree in Behavioral Science from New York Institute of Technology (NYIT).

Steve is survived by his wife, Susan, and his children, David, Shanna, and Marshall. Services will be held on Thursday, September 7th at 2:30 p.m. at R.T. Patterson Funeral Home, 500 Harbins Road, Lilburn, GA 30047.

RALEIGH — **Joe Wray Martin**, 80, died Sept. 3, 2006, at Duke Medical Center in Durham after an extended illness. He was born Jan. 14, 1926, in Gaston County, son of W.T. and Kathleen Plyler Martin.

The internment was held Sept. 8, 2006, at National Cemetery, Salisbury. He enlisted in the Marine Corps shortly after turning 15 and was with the First Marine Division on Guadalacanal at 16. After proudly serving for five years during World War II, Joe came back home where he completed high school in the evening program for veterans and also graduated from Catawba College. Joe joined the U.S. Public Health Service where he served for 26 years in a number of assignments. At his retirement, he was the director of the Service for North Carolina.

SURVIVORS: Wife, Ruth Whitley Martin, Raleigh; twin sister, Patricia M. Long and husband Roger Long, Gastonia; brother, Jim Martin and wife Katy K. Martin, Gastonia; and sister-in-law, Colleen S. Martin, Belmont; numerous nieces and nephews

PRECEDED IN DEATH BY: His parents; sisters, Thelda M. Austin and Joyce M. Forsyth; brother, W.A. "Dub" Martin Joe Martin leaves a legacy of faithfulness and durability or, as they say in the Corps: Semper Fi.

[Joe Wray began is CDC Career in STD (when it was VD). His excepted appointment position was in Charleston, SC on July 14, 1952. Other assignments included Baltimore, Trenton, and Raleigh. He was the program manager in Raleigh from 1966 until his retirement in 1978. He was greatly respected by his PHA comrades.]

The Division of Foodborne, Bacterial and Mycotic Diseases sadly announces the death of **Lois E. Britt**. Lois passed away on September 6, 2006 after a long illness. Lois retired as a microbiologist from the Foodborne and Diarrheal Diseases Branch in 1996 after 37 years of service and also worked 2 1/2 years as a private contractor for her branch. In lieu of flowers, please make contributions to your local Humane Society in memory of Lois E. Britt.

For questions concerning this announcement, please contact James Scales at (404) 639-2623

ALBERT BALOWS, PH.D January 3, 1921 to September 23, 2006 Our beloved husband and father, Albert, died unexpectedly Saturday morning following a short illness. The son of Lazarus and Anna (Kleiner) Balows, deceased, he is survived by his adored and devoted wife of 49 years, Patricia Ann Barker, and his loving children: Eve Ellen (Burbage) of Charleston, SC and son, Daniel Scott of Chicago. Dr. Balows received his BA in biology (Lowell scholar) from Colorado College in 1942. After serving in the U.S. Army medical corps from 1943-1946, where he served in Patton's 3rd Army and provided medical support to our troops after D-Day, Albert received his MS in Microbiology from Syracuse University in 1948 and his Ph.D. (Haggin fellow) from the University of Kentucky in 1952. His illustrious career as a microbiologist began at the St. Joseph Hospital in Lexington, Kentucky, where he served in the Lexington Clinic from 1952 to 1969, and ultimately took him around the globe, where he worked at the forefront of AIDS research, Toxic Shock Syndrome, Legionaire's Disease, the Ebola Virus and numerous other public health issues. From 1969 until 1981, Albert served as the Director, Bacteriology Division at the Centers for Disease Control (CDC) in Atlanta. He later served as the Assistant Director of Laboratory Science at CDC until he retired in 1988.

At one point he even planned and provided surveillance for bioterrorist activity at the Los Angeles Olympic Games, and helped determine how safe the water supply to the White House was and how to make it foolproof against bioterrorism. Internationally known and acclaimed for his work in applied and clinical microbiology, Dr. Balows was a member of the ASM for more than 50 years. He was the founding editor-in-chief of the Journal of Clinical Microbiology (1974-1979), Current Microbiology (1982-2005), the editor of Applied Microbiology (1965-1974), Annual Revised Microbiology (1979), the Thomas medical microbiology series (1964-1990), the author and editor of over 75 books on microbiology and infectious diseases, a member of the editorial boards for six scientific journals, the senior editor of the Prokaryotes, 1981 and 1991, and general editor of Topley & Wilson's Microbiology & Microbal Infections, 9th edition 1998. Often recognized for his outstanding contributions to the science of microbiology, Dr. Balows was named the Lab World Microbiologist of the Year in 1980 and had numerous honors

bestowed on him throughout his career. They included the Becton-Dickinson award in clinical microbiology in 1981; the Silver Medallion for outstanding contributions to clinical microbiology from the Italian Society of Microbiology in 1983; The P.R. Edwards award for outstanding service furthering high professional ideals and standards in microbiology in 1987; The Louis T. Benezet Distinguished Alumni award from Colorado College in 1988; The Abbottt Laboratories award for development of rapid laboratory diagnostic techniques in 1990; the Distinguished Professional Recognition award from the American Board of Medical Microbiology in 1997; the BioMerieux Sonnenwirth award for exemplary leadership in clinical microbiology in 1999. However, among his most cherished recognitions were the Palmer H.S. hall of Fame and the Colorado College Alumni Award in 1988.

Throughout his career, including his work with the World Health Organization, Albert advanced the concept that clinical microbiologists can make a vital contribution to improve the health of all peoples by establishing a cooperative network of collaborating laboratories. A humble man whom one coworker dubbed a "true Renaissance man", Albert will long be remembered as a dedicated and loving family man who was completely and forever devoted to his lovely wife, Ann, who would have celebrated 50 years by his side on October 7th. In lieu of flowers, please make a donation to the American Heart Association, P.O. Box 409410, Atlanta, GA 30384.

Graveside services were held September 26, at Arlington Memorial Park, Sandy Springs, GA

Published in The Atlanta Journal-Constitution on 9/25/2006.

Charles DeGraw's father died September 13, 2006 at 10:00. His many years of battling Parkinsons are over. Services are to be held Saturday 9/16/6 10:00 am at the Southern Heritage Funeral Home, 475 Cahaba Valley Road, Pelham, Alabama 35124 (205) 988-3511. He will be buried in Kansas City, Kansas on September 18th.

