

The TB Education and Training Network  
(TB ETN) and the Regional Training and  
Medical Consultation Centers (RTMCCs)  
present

TB Education and Training Projects:  
Updates from the Field  
November 18, 2015

## Innovative Patient-Centered TB Infection Education Materials

Bureau of Infectious Disease  
Division of Global Populations and Infectious Disease Prevention  
Massachusetts Department of Public Health

November 18, 2015  
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## Background and assessment

- Immigrants and refugees are some of the highest risk communities for TB infection
  - MDPH emphasis on health literacy
- Environmental scan of existing TB education materials
  - Internal materials were old, outdated
  - Few materials specifically targeted audiences with limited English proficiency, limited literacy

## Design, Development and Process

- Contract with CommunicateHealth
  - Expertise in health literacy, communication
- Focused on motivational and action-oriented messages
  - Incorporated graphics that demonstrated actions
- Letting go of words and content
  - Simplify language
  - TB infection versus latent TB infection

## Pilot Testing

- Conducted in-depth interviews:
  - 8 immigrants and refugees
  - 4 healthcare providers
- Assessed participants' capacity to correctly:
  - Identify and retain the key messages
  - Identify the intended behavior associated with each graphic
- Assessed preference for bilingual or single-language materials

## Pilot Testing: Results

- Participants correctly identified most of the key take-home messages
  - A few graphics were misunderstood, and were revised
- Participants preferred bilingual to single-language materials
- Design of materials departs from traditional educational materials

## Product: Four new materials

The materials are designed to educate patients on the importance of taking TB medication consistently and provide practical tips for adherence, such as using pillboxes and calendars. They are available in multiple languages, including Spanish, Somali, and French.




## Implementation, next steps

- Webinar introduced materials to MA providers, provider tip sheet developed
- Community Health Workers trained
- Consistent online traffic, downloads
- Next steps for evaluation:
  - Feedback from community health workers, health care providers
  - Assess knowledge level, behavior change in patients



## Key Features (Impact)

**Picture-based**



If you become sick with TB disease, you might:



Sweat at night    Have fever

**Action-oriented**


→


Has TB infection    Takes TB medicine



→


**Interactive**

When?

Su	M	Tu	W	Th	F	Sa
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
☀	☀	☀	☀	☀	☀	☀
☀	☀	☀	☀	☀	☀	☀

Take \_\_\_\_\_ pills by mouth each time.


⚠

Never double up on your TB medicine, even if you miss a dose.





You will likely finish your TB medicine in \_\_\_\_\_ months.

**Bilingual**

Keep taking your TB medicine  
記得下次看診時間  
Remember your next doctor visit

日	一	二	三	四	五	六
日	日	一	二	三	四	五
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

您會在看診時拿到較多藥物。  
You will get more medicine at your next visit.


→

→

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## In summary

- Innovation in the field of health communication, patient centered development and process
  - Action oriented, graphics based, interactive, bilingual
- Support providers in their interactions with their patients
- Motivate patients to **start** and **complete** treatment for TB infection

MDPH website - TB Infection Patient Educational  
Materials

<http://www.mass.gov/eohhs/gov/departments/dph/programs/id/tb/tb-infection-patient-educational-materials.html>

CommunicateHealth – [www.communicatehealth.com](http://www.communicatehealth.com)

Thank you

## Tuberculin Skin Test Workshop Online Portal



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## Background

- **The Michigan Tuberculosis Control Unit (TCU) has provided a TST workshop and certification for over 10 years**
- **Goals:**
  - Improve case detection through TST training
  - Improve quality and competence of testing

## Development

- **In 2014 five gaps were identified for improvement:**
  1. Incomplete reporting of records
  2. Non-certified individuals providing courses
  3. Inappropriate curricula
  4. Burdensome record-keeping for staff, instructors, and participants
  5. Difficulty in conducting an accurate evaluation of workshops

## Development

- TCU identified a need for an online management system
- In collaboration with Michigan Public Health Institute (MPHI), workshop, instructor and participant records were moved online

