

2019–2020 Tuberculosis Demonstration Site Project Report



Project Background and Goals

NACCHO, with support from the Health Resources and Services Administration (HRSA), has been working to identify the drivers of, barriers to, and ways to support relationships between health centers (HC) and local health departments (LHDs) to strengthen the health of their communities. These partners represent critical access points for preventative and primary health care services, particularly for underserved populations. During the 2018-2019 project year, NACCHO conducted a series of stakeholder interviews and developed three case studies of current HC and LHD partnerships, specifically on their efforts to identify and treat tuberculosis (TB). NACCHO interviewed sites in Denver, CO; Orleans County, NY; and Houston, TX, which are partnering to serve migrant communities, increase uptake of a once weekly isoniazid-rifampentine for 12 weeks (3HP) treatment regimen, and modify clinical workflow protocols to increase TB (including latent tuberculosis infection) screening among patients. NACCHO also convened a National TB Stakeholder Consultation Meeting to inform strategies and efforts to improve health center and health department collaboration on TB prevention and control.

These case studies yielded a number of lessons learned including the importance of relationship building, which may take a greater effort initially but was identified as being worth the time for the success of the collaboration. Partners providing support while allowing each other to take ownership over their



pieces of the process can help to ensure buy-in and increase sustainability. Finally, across all case studies it became evident that HC and LHD collaborations were strengthened by having a common goal and clear understanding of roles and responsibilities.

Building upon the lessons learned during the 2019-2020 project year, NACCHO provided funding and technical assistance to two demonstration sites to explore and strengthen the relationships between LHDs and HCs to improve TB identification, treatment, and prevention. The goal was to identify facilitators, drivers, barriers, solutions, and innovative approaches to building and strengthening these partnerships. By convening these partners and facilitating strategic action planning meetings, NACCHO sought to foster conversations that articulate the shared goal and the roles of each partner to increase coordination of activities and improve access to TB services among the populations the LHD and HCs served, including those experiencing health disparities.

Accomplishments

NACCHO identified and established contracts with two LHD-HC pairs to formalize their partnerships and implement strategies for improving TB identification, treatment, and prevention within their communities. These sites include the Rio Grande County Health Department and its corresponding health center partner, Valley Wide Health System in the San Luis Valley region in south-central Colorado and Grand Forks Public Health (GFPH) and Spectra Health in North Dakota.

NACCHO also partnered with the National TB Controllers Association (NTCA) to: provide training and technical assistance to the demonstration sites; consult with NACCHO to provide feedback and input on demonstration site activities, progress reports, and summaries of lessons learned; and leverage its network to disseminate findings, tools and resources from the demonstration site project as they become available.

NACCHO facilitated strategic action planning meetings in both Rio Grande, CO and Grand Forks, ND. These meetings were attended by staff from the local health department and health center, as well as invited guests from the respective state TB programs. Meeting participants identified the strengths of and opportunities for their partnerships, as well as the weaknesses of and threats to them. Strengths identified included relationships with the state health departments; clinical staff that have a public health lens and public health staff with clinical backgrounds; prior experience with a TB outbreak in Grand Forks, North Dakota, which resulted in more staff being familiar with TB treatment and cemented TB as a priority for health department leadership; ongoing outreach to the migrant community (a target audience) in Rio Grande, Colorado and longstanding relationships with this otherwise difficult to reach population; and existing resources such as funding for medications, and organizations in the community who could be brought together to support the work.

Weaknesses included challenges engaging physicians on TB work, including an unfamiliarity among providers with TB treatment options or protocols, and difficulty engaging providers in TB-specific



education. The partners also cited challenges with funding—both sustained funding for public health to conduct provider outreach and funding for clinical services including Interferon-Gamma Release Assays (IGRAs), CT scans and chest x-rays.