He was the gentleman always and a great Father. He lives on in our memories.

~~~~~~~~~~

### **LEAVE DONATION -- MEMBER IN NEED**

WHO: **ROBERT SMALL** 

PUBLIC HEALTH ADVISOR

**NCHSTP** 

REASON: MEDICAL EMERGENCY

ELIGIBILITY PERIOD: SEPTEMBER 11, 2006 through JANUARY 5, 2007

DONATION PERIOD: (Leave will be accepted through FEBRUARY 4, 2007)

HOW: Submit an approved OPM-71 to your timekeeper and latest earning and leave statement. Indicate name of recipient and the number of annual leave hours you wish to donate.

Have your timekeeper send them to the payroll office, MSK-15, so that a record donated hours can be maintained. Then enter the number of hours you wish to donate in TAS Net.

FOR QUESTIONS, CONTACT: BARBARA MYERS 404-639-1809

NOTE: The decision to donate annual leave is solely voluntary. Thank you in advance for your participation.

~~~~~~~~~~~~~~

WHO: RYAN INTLEKOFER

PUBLIC HEALTH ADVISOR

NCCDPHP

REASON: MEDICAL EMERGENCY

ELIGIBILITY PERIOD: AUGUST 16, 2006 through OCTOBER 2, 2006

DONATION PERIOD: (Leave will be accepted through NOVEMBER 1, 2006) HOW: Submit an approved OPM-71 to your timekeeper and latest earning and leave statement. Indicate name of recipient and the number of annual leave hours you wish to donate.

Have your timekeeper send them to the payroll office, MSK-15, so that a record donated hours can be maintained. Then enter the number of hours you wish to donate in TAS Net.

FOR QUESTIONS, CONTACT: KEVIN BURT 770-488-3088

NOTE: The decision to donate annual leave is solely voluntary. Thank you in advance for your participation

NEW ADDRESSES:

SPECIAL ANNOUNCEMENT

My Fellow Watsonians- once again we have a tremendous opportunity to help CDC, and promote the benefit of our society. As most of you are hopefully aware, CDC has embarked upon a diversity initiative, and is asking that all of its personnel support the desire to have CDC more accurately reflect the face of America. Under the auspice of this initiative, CDC will be undertaking an aggressive recruitment strategy with the specific aims of increasing our numbers of professional Latinos, Asians, American Indians and disabled people.

The Office of Workforce and Career Development will have the primary lead, and a component of their plan is to send at least one of CDC's Chief Management Officials to a series of job fairs around the country where AHRC will have direct hiring authority (the ability to offer a job without a competitive announcement). This is where we can help.

It's inevitable that most of the job fairs will be located close to personnel stationed in the field or by retirees. We're looking for a few good Watsonians who would be willing to meet the attending CMO and AHRC personnel and assist them with their recruitment

activities. Duties could potentially be anything and everything, but the key action would be to engage with potential personnel regarding the benefits of working at CDC and what you know about specific programs. Regardless, this is a great opportunity for the Watsonian Society to show their value (again) to CDC. If you're interested in helping, please be flexible as we get this initiative underway.

OWCD has currently scheduled the following events (and is in the process of scheduling more):

10/26-29/06	Tampa, FL	Society for the Advancement of Chicanos &
		Native Americans in Science
11/2-4/06	Detroit, MI	American Indian Science and Engineering Society
3/22-25/07	San Antonio, TX	National Hispanic Medical Association

Future events will likely include hiring fairs for disabled military personnel, and additional professional society meetings. If you are interested in helping, please respond directly to TED PESTORIUS. To help me out (this is your first and only test to determine qualifications, so don't screw it up), in the subject line of your response, please write your CITY and LAST NAME (i.e. - ATLANTA, PESTORIUS). Retirees are also welcome to participate, and I'll grade a little easier since you're so old, so please feel free to join the fun.

Your humble President-Elect, Ted

HAVE YOU HEARD?

We have received notice from Marc Traeger of the Indian Health Service in Whiteriver, AZ that the *Rocky Mountain Spotted Fever Investigation Team* has received a **Public Health Service Outstanding Unit Citation.** The RMSF Team was comprised of CDC civil service employees, Commissioned Corps officers, and many civilian employees and volunteers, all contributing their unique talents. Everyone worked very hard to accomplish the goals of this project and all are congratulated for their efforts in confronting this deadly disease.

The Whiteriver RMSF Investigation Team demonstrated remarkable teamwork, dedication, and professionalism in responding to this unusual outbreak. Their groundbreaking work to characterize the outbreak and identify the responsible tick vector were exemplary and recognized by others. This was demonstrated by the fact that the team's research efforts were published in an August 2005 New England Journal of Medicine article. The collaborative efforts of the team with tribal, state, and federal authorities resulted in a highly effective intervention that succeeded in quickly reducing RMSF transmission on the reservation. For these reasons, the Whiteriver RMSF Investigation Team is deserving of an Outstanding Unit Citation.

William L. Nicholson, Ph.D.

Acting Branch Chief Disease Assessment and Epidemiology Viral and Rickettsial Zoonoses Branch

NOTE: Many WATSONIAN Retirees, PHAs, and CDC Epidemiologists were involved in this

~~~~~~~~~~~

#### Good Morning:

I am very pleased to announce that **Mr. Pete Starling,** Area 2 STD Manager, has been selected as the Statewide STD Field Operations Consultant with the Bureau of STD Prevention and Control, effective October 1, 2006. Mr. Starling brings over 20 years of STD Field Operations experience as a DIS, Frontline Supervisor, Field Operations Manager and Program Manager. His previous assignments placed him in STD Programs in Atlanta, St. Petersburg, Chicago, and Tallahassee. In his current assignment, Mr. Starling has gained considerable experience in program management, STD outbreak response, program restructuring assistance, program reviews, oversight of AIDS Surveillance, and TB outreach.

Given his KSAs and experience, I fully expect for Pete to "hit the ground running" shortly after his arrival.

Pease join me in congratulating and welcoming Mr. Starling to his new position! **Dan George** 

~~~~~~~~~~~~~~~

As many of you know, our esteemed colleague **Dr. Jim LeDuc** is leaving the Centers for Disease Control and Prevention (CDC) to join the University of Texas Medical Branch (UTMB) at Galveston. Dr. LeDuc will join UTMB as director of the new Program on Global Health within the Institute for Human Infections and Immunity and as associate director for program development within the Galveston National Laboratory, a biocontainment facility under construction on the UTMB campus. Dr. LeDuc will also be a professor in UTMB's Department of Microbiology and Immunology and the inaugural holder of a new endowed chair, the Robert E. Shope Chair in Global Health. Jim is especially honored to hold the Shope Chair, which is being established in the name of his personal friend, the late UTMB professor Dr. Robert Shope, an internationally renowned specialist in virus diseases.