## Implementation

- January 9<sup>th</sup>, 2015: TST Online Portal went live
- Participants: Search, register, and access TST workshops resources
- Instructors: Create workshops, access course material, and maintain information for certification and CE requirements
- TCU: Continue creating and managing course content
- MPHI: Manage daily maintenance and accessibility of Portal, certifications, and CEs



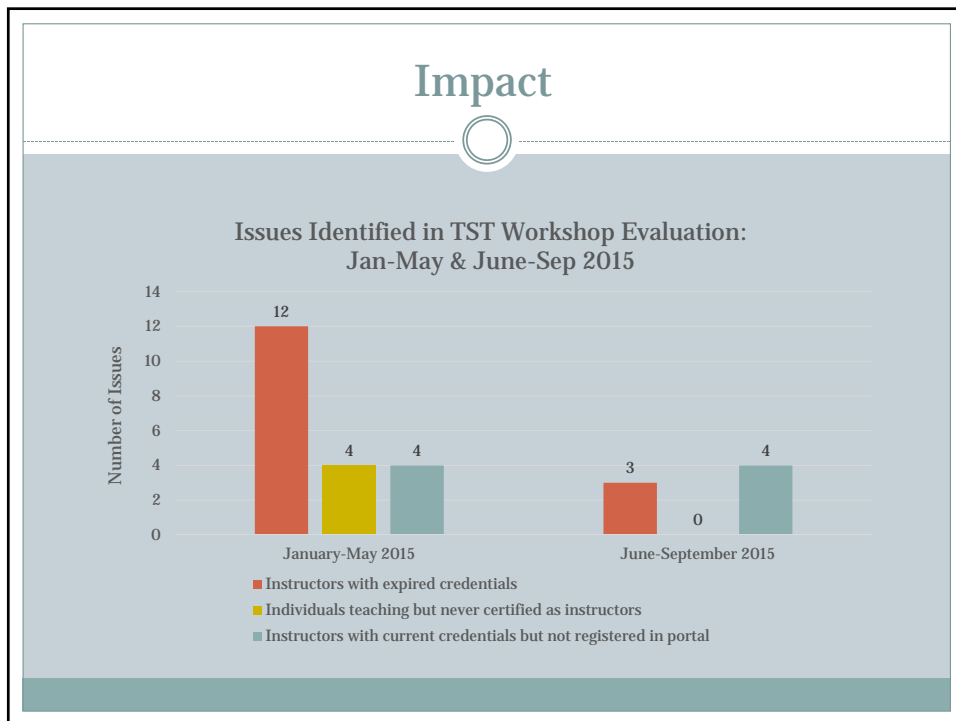
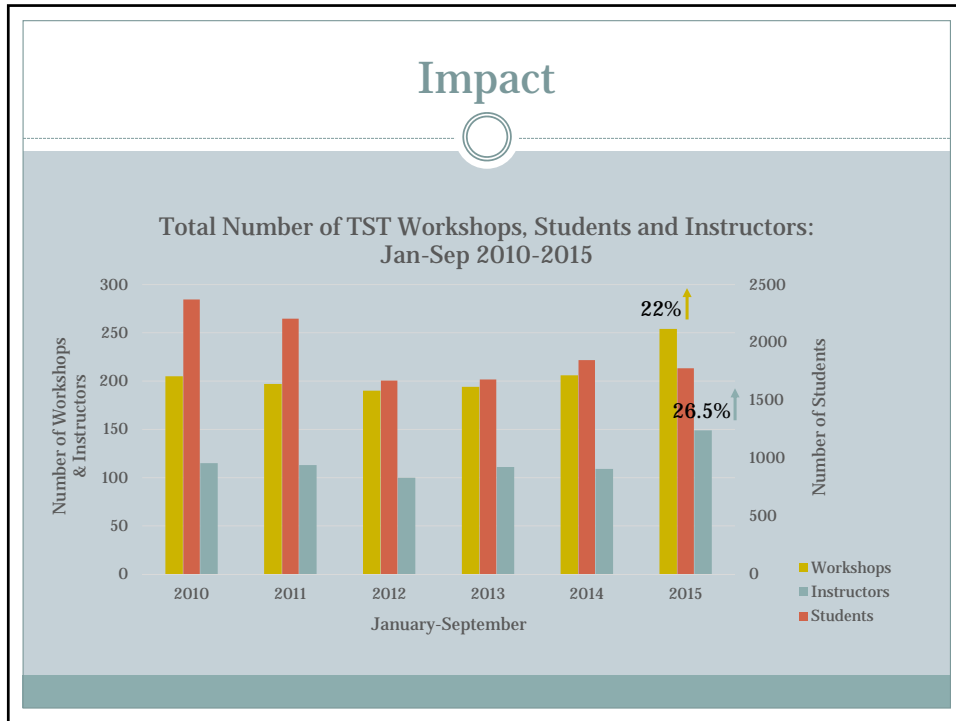
## Evaluation