Participants discussed the key priority areas related to TB identification and care for their partnership to address. In addition, participants identified opportunities to increase knowledge and abilities for practitioners within their community to better serve their community. Moreover, these meetings allowed key stakeholders to raise awareness related to health inequities and provide a space to discuss potential solutions to work with community health workers to better serve their community. By the end of the two- day meeting, participants had collaboratively developed strategic action plans for their partnership, mapping out immediate next steps and long-term strategies to strengthen their collaboration and coordination to address identified challenges and improve access to TB services and treatment . In addition to the creation of these plans, participants verbally reported that they had a shared vision and goal, a clearer sense of each partner's role and felt excited to implement next steps.

In Grand Forks, partners set a shared overarching goal to decrease incidence of TB disease in their jurisdiction. To achieve this goal, the LHD and HC partners set three strategic priorities: provide targeted technical assistance (to local providers), describe the TB workflow in Grand Forks, and create provider education materials. In Rio Grande, partners developed a shared goal to create agreements and models for the identification and treatment of active and latent TB in the region, working towards TB elimination. To advance this goal, partners set four strategic priorities: educate healthcare providers, create communication continuity within the partnership, engage and educate the target population, and build clinical capacity.

For these strategic action planning meetings, NACCHO leveraged many resources that had been developed through HRSA-funded LHD-CHC collaboration work, including the [Collaboration Trust Scale for Shared Service Arrangements](#) and a modified interactive activity based on the Mobilizing for Action through Planning and Partnerships (MAPP) [Circles of Involvement Exercise](#). The strategic action planning process was informed by, and the template for the action plans, was based upon the [Local Health Department-Community Health Center Collaboration Toolkit](#).



COVID-19 Impacts

The COVID-19 pandemic has magnified infrastructure and workforce needs within public health and healthcare. It has also highlighted the importance of pre-existing relationships between public health and healthcare prior to emergencies and outbreaks to ensure continuity of care for their jurisdictions. While COVID-19 has impacted the TB work [across the country](#), including in both demonstration site communities, the existing partnership afforded a quick transition in work and the ability to unite efforts to support populations most at risk within their communities. In Grand Forks, the LHD's TB program was able to continue without interruption, shifting seamlessly to virtual visits with clients.

However, Spectra health center's ability to engage with the health department on TB work decreased while the agency focuses on meeting critical community needs related to COVID-19. Grand Forks Public Health and Spectra health have been coordinating closely on COVID-19 activities and have conducted COVID-19 testing among people experiencing homelessness. As the health center looks toward a return to more routine services, they are considering opportunities to leverage their partnership with the LHD for testing. The partnership was bolstered through this project and continues to meet a variety of community needs. Both partners hope to revisit the strategic action plans they developed through this TB demonstration project once they are able to transition more staff time to activities beyond COVID-19 response. Grand Forks Public Health identified that this project provided direction for how they may improve their TB program in the future.

[PROJECT SUMMARY]

December 2020



As a result of COVID-19, Rio Grande County Public Health has experienced significant staffing changes and the county contacts for this project are no longer with the organization. However, the Tuberculosis Training and Education Coordinator from the Colorado Department of Public Health and Environment's TB Program attended the strategic action planning meeting and has indicated an interest in providing continued support to advance the work that was initiated through this project. The Tuberculosis Training and Education Coordinator has offered to support the community health center in the interim and connect with the new staff at Rio Grande Public Health once they have been identified.

While the TB demonstration site project was delayed due to the COVID-19 pandemic, the response efforts to COVID-19 within each community was quickly established due to the existing partnership between the HCs and LHDs, demonstrating the versatility of how these organizations can work together. These partnerships are vital to ensuring communities receive comprehensive care and essential services.

Conclusion

This project year, the HC-LHD collaboration was expanded and adapted to respond to and address the COVID-19 pandemic. Due to established HC-LHD partnerships, activities could be rapidly and effectively redirected to respond to this emerging infectious disease. HC-LHD collaborations can make effective use of limited resources, increase the integration of services, expand access to critical health services and linkage to support services that benefit their community. Through continued support from HRSA, NACCHO hopes to build upon the work started by the TB demonstration sites to strengthen and expand these partnerships, disseminate lessons learned, and further highlight the importance of the HC-LHD partnership. Enhanced HC-LHD partnerships will lead to stronger local infection prevention and treatment systems, resulting in reductions in transmission, improved treatment of TB, and healthier communities.

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