Dr. LeDuc joined CDC in 1992 after serving 23 years as an officer in the United States Army, with assignments in Brazil, Panama, and various locations in the United States. including the Walter Reed Army Medical Center and the U.S. Army Medical Research Institute of Infectious Diseases. Since late 2005, he has coordinated CDC's pandemic influenza preparation and response efforts, and from 2000-2005, he served as director of CDC's Division of Viral and Rickettsial Diseases (DVRD), National Center for Infectious Diseases (NCID). Jim's immeasurable expertise proved to be a valuable asset for DVRD. His candid approach and his facility for bringing together diverse groups to work toward a common goal enhanced his efforts to coordinate the Division's many research activities, prevention initiatives, and outbreak investigations for pathogens that cause a variety of known and newly emerging diseases. Before joining DVRD, Jim served from 1996 to 2000 as the Associate Director for Global Health in the Office of the Director, NCID, and from 1992 to 1996 he was an epidemiologist and medical officer at the World Health Organization in Geneva. He has received numerous awards during his career and last year was inducted into the UCLA School of Public Health Hall of Fame.

Jim looks forward to the opportunities presented by UTMB; however, he has also stated his expectation of remaining professionally close with his colleagues at CDC "as the new UTMB containment lab comes on line, and I look forward to working with them to make this lab a critical part of our national defense against bioterrorism."

Please join us on October 25th, 2-4 p.m. in Casual Conference Room 12302, Bldg 21, 12th Floor for the opportunity to say goodbye to our esteemed colleague and friend. Further details about this event will be forthcoming.

I hope that all of you can join us for this special event to wish him all the best in his new endeavors.

Mitchell L. Cohen, M.D., RADM, USPHS Assistant Surgeon General Director, Coordinating Center for Infectious Diseases

I am pleased and proud to announce that **Nancy J. Cox, Ph.D.**, Chief of the Influenza Branch, Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases, was honored last night in Washington, D.C., as Federal Employee of the Year by the Partnership for Public Service, a nongovernmental organization that works to make government service a career choice for talented, dedicated Americans. Dr. Cox was among a select group of nine Service to America Medal finalists, and was chosen for her work to help the nation and the world prepare for a potential influenza pandemic.

Dr. Cox models the best of CDC—world-class science that reaches to the front lines every day to protect the health and safety of Americans and people around the world. Her leadership is key to our fight against seasonal influenza and the world's preparation for the next influenza pandemic.

Last night was not the first time Dr. Cox has been recognized for her leadership of CDC's influenza science. She was honored earlier this year by both *Time*—which named her one of the "100 Most Influential People of the Year"—and *Newsweek*—which dubbed her one of the "15 People Who Make America Great." To read more about both of these high-profile honors, please go to Cox Named Federal Employee of the Year on CDC Connects.

Dr. Cox's commitment to using the best possible science to protect people's health is a hallmark of her more than three decades of service to CDC. This agency and people around the world are exceedingly fortunate to benefit from her commitment. Please join me in congratulating Dr. Cox on this wonderful—and well-deserved—honor!

Julie Louise Gerberding, M.D., M.P.H. CDC – Celebrating Our First 60 Years

CDC Connects > Inside Story CDC Leadership Profile: Meet Stephanie Bailey 10/2/2006

As part of our series of leadership profiles, we continue with a profile of Stephanie Bailey, MD, MS, new Chief of the Office of Public Health Practice

Stephanie B. Coursey Bailey, MD, MS

Title(s): Chief, Office of Public Health Practice (effective October 2006)

Responsibilities: Lead the Office of Chief of Public Health Practice in its mission to

• serve as the advocate, guardian, promoter, and conscience of public health practice throughout CDC and in the larger public health community;

- ensure coordination and synergy of CDC's scientific and practice activities; and
- promote and protect the public's health through science-based, practice-relevant
 - standards,
 - policies, and
 - legal tools.

The 17 staff members work in the Office of Standards and Emerging Issues in Practice and in the Public Health Law Program.

First job at CDC: Bailey's current position is her first position at CDC, however, she says "I have had a history of affiliations with CDC starting in 1999 that connected me with many of the areas and people of CDC, including co-chairing the National PH Workforce Taskforce, serving as a senior consultant for local practice to PHPPO, and serving on the National Advisory Committee for the Elimination of Tuberculosis, among others."

Path to public health: "I grew up in a small town on the eastern shore of Maryland. My parents had six children (three girls and three boys); I am the second oldest and the oldest daughter. After graduating from high school, I went to Clark University in Worcester, Mass., where I earned a bachelor's degree in psychology. During my sophomore year, my organic chemistry professor said to me, 'You should apply to medical school.' On his recommendation, I applied and got in. I graduated from MeHarry Medical College in Nashville, Tenn., and was matched to—what was then—Grady Memorial Hospital in Atlanta for my residency in Internal Medicine. The DHHS in 1977 called to service NHSC scholars to fulfill their public health service corps obligations. I did, and then joined the Metropolitan Nashville and Davidson County Health Department.

"When I started in the health department in 1981, I was a medical clinic adviser for one of the major clinics and really didn't have an understanding of public health. That began to change in 1987 when our new director came and began to change the culture from being individually focused to one that began to embrace the overall mission of public health. Once I began to understand that mission, it changed the direction of my life and my personal passion. Being able to promote and protect health became clear to me and was a natural "fit" to who I am. I remembered when I was a little girl our family doctor making house calls. I remembered thinking that this was the kind of doctor I wanted to be – the kind who knows the community, has a sense of the person on this corner and that corner; and knows how it all comes together to affect change and health status in communities. Looking back and reflecting I know how I came to be in this place.

"I became director in 1995 and have served as director for 11 years. The department serves 585,000 residents who live in Nashville Davidson County. I also have worked with the National Association of County and City Health Officials, and was past president. I cherish that as Director of Health I created an environment where staff could thrive; and established the value of this department within the community.

"I moved us out of our four walls to understanding and addressing health issues as part of the neighborhoods. For example, our county was #1 in the country in terms of cases

of syphilis in 2000. Today, Nashville has moved out of the top 40 and is on its way to syphilis elimination. We also really worked hard with our partners to make inroads in addressing the issue of the uninsured.

"Our Bridges to Care Program linked more than 35,000 uninsured residents to healthcare through a private/public consortium. Relationships and communication are key to success because all of us innately want to be healthier – it is just a matter of knowing the places where people are starting from and all of us finding a common ground so we can affect health status.