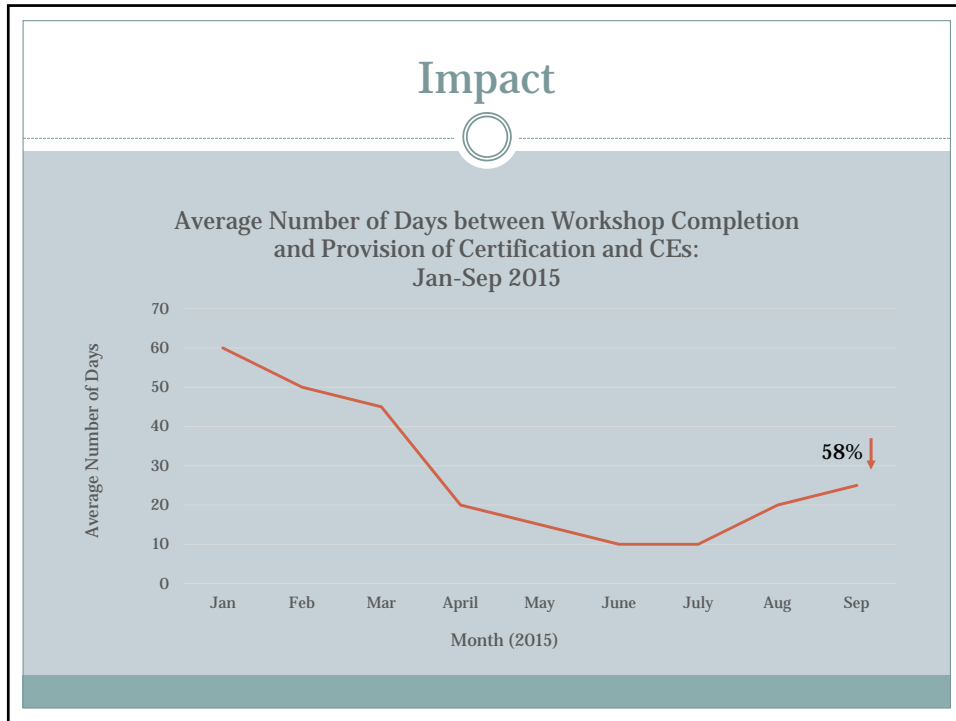
- **May 2015: Began annual survey of participants and instructors assessing three elements of the Portal:**
  1. Usability
  2. Capacity to appropriately manage needed components
  3. Ability to improve reporting completeness

## Impact

**As of September 2015:**

- 254 workshops certifying 1,777 participants
- 149 certified instructors
- Identified 15 instructors with expired credentials
- At least one workshop was offered in 42 counties
  - 83% of total counties
- Compared to the average of the previous 5 years:
  - 22% increase in class numbers
  - 26.5% increase in instructors





### Contact

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Thanks to Sherri Hines and Linda Holton (MPHI) for their  
assistance and management of the TST Portal, and Peter  
Davidson (MDHHS)

## 2013 & 2015 Nebraska Infectious Disease Updates

Kristin Gall, RN, MSN – TB Nurse Consultant /  
Refugee Health Coordinator

Jude Dean, RN, BSN, MS – TB Education Focal Point /  
Hepatitis Program Coordinator

