

I. INTRODUCTION

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1. PURPOSE OF THE MANUAL

The **purpose** of the *Tennessee TB Elimination Program Manual* is to establish standards of public health practice in Tennessee to guide regional and local health department activities toward achievement of the program's vision and mission. The aims of this document include the following:

- To clearly state programmatic policies and procedures using best practices;
- To provide a user-friendly format for reference and day-to-day use;
- To provide a format for more objective program evaluation at the regional level;
- To ensure consistency with the TDH electronic medical record system (currently under development); and
- To provide web-based access for convenient reference and timely updates.

2. OVERVIEW OF THE TENNESSEE TB ELIMINATION PROGRAM (TTBEP)

The **vision** of the TTBEP is a state and nation free of tuberculosis (TB) and the **mission** of the program is to eliminate TB in Tennessee. Achieving this mission is predicated on implementation of three (3) **priority strategies** for controlling and preventing TB, as recommended by the national "Advisory Council for the Elimination of Tuberculosis" (ACET):

- 1) Identify and fully treat persons who have active TB disease (**Active Cases**);
- 2) Find and screen persons who are contacts to TB cases to determine if they are infected with *Mycobacterium tuberculosis* or have active TB disease, and provide appropriate treatment (**Close Contacts**); and
- 3) Target populations at high risk for TB infection and disease to detect infected persons and provide treatment when appropriate to prevent progression to active TB (**Targeted Testing Initiatives**).

[See: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5412a1.htm>]

TTBEP strives to achieve the following “**Healthy People 2020**” objectives:

- IID-29 – Reduce tuberculosis (TB)
- IID-30 – Increase treatment completion rate of all tuberculosis patients who are eligible to complete therapy
- IID-31 – Increase the percentage of contacts to sputum smear-positive tuberculosis cases who complete treatment after being diagnosed with latent tuberculosis infection (LTBI) and initiated treatment for LTBI
- IID-32 – Increase the proportion of culture-confirmed TB patients with a positive nucleic acid amplification test (NAAT) result reported within 2 days of specimen collection
- IID-33 – Increase the proportion of adults with tuberculosis (TB) who have been tested for HIV

References:

1. <http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicId=23>

3. VALUES OF THE TTBEP

In the practice of TB control and prevention, the TTBEP strives to reflect the following **values**:

- Innovation
- Health equity
- Disease prevention
- Patient-centered services
- Multi-disciplinary teamwork
- Evidence-based public health practice
- Collaboration with other public and private organizations
- Partnership between public health and medical practitioners
- Respect for the dignity and individual rights of all persons affected by TB

4. LEGAL AUTHORITY

Under the Tennessee Code Annotated, the Tennessee Department of Health is charged with the control, treatment and prevention of tuberculosis as follows:

- Tenn. Code Ann. § 4-3-1803 (2014), Title 4 – State Government, Chapter 3: Creation, Organization and Powers of Administrative Departments and Divisions; Part 18: Department of Health, 4-3-1803. Powers and duties.
“The department of health has the power to: (10) Exercise all the rights, powers and duties relating to the subject of tuberculosis control and treatment set forth in Title 68, Chapter 9, and have custody and control of all reports, records and equipment appertaining thereto.”
- Tenn. Code Ann. § 68-9-102 (2014), Title 68 – Health, Safety and Environmental Protection, Health, Chapter 9 Tuberculosis, Part 1 General Provisions, 68-9-102. Division of tuberculosis control created.

“The department of health is authorized and empowered to create and maintain a division of tuberculosis control, which shall provide effective measures for the diagnosis, prevention, treatment and cure of tuberculosis.”