"My work experiences have really given me insight into issues and barriers to healthcare of communities, preventing them, individually and collectively, from mobilizing to affect health status and the healthcare system. I have enjoyed being in national positions and having the same community-like relationships that, as well, have afforded me the look at the national system of unhealthiness. I believe that if we do these things right -- the policy, the partnerships, and all the essential services of public health, we can really make a difference and establish health as the "preferred state of being."

Last books read: "The Great Influenza: The Epic Story of the Deadliest Plague in History," by John M. Barry; "A Purpose Driven Life," by Rick Warren; "Blink," by Malcolm Gladwell; "The Bear and the Dragon," by Tom Clancey; "Atlas Shrugged," by Ayn Rand; "SCAM," by Rev. Jesse Lee Peterson; "Health, Politics and Populism," by Mike McGee

Family: Bailey will divide her time between Atlanta and her horse farm in Nashville, where she resides with her husband of 30 years, Bill. They have three children, Dorian, 29, a marketing director, Kristen, 26, a litigation attorney, and Wryan, 22, a rising college senior majoring in criminal justice.

Hobbies: Reading, sewing, playing piano, learning guitar, collecting Christmas villages, all sports, and doing nothing.

What are the top priorities for you in the next year?

"My top priority next year is to get to know the CDC culture – CDC's processes, procedures, and the do's and the don'ts. A second priority for me is creating an understanding of and a value for the Office of Public Health Practice throughout the public health community, internally and externally. My third priority is to leverage that understanding for effective governmental public health practice and overall systemic performance. The "practice" is crucial to achieving health protection goals for America's citizens."

CDC Connects > Inside Story > CDC Legacies: Stories of Relativity

"CDC is like family." You hear that over and over from people who work here. For most people it's just a feeling of closeness and camaraderie that has grown over the years. But for some, that family connection is literal.

Legacies abound at CDC. Many of you have parents or children who work here, brothers or sisters, and so on. We're seeking out those connections as CDC celebrates its 60th anniversary year. Today, some of you share your stories with us. Ramsey Family: 100 Years of CDC Service

Lee Ann Brownlow Ramsey, public health analyst, NCCDPHP, says her family represents 100 combined years of CDC service. One family is a three-generation CDC family; the other a two-generation family. A marriage brought the two families together, she explains. "I am honored to be a third generation CDC'er and a member of an extended CDC family," she says. "We often refer to our CDC genealogy as 'The Reign of Queen Elizabeth!' My maternal grandmother, Elizabeth Ramsey, was often called 'Queen Elizabeth' of CDC/PGO. She worked in the same Buckhead office from 1974 until 1994."

"As a kid, I remember visiting her at work and playing on her Wang computer. In 1987, I began my career with CDC and, in 1990, my mother Theresa Ramsey Brownlow-McDonald began hers. In 1992, **Bill Ramsey** and I met while stationed with CDC in Florida. Our families share a name and a history with CDC. Bill's mother, Rosemary Ramsey, was also a long-time CDC employee, having been with NCID from 1976 until 2005. When Bill and I married, we both knew well that one day our kids would remember visiting us and their grandmothers at work and playing on Compaqs the way we played on Wangs! What a good life! Thanks, CDC!"

CDC is a Family Affair

For Michele Owen, PhD, acting associate director for laboratory science, NCHSTP, CDC has been much more than a job. "I just wanted to share that I met my husband at CDC (Chris George) in 1988. He no longer works here, but was a temporary employee in the former International Health Program Office while in college.

"However, there is more to the story. My in-laws, Richard and Velma George, both retired from CDC in the 90s. They each had over 30 years of service at CDC. At the time of their retirement, Velma (biologist) worked in the Biological Products Branch of SRP and Richard (microbiologist) worked in what was then the Laboratory Investigations Branch of the Division of HIV/AIDS. Interestingly, Richard and Velma also met at CDC. Obviously, CDC has played a big role in my life and that of my family."

Mother-Daughter Stories: Their Moms Were Role Models
Patricia Efraimson, Information Technology Services Office (ITSO), OD, came to CDC after leaving the military. "I moved back to my hometown of Atlanta where my mother, Yvonne Wallace, was working for CDC. She was working in the Division of AIDS Prevention, NCHSTP, when she retired in 2003. She first came to work with CDC in 1990, working in NCID."

As the centers were reconstructed and NCHSTP was formed, Wallace worked with the development of the Information System Services helpdesk, Efraimson recalls. "In 2005, she came back to CDC as a contractor and is currently working with the Global Activities Team in ITSO.

It's really great to be able to talk with someone else in the family who can directly relate to the unique issues that I deal with each day at work. My mother and I are each other's sounding board," Efraimson says.

She says she is always proud to tell people that she works at CDC. "To know that I am working in support of those individuals who are on the forefront for discovering new ways to control and even prevent widespread disease and illness on a global level is very gratifying."

Jennifer Rapier, who began 22 years ago when HIV work was done in the "AIDS Program," is now a microbiologist/inspector for COTPER/Division of Select Agents and Toxins. Her mother Sally Moore worked at CDC from 1970-1979 as a secretary in the serum bank and then a lab technician.

"I'd say she gave me excitement for science," Rapier says. "I keep two photos of her in my office from when she worked in rabies at the Lawrenceville facility. She is holding a young chimp. Mom always shared the latest news about rabies, told us stories of the animals at the Lawrenceville field station and spoke about George Baer, Jean Smith, and all her coworkers with great admiration."

Smith gave Rapier (then a rising high school senior) her first opportunity in the lab at Emory. Rapier says, "I ended up working with the same researcher the years I attended college there. As a teen, I recall having a blast with mom's coworkers on social occasions."

Later, those folks were like family, she says, when the rabies group relocated to building 15, Clifton Road. "Many donated leave to my mom during her fight with cancer when she was working at a military drug-testing lab in Jacksonville, Florida, before her death in 1993." The link to public health stretches beyond CDC, notes Rapier. "My grandfather, CAPT Jerome Moore was a career flight surgeon in the Navy from the early 1940s to 1976."

Martin Duo: Father and Daughter

Pam Martin works in the CDC Library and Information Center. "There have been two members of my family at the CDC," she says. "Daddy (John E. Martin) started when we were still in Chapel Hill, North Carolina. There was a venereal disease laboratory there and it became absorbed by the CDC in 1961, so we were transferred to Atlanta when I was starting the fourth grade. Whoops . . . that dates me, doesn't it?"