State of Nebraska DHHS – Division of Public Health

## 2013 Education Background

- Needs Assessment Results
  - DHHS Nurse Provider unit requested input on future CEUS – TB, Hepatitis, STDs and HIV identified
  - Local providers/health departments needed updated IGRA information
- Training was last provided in 2009 – needed update
- Decided to do “Traveling Bug Show” – go to nurses
- Partnered - AIDS Education Training Center (AETC)
  - Nurse Practitioner presented

## Development of Objectives

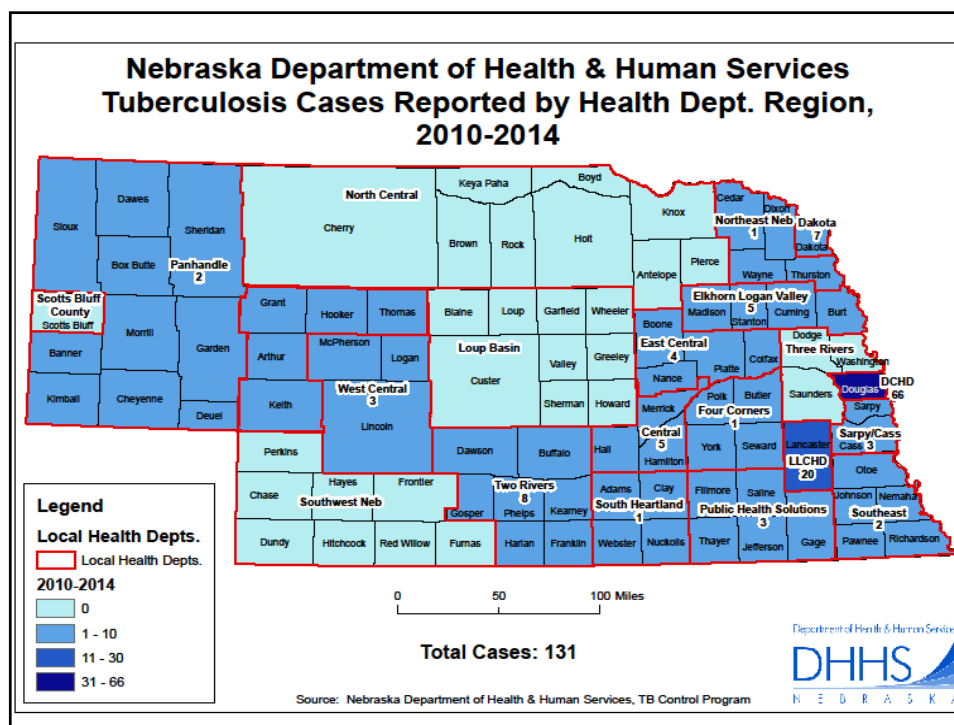
- List the benefits and limitations of Interferon Gamma Release Assays IGRAs with different Tuberculosis risks
  - History of IGRAs
  - Updated Guidelines for using IGRAs (MMWR)
  - Shortage of TB Antigen (2013)
  - Limitations of TST
  - Presented case studies
  - 3HP (12 week INH – RPT regimen)
  - Reviewed TB in Nebraska

## 2013 Education Implementation

- Utilized DHHS Nurse Provider Unit for Free CEUs
- 4 professionals traveled to distant training sites
  - Educated West & North side of State
- Offered a 4 hour session with Free CEUs
  - Started in morning
  - Had to provide food for length of training (\$)
- Difficult to schedule 4 practicing professionals
  - Had to use a Van (or Jude's SUV)
  - Long days, required overnight stay and meals (\$)
  - 3 locations
    - 118 nurses and health care workers educated in 2 months
      - Scotts Bluff & North Platte – September
      - Norfolk - October

## 2014 Education Updates

- In 2014, Nebraska had 55% increase in cases
  - Education Focal Point attended the National Jewish Training, in Denver
  - 2014 Cases were complex
    - Required intensive case management
    - Had commitment case
    - Supported outbreak investigation activities in rural areas that do not see a lot of TB
    - Limited staffing