5. **ROLES IN TB CONTROL AND PREVENTION**

- **Tennessee Department of Health**
 - Commissioner of Health
 - Multiple responsibilities as outlined in Tennessee Code Annotated (**see: Tenn. Code Ann. – Title 68, Chapter 9; also Rules of Tennessee Department of Health Chapter 1200-14-01 and 1200-14-04**)
 - Chief Medical Officer
 - Multiple responsibilities as outlined in Tennessee Code Annotated (**see: Tenn. Code Ann. – Title 68, Chapter 9; also, Rules of Tennessee Department of Health Chapter 1200-14-01 and 1200-14-04**)
 - Tennessee Tuberculosis Elimination Program (TTBEP) Medical Director
 - Develop guidelines and standards for TB care statewide
 - Provide expert consultation to health department TB staff and community clinicians in delivering TB care meeting national quality standards
 - Effectively communicate and work in collaboration with central, regional and local TB staff to provide the best care for patients
 - Provide administrative management of the state TB program, including allocation of state and federal resources to regional TB programs and development of the TB Elimination program strategic plan
 - Develop and implement professional development activities for public health TB staff and other partners
 - In conjunction with the Office of General Counsel, provide expert consultation in application of public health law
 - In conjunction with the TDH public information officers, provide expert consultation on verbal and written media relations
 - Tennessee Tuberculosis Elimination Program – Central Office (TTBEP C.O.)
 - TB surveillance and reporting to CDC
 - Training and education of regional TB program staff according to state and national standards of practice
 - Allocation of resources to regional TB programs
 - Provision of patient-specific resources to support in-patient or out-patient diagnostic and treatment procedures, or to ensure protection of the public from infectious TB (isolation and quarantine)
 - Technical assistance upon request to regional TB programs, particularly for contact investigations involving congregate settings or across public health jurisdictions
 - Provide educational services to public and community-based agencies and stakeholders
 - Program evaluation and quality assurance

- **Regional Health Offices (13)**

- Regional Health Officer

- Oversight of medical and public health practice of the regional TB program in accordance with guidance provided in the *TTBEP Manual*
- Designee of the Commissioner of Health or Chief Medical Officer as outlined in Tennessee Code Annotated (T.C.A.)
- Legal responsibility for application of public health law to protect population in the jurisdiction from public health threats
- Consultation with the TTBEP Medical Director to coordinate multi-jurisdiction outbreaks

- Regional TB Program Manager/Communicable Diseases Coordinator

- Implement direct individual and public health services in accordance with guidance provided in the *TTBEP Manual*, including but not limited to: evaluation, diagnosis, treatment, case management, directly observed therapy (DOT), contact investigation, and targeted testing
- Ensure that individual services reflect patient-centered care and are delivered efficiently and effectively
- Coordinate all TB-related contact investigations within the region, with the assistance of local public health staff
- Collaborate with TTBEP C.O. staff to provide training and education opportunities to public health staff and community partners
- Maintain and deliver appropriate TB surveillance data to TTBEP C.O.

- Regional TB Physician

- Provide clinical evaluation, diagnosis, treatment and monitoring of persons with suspected TB disease or TB infection in accordance with guidance provided in the *TTBEP Manual*
- Collaborate with regional and local TB program staff to ensure high quality patient-centered care
- Communicate in a timely manner with local clinical partners in the management of individuals with TB disease or TB infection, particularly those with significant co-morbidities
- Assist with education of TB program staff and community partners

- **Local Health Departments (95)**

- Implement direct individual and public health services in accordance with guidance provided in the *TTBEP Manual*, particularly directly observed therapy (DOT) and assistance with TB contact investigations
- Assist with education of individual patients and community partners

- **Community Partners**

- Physicians, hospital infection preventionists, other healthcare service providers
 - Report persons with suspected TB disease to the local health department in accordance with Tennessee statutes

- Laboratories
 - Delivery of laboratory data, specimens or isolates as required by Tennessee statutes
- Community health centers and other primary care providers
 - Develop clinical capacity for recognizing risk factors for TB infection, clinical signs and symptoms of active TB disease, and timely referral of patients with suspected TB disease for appropriate diagnostic evaluation and treatment
 - Develop procedures for appropriate TB screening, testing and treatment of TB infection
 - Implement infection control procedures to ensure protection of staff and patients from infectious TB
- Community organizations
 - Assist in education of public health staff regarding cultural understanding of TB infection, disease, and treatment, as well as barriers to health care services
 - Collaborate with public health staff to identify opportunities for community education about TB control and prevention
- Media
 - Collaborate with public health staff to provide factual information about TB infection and disease to communities at risk, particularly during contact investigations in congregate settings