Her father worked primarily with gonorrhea and wrote articles for publication from the mid-1960s into the early 1980s. "He also had several patents having to do with transport medium for gonorrhea. He retired in 1985, two years after I started working at the CDC. I didn't start out to be a medical librarian, but when the opportunity dropped in my lap I took it. I started out at the Chamblee facility library when we still had Quonset huts and the old Lawson General Hospital buildings. The library was in building 36 and was a really nice, airy location even if it was old."

The five years she spent there was "a joy that has never been equaled," Martin says. "I was moved to Clifton Road to the library in Building 1, fourth floor, in 1987, and have been at Clifton ever since. At Chamblee, I did just about everything in the library there, but at Clifton I became the interlibrary loan librarian, a position I still hold today. I have no articles or patents in my name, but the pleasure I derive by helping the researchers at the CDC has been of enormous satisfaction to me over the years."

She says she's "proud to be a second-generation CDC'er too, like Stacy Harper and many others."

Childhood Memories Include CDC

Some at CDC grew up with the agency. They visited the facility as children. They heard about it over dinner from their parents. Inspired or curious, they followed their parents on the path of public health, sooner—or later.

Stacy Harper, public health advisor, NCHSTP, says, "In my case, even though my grandfather and my dad both were in public health, I denied that I was called to the profession until I was in my 30s."

"Dad, Arthur B. Harper, better known as Art, was in the second wave of PHAs hired, the class right after **Bill Watson**, in 1948," Harper explains. "Dad was the first Exemplar of the Watsonian Society, in 1984 (the Exemplar is always the PHA who has been in service the longest, and is still IN service). He was, like most of the early PHAs, a flyboy in WWII, flown in the Army Air Corps. He had always told me I'd be good at the PHA, Venereal Disease Investigation (VDI) work, now known as DIS (Disease Intervention Specialists), but being like most kids, I never listened, and went about being a musician, then went onto Optometry for years."

Harper shares a story familiar to many who knew her father. "When asked how he was, he would always say, 'well, pretty good for a country boy.' Which, if you knew him, was really funny, as he was pretty sophisticated. Also, in meetings, I hear when he disagreed with a decision or statement, he would always preface things by saying, 'well, now, I'm just a country boy, but I think instead we may want to. . . .' He passed away in 1989 and, in 1991, I was hired as a Public Health Associate (formerly known as co-ops). He has a tribute brick in the WWII Museum in New Orleans, which reads: Arthur B. Harper, Our Country Boy. I bought a brick for the path at CDC which will say the same thing. I can't get away with saying 'I'm doing pretty well for a country girl'—it just doesn't have the same impact with me."

Morie M. Higgins, visual information specialist, NCCDPHP, DACH, says "My father's name is Joe Miller and he retired from CDC after a 30-year career. When he retired he was a Deputy Director in the Center for Environmental Health (before it became the Center for Environmental Health and Injury Control). My father started as a public health advisor in the VD Branch. During his time at CDC, he worked on projects related to 'Love Canal' and he also had the opportunity to work with WHO in India in the eradication of smallpox. I didn't have a public health calling when I started working at CDC. My degree is in fine arts. My dad suggested I see about getting a job at CDC and I've been here ever since, 21 years. My father passed away in June of 2005. He was very proud of his work at CDC, and he received many honors/awards for his work. I'm proud to be his daughter."

Donna Williams, FMO budget analyst, is a second generation CDC'er. "I have very fond memories of my mother, Joyce Myers, working over in the original red brick building at 1600 Clifton Road. As a child, I remember riding with her to work one Saturday and I was so impressed with what seemed at the time a huge work facility. I was always so proud to tell people who saw news stories featuring the CDC (which were many times filmed right outside the front doors by the CDC sign), that my mother worked for CDC and in that very building. I will very much miss seeing such a warm and familiar sight (that's why I purchased one of the historical bricks)."

Juanika Mainor-Harper, MPH, public health analyst, NCCDPHP, says "I always joke and say my first job at CDC was when I was in elementary school. Shortly after we moved to

Atlanta in the mid 1980s my mother began working at CDC, the huge building with the friendly people. When I visited my mother I liked to walk the halls looking for someone that wanted a copy made. I became interested in public health while attending Druid Hills High School. For an assignment on future careers, I researched the CDC. Between that assignment, and my mother's job, I realized public health was the career for me. As a junior in college, I obtained my first 'paying' job at CDC in the Office of Managed Care as a CDC/ATSDR summer student. With several years and degrees under my belt, I am now a public health analyst in CCEHIP. My mom Jeannette Greene retired in 2005, but people often see me in the halls and say, 'You look familiar.' I often laugh to myself knowing they probably remember me as that little girl walking the halls, volunteering to make copies.

"We've had eight different family members that have worked at CDC at different times, including my step-father **Willie Greene** who retired in 2005. Today there are three of us continuing the CDC legacy. My husband Kevin Harper (who works in ITSO) and my cousin Tina Lemons both work at CDC Clifton Road."

<u>Uncle Inspires Gee to Take Up Science as Career</u>

Jay Gee, PhD, NCID research biologist, says "My uncle (by marriage), Danny Jue, retired from CDC in 2003. He was formerly the Section Chief of the Protein Core Lab in SRP. He was my role model for becoming a scientist." When Gee was in graduate school at the University of Alabama at Birmingham, he would often drive to Atlanta to spend time with his uncle and his Aunt Edna. "I would visit Danny's office from time to time and really enjoyed talking to Danny's colleagues and hearing about their work. Danny encouraged me to apply for a position at CDC." Gee has been with CDC since 2002.

These are only a few of the legacies at CDC. How about you? Do you have a story you want to share about your family's role here? Send your memories to CDC Connects reporter Kathy Nellis.

>>>>>>>>>>>>>>

RETIREMENTS

After serving more than 23 years in the U.S. Public Health Service, **Frank DeStefano**, **MD**, **MPH**, retired from CDC on September 1, 2006. A medical epidemiologist, in October 2004 Dr. DeStefano was appointed acting chief of the Immunization Safety Branch of the National Immunization Program, now known as the National Center for Immunization and Respiratory Diseases (proposed). Subsequently, he was selected to serve as the acting director of the Immunization Safety Office when immunization safety activities were relocated to the Office of the Chief Science Officer in April 2005. He served in that capacity until January of this year when he was named director of the Vaccine Safety Datalink project.

DeStefano received a bachelor's degree from Cornell University in 1974 and a doctor of medicine degree from the University of Pittsburgh School of Medicine in 1978. After an internship in pediatrics at the University of Rochester School of Medicine, DeStefano joined CDC's Epidemic Intelligence Service (EIS) in 1979 and completed the CDC preventive medicine residency in 1982. He received a master of public health degree from Johns Hopkins University School of Hygiene and Public Health in 1984. He is board certified in preventive medicine and is a fellow of the American College of Preventive Medicine.