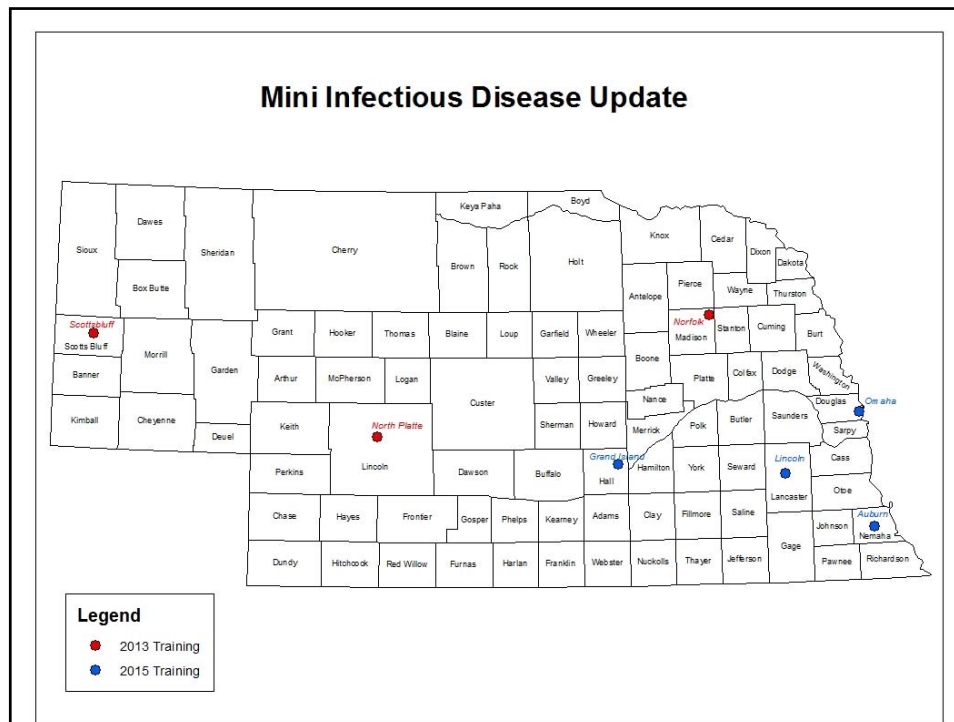


## Education Evaluation

- Needs Assessment Results from 2013:
  - CEU evaluations completed and multiple requests for addition TB information were identified
  - Nurses stated length of training was challenging
  - Needed to educate East side of State
- People were hearing about TB
  - Locals needed support to answer their questions
- Impending Retirement of Pat Infield
  - Needed to travel prior to her leaving

## 2015 Education Implementation

- Only 2 hours total time for nurse – with free CEU
- Offered the 2 hour session – multiple times per day
  - Local – 3 times in one day
  - Distant drive – AM & PM sessions
- Easier to schedule 2 professionals
  - Had car .... Will travel
- More in attendance because of nursing shift work
  - 5 locations: Lincoln (2), Omaha, SE & Central Nebraska
  - 242 nurses and health care workers educated in 1 month



## Evaluation / Impact

- IGRAs not being utilized in field (asked during talk)
- Basic TB education is needed (based on ?s)
- Participants were so grateful for “Traveling Bug Show”
- Limit time you require people to attend a training
- More education requests on TB related topics
  - Infection Control and Treatment
  - IGRA ?s
- 242 Participants rated the 2 hour sessions as excellent and meeting all objectives 99.38% of the time.



## Acknowledgments / Contacts

- Pat Infield made this endeavor a reality
  - Advocate to support traveling education
  - Face-to-face so important!
  - She's retired as of August 3, 2015!
- Kristin Gall - [kristin.gall@nebraska.gov](mailto:kristin.gall@nebraska.gov)
- Jude Dean - [jude.dean@nebraska.gov](mailto:jude.dean@nebraska.gov)