Dr. DeStefano's career included assignments with the Immunization Division and Family Planning Evaluation Division during his EIS and preventive medicine years. From 1982-84, he was a medical officer at the National Institutes of Health, where he continued his research in reproductive health and contraceptive evaluation. In 1982, he returned to CDC as a senior epidemiologist in the Agent Orange projects. In 1988, he was named chief of the Epidemiology and Statistics Branch of the Division of Diabetes Translation.

DeStefano left government service from 1992 to 1996 to take a position at the Marshfield Medical Research Foundation in Marshfield, Wisconsin, where he headed the epidemiology section. He returned to CDC in 1996 and worked primarily in immunization safety for the next 10 years.

As director of the Vaccine Safety Datalink project, DeStefano's scientific and managerial leadership resulted in peer-reviewed publications and presentations at major scientific conferences, many of which helped to inform national immunization policy. He published one of the first studies suggesting an association between periodontal disease and coronary heart disease, which has since been confirmed in other studies. Now a growing field of research has developed on the role of infectious diseases in coronary heart disease.

José F. Cordero, M.D., M.P.H.

Director, National Center on Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention

After more than 26 years of service in the U.S. Public Health Service, Dr. José F. Cordero will retire from CDC on December 31st, 2006. Please join us for a retirement celebration for him which will occur on **Monday, October 30**, **2006**, from **1:00 to 3:00 p.m.**, at the Roybal Campus, Building 19, Room 232, Auditorium B1/B2.

Dr. Cordero has served as Director of the National Center on Birth Defects and Developmental Disabilities since its establishment by the Congress when operations began on April 16, 2001. In 1999, he was named Assistant Surgeon General in the U.S. Public Health Service. Under Dr. Cordero's leadership and work the new center has grown into a leading research institution for birth defects and developmental disabilities, with expanded programs in autism, prevention of neural tube defects with folic acid, and the addition of a new division on hereditary disorders. The Center has had many areas of health impact, among them the 26% reduction in the rate of neural tube defects in the United States that have resulted mostly from fortification of cereal grains with folic acid. This translates into an additional 1,000 babies born healthy and free of serious birth defects. The Center is a leader in autism monitoring and epidemiologic research. After retirement from the Public Health Service, Dr. Cordero will be joining the academic team at the University of Puerto Rico, Medical Sciences Campus.

Memory album: If you would like to contribute to the memory album, please send your photos, cards, letters, emails, or clippings to lvette Matos by <u>October 15, 2006</u>.

SHARE

Federal Managers Association

Event type: Event11th Golf and 1st Mixed Doubles Tennis Tournament for FEEA Scholarships

Location: Country Club of Gwinnett Wednesday, October 18, 2006 From: 08:30 AM To: 02:00 PM

Web site: http://intranet.cdc.gov/od/fma/ (For details about this event)

Event type: Family Fun

<u>Disney on Ice presents Princess Wishes</u>

Location: Philips Arena, Atlanta, GA

Saturday, October 28, 2006

From: 11:00 AM To: 01:30 PM

7:00 PM To 9:30 PM

Sunday, October 29, 2006

3:00 PM To 5:30 PM

Web site: http://intranet.cdc.gov/share/index.html

(For details about this event)

>>>>>>>>>>>>>>>>

POSITION VACANCY

CTS GLOBAL, Inc.
(a division of Comforce Technical Services)
Position Vacancy List as of September 26, 2006

Senior Laboratory Scientist, Angola

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the Director of the National Institute of Public Health (INSP). Serve as a key advisor to the Director of INSP on programmatic, fiscal, technical and/or scientific issues for Public Health Laboratory services and supervises operations of the molecular biology laboratory. Analyzes laboratory processes and/or agency programs; with a primary focus on joint international collaborations on HIV /AIDS and Avian Influenza Initiatives. Communicates with colleagues, across Institute, and other contacts outside the agency to gather and analyze information about collaborative programs. Writes peer reviewed reports, letters, contracts, and other documents with recommendations for said research projects, policies and activities. Performs analytical and evaluative work associated with program activities and/or related operational research. Responsible for: Policy and Program Development, Carrying Out Study Procedures, Preparing Reports and Making Recommendations, Serving as a Scientific Specialist, Reviewing Literature and Develops Methodology

Contractor must: have: Master's degree in Microbiology or Molecular Biology. Experience must reflect the knowledge, skills, and abilities listed above.

Avian Influenza (AI) Advisor, Rwanda

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the CDC, GAP, Rwanda and the Avian Influenza Division. Coordinate technical and programmatic areas in AI activities. Work with COP to define priority areas for AI implementation. Serve as point of contact with Rwanda Government AI preparedness and response activities. Coordinate AI activities of other AI team members. Define long term needs for AI implementation with Rwandan government, donor community and other US Government agencies in conjunction with the COP. Serve as primary technical consultant, advising on crosscutting functions related to the implementation of AI activities (e.g., M&E, epidemiology, data collection and analysis, health care delivery systems, community-based programs, and BCC)

Contractor must have: DVM, MD, PhD with at least 1 year direct work experience in outbreak response for AI surveillance as well as disease response and planning in developing countries. Experience with implementing or managing public health programs in the developing world, as is an interest in issues related to AI and a solid background in coordinating a wide range of organizations and activities. Must have the ability to develop and assist in the implementation of strategic plans involving multiple international partners; skills to conduct critical analyses and evaluation of technical and programmatic aspects of programs; and an understanding of programs and organizational aspects of major international donors, multilateral agencies, and NGOs/private voluntary organizations. Extensive travel assignments in difficult field situations. Viral Epidemiology -Basic epidemiological understanding of avian viruses, including an understanding of the dynamics of the spread of the avian virus in a developing country and significance of mutations in H5N1 AI viruses Ability to assess the laboratory capacity of developing countries to detect and identify Al. Preparation of samples for international shipment to renowned reference laboratories. H5N1 Expertise-Current expertise in the prevention, detection, eradication of the H5N1 strain in developing countries (experts who have been involved in the surveillance, detection, cleanup programs of afflicted SE Asian countries)

Senior Program Advisor, Tanzania

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of Tanzania's influenza activities.

Provide technical and programmatic assistance in support of influenza activities conducted by CDC-Tanzania in conjunction with other US Government agencies in Tanzania, e.g., USAID, the Tanzania MOHSW, Epidemiology Unit, the Ministry of Livestock and Development, and other in-country partners. Works closely with the AI surveillance officer in the MOHSW, Epidemiology Unit to monitor and assist CDC's activities, in conjunction with USAID supported surveillance activities. Advises CDC on the implementation of a table-top simulation of Tanzania's influenza emergency preparedness and response plan with the National Institute of Medical Research. Updates the Strategic Information and Human Capacity Development Program Director

Contractor must have: Masters in Public Health with minimum of 2 years experience in infectious disease epidemiology with a working knowledge of virology, with emphasis on influenza. Experience must reflect the knowledge, skills, and abilities listed above.

Please submit your CV (with position title) to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls. Should your qualifications meet our requirements, we will contact you.

Epidemiology Resident Advisor, South Africa

Under this task order, the contractor will provide support services to satisfy the overall operational objectives of the CDC, Division of Epidemiology and Surveillance Capacity Development (DESCD), Coordinating Office for Global Health (COGH). The primary objective is to provide contractor services and deliverables through performance of technical assistance to the Ministry of Health and the National Institute of Communicable Diseases (NICD).

Provide expert medical guidance to health professionals related to the control and prevention of the spread and outbreak of disease and other adverse health events, working with programs that are a major component in the world-wide effort to control and prevent the spread of the introduction of infectious diseases and other health hazards. Responsible for providing assistance to the National Department of Health (NDoH), Provincial Departments of Health (PDoH), and the National Institute of Communicable Diseases (NICD) regarding project activities and training programs to continue the institutionalization process. Serve as the technical advisor in all aspects of project implementation, with the project consisting of three components: communicable and non-communicable disease surveillance; a training program for field epidemiologists; and in-service training program for sub-national public health officers and central program managers. Work to strengthen the surveillance of infectious and chronic diseases, including mortality surveillance utilizing the South African Field Epidemiology and Laboratory Training Program (SAFELTP) as the major training approach in providing trained field epidemiologists and mid-level public health professionals in order to improve human capacity in the country. Advise and assist a variety of officials and trainees in the conduct, management, and implementation of on-site epidemiologic investigations of public health problems – including chronic diseases, acute outbreaks and clusters of illness, environmental, occupational and other threats to health – in an international setting. Prepare technical and periodic reports on projects and training efforts under the training program and materials for marketing of the program within the country and internationally. Serve as team leader of on-site epidemiologic investigations of public health problems - including acute outbreaks and clusters of illness, including infectious chronic, environmental, occupational, and other threats to health in the region. Provide advice and assistance in the development and implementation of procedures, methods and strategies for obtaining and using data which describes the prevalence of major health risks. Evaluate and analyze data collection, quality control, and data utilization methods; and develop strategies and methods to improve the quality of the data collected.

Contractor must have: A doctoral degree or equivalent education in medicine, epidemiology, or a public health field. At least two years' experience in the Epidemiology Intelligence Service, a Field Epidemiology Training Program, or similar field epidemiology service. Four years of additional education/training or field

epidemiology experience in public health. A Master's of Public Health or an equivalent degree will also be considered but must include extensive experience in field epidemiology and experience in running international public health training. Experience must reflect the knowledge, skills, and abilities listed above.

Clinical Laboratory Coordinator (Clinical Trials), Botswana

Under this task order, the contractor will independently provide clinical laboratory support services to satisfy the overall operational objectives of the HIV Prevention Research Unit (HPR). The primary objective is to provide contractor services and deliverables through performance of clinical laboratory services required for the conduct of HIV prevention research, including FDA-compliant clinical trials.

Must have significant experience managing clinical trial labs – in all aspects: Understand the planning, budgeting and procurement process associated with lining up reagents, equipment, and supplies. Clear understanding of how lab tech schedules should be structured to ensure that there is sufficient coverage for running 20+ assays & monitoring runs & temperatures required in the clinical trails. Know the importance of and be well versed in GCLP (Good Clinical Lab Practices) and would be expected to manage the HPR Labs according to GCLP standards. He/she would also be familiar with a Laboratory Information Management system (LabWare or experience with any LIMS) -Understand the function and importance in maintaining data & specimen flow from the clinics & turning the specimen results around & generating accurate & timely reports using the LIMS. Allocate sufficient time to the needs of 5 labs & be familiar with matrix management - working closely with another senior level lab individual to manage the lab infrastructure. Identify problems in the lab & come up with potential solutions for resolving them and will be expected to bring these to the attention of the HPR director. Well versed in validating clinical results (i.e. chemistry, hematology, serology assays). Immediately identify results that either do not make sense or fall out of the expected range and understand what would need to be done in order to rectify the problem. Must understand FDA CFR 21 Part 11 regulations and compliance. This individual would be expected to work with two external monitors in providing details needed and resolving any issues raised during the monitoring process.

Contractor must: have a medical degree, master's, or doctoral degree in a laboratory science. Be eligible for license in Botswana. Have at least 3 years experience in a senior management position, directing a clinical laboratory. Knowledge of ethical conduct of human subjects research. Knowledge of safety procedures for working with biohazardous materials. Knowledge of computer data management. Experience must reflect the knowledge, skills, and abilities listed above.

Statistical Analysis and Data Management Oversight, Botswana

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the HIV Prevention Research Unit (HPR). The primary objective is to provide contractor services & deliverables through performance of statistical analysis & data management oversight for the conduct of research. Collaborate with investigators in the design & implementation of research, including clinical trials, surveys, observational studies, & operations research. Provide management direction for all data collection, data management, and data analysis activities for HPR research. Provide management direction for system development, training, & maintenance, including all software used for data collection. Provide

management direction in the design & implementation of data quality management procedures and reporting. Identify, characterize, and identify methods to resolve, and monitor resolution of, problems with: data validity, completeness, coding, timeliness, or data system efficiency. Collaborate with trial statisticians in preparing DSMB reports. Provide clean and complete datasets for timely analysis by investigators & statisticians. Operate data collection and management procedures in compliance with FDA Good Clinical Practice standard. Evaluate, guide, or implement possible alternative approaches to data collection and data management

Contractor must have a Doctoral degree in biostatistics, statistics, or related statistical field. 3 years+ experience in a statistical leadership position involving data management for biomedical health research (clinical trials, observational studies). Demonstrated experience in development of computer software systems for data collection & data quality management. Ability to communicate statistical ideas in plain English & to work well with interdisciplinary research teams. High degree of competency in SAS, or similar statistical analysis software. Experience must reflect the knowledge, skills, & abilities listed above.

Local Avian Influenza Surveillance Officer, Nigeria (Local Hire Only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division. Implement surveillance initiatives and recommends priorities to the AI Team Lead, CDC Nigeria and the Nigeria FMOH for program activities. Implement surveillance-related systems in conjunction with FMoH, CDC, WHO, and other donors. Implement surveillance strategies to decentralize surveillance from the federal to the state level. Interact with individual state ministries of health to implement national plans for influenza surveillance at the state level. Define evaluation activities that can inform mechanisms for improving coverage and sensitivity of the IDSR surveillance system as it is rolled out for influenza surveillance throughout Nigeria in conjunction with WHO. Develop appropriate data management systems to monitor objectives and indicators for human AI surveillance activities. Represent CDC Nigeria in the area of Influenza Surveillance and attempts to influence other collaborative organizations engaged in AI programs to adopt appropriate surveillance strategies for their program activities.

Contractor must: have: MBBS or Doctoral degree in Medicine or Epidemiology. Professional training and extensive knowledge in communicable disease surveillance programs. At least five years experience in the communicable disease surveillance programs at the local, state or international levels that entailed responsibility for the evaluation of program activities. Experience in use of measurement methods required for M&E of large populations and health programs, including quantitative and qualitative research. Knowledge of WHO's Integrated Disease Surveillance and Response (IDSR) is preferred. Fluency in Level IV English, both written and oral. Basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

Local Avian Influenza Laboratory Specialist, Nigeria (Local Hire Only)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the Centers for Disease Control and Prevention, Global AIDS Program, Nigeria and the Avian Influenza Division Provide technical expertise to assess laboratory systems of implementing partner laboratories

conducting avian or seasonal influenza testing for human surveillance. Evaluate quality and consistency of laboratory standards practiced, make recommendations for improvement, and provide the necessary technical assistance or training to implement these recommendations. Regularly provide laboratory support to the AI lab, including receiving, logging, testing and reporting results for specimens collected through rapid response or surveillance activities. Conduct central and on the job training of laboratory technicians, other laboratory staff and laboratory managers to address skill deficiencies. Provides guidance in the implementation of qualify laboratory systems and directs technical staff to professional resources pertinent to assigned tasks as needed. Implement laboratory-related systems in conjunction with FMoH, CDC, WHO, and other donors.

Contractor must have: MS degree or higher degree in Chemistry, Microbiology, or related laboratory science degree. Four years work experience in a multi-disciplinary hospital or health department laboratory. The incumbent should possess training in laboratory management and laboratory systems with specialized training in testing and viral diagnostic tests supporting related to viral isolation, and identification. Knowledge of advanced laboratory procedures, diagnosis and management related to viral isolation and identification. Skill in providing leadership, direction, and technical expertise in the laboratory systems to include being able to analyze and interpret the spectrum of laboratory medicine services related to viral identification. Possess basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

<u>Local Avian Influenza Surveillance Officer Seconded to Ministry of Health, Nigeria</u> (<u>Local Hire Only</u>)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division. This position will be housed at the Nigeria Federal Ministry of Health (FMoH) to assist the Government of Nigeria in building its capacity to implement AI preparedness and response infrastructure.

Implement surveillance-related systems in close collaboration with the CDC, WHO, and other donors. Move AI activities from federal to state level and work with individual ministries of health to implement national plans for influenza surveillance at the state level. Help define evaluation activities that can inform mechanisms for improving coverage and sensitivity of IDSR surveillance system as it is rolled out throughout Nigeria. Develop appropriate data management systems to monitor objectives and indicators for human AI surveillance activities. Serve as an expert in the area of influenza surveillance and attempts to influence other collaborative organizations engaged in AI programs to adopt appropriate surveillance strategies for their program activities.

The contractor must have: A doctoral level degree in: Medicine, Public Health; Epidemiology; Behavioral Sciences or strongly related discipline. Professional training and extensive knowledge in communicable disease surveillance programs. The incumbent should have at least five years experience in public health surveillance programs at the federal, state or international levels that entailed responsibility for the evaluation of program activities. Experience in use of measurement methods required for M&E of international populations and health programs, including quantitative and

qualitative research. Incumbent should have two years of supervisory experience. Experience in use of measurement methods required for M&E of large populations and health programs, including quantitative and qualitative research. Knowledge of WHO's Integrated Disease Surveillance and Response (IDSR) is highly preferred. Fluency in Level IV English, both written and oral.. Basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

<u>Local Avian Influenza Surveillance Officer Seconded to Ministry of Health, Nigeria</u> (<u>Local Candidates only</u>)

Under this task order, the contractor will independently provide support services to satisfy the overall operational objectives of the CDC, GAP, Nigeria and the Avian Influenza Division. This position will be housed at the Nigeria Federal Ministry of Health (FMoH) to assist the Government of Nigeria in building its capacity to implement AI preparedness and response infrastructure. Provide technical expertise to assess quality of laboratory systems at the federal and state level conducting avian or seasonal influenza testing for human surveillance. Move AI activities from federal to state level and work with individual ministries of health to implement national plans for influenza laboratory diagnostic testing at the state level. Evaluate quality and consistency of laboratory standards practiced at the federal and state level, make recommendations for improvement, and provide the necessary technical assistance or training to implement these recommendations. Regularly provide laboratory support to the AI lab, including receiving, logging, testing and reporting results for specimens collected through rapid response or surveillance activities. Conduct central and on the job training of laboratory technicians, other laboratory staff and laboratory managers to address skill deficiencies Provide guidance in the implementation of quality laboratory systems and assist technical staff with professional resources pertinent to assigned tasks as needed. Implement laboratory-related systems in conjunction with FMoH, CDC, WHO, and other donors.

The contractor must have: A Masters of Science degree or higher in: Chemistry, Microbiology, or related laboratory science degree. Four years work experience in a multi-disciplinary hospital or health department laboratory. Should possess training in laboratory management and laboratory systems with specialized training in testing and viral diagnostic tests supporting related to viral isolation, and identification. Knowledge of advanced laboratory procedures, diagnosis and management related to viral isolation and identification. Skill in providing leadership, direction, and technical expertise in the laboratory systems to include being able to analyze and interpret the spectrum of laboratory medicine services related to viral identification. Possess basic computer skills with experience/training for word processing and spreadsheets. Experience must reflect the knowledge, skills, and abilities listed above.

Please submit your CV (with position title)to emyers@comforce.com Due to the volume of resumes received, we are unable to accept phone calls. Should your qualifications meet our requirements, we will contact you.

