



August 16, 2023

Erica Pan, MD, MPH, FAAP
Deputy Director/State Epidemiologist
Center for Infectious Diseases
California Department of Public Health

Dear Dr. Pan,

The California Tuberculosis Controllers Association (CTCA) Executive Committee appeals to CDPH to prioritize tuberculosis (TB) for inclusion in the CalCONNECT expansion.

As you are aware, data management and analysis is an integral component of a TB contact investigation. A TB contact investigation typically involves a large amount of demographic, clinical, and epidemiologic information that needs to be systematically collected, organized, and analyzed. Data collected from a TB contact investigation is used for the management of care and follow-up for the index case and identified contacts, epidemiologic analysis of an investigation in progress creating aggregate reports that would assist in deciding when to expand an ongoing investigation, and for program evaluation using performance indicators that reflect performance objectives.

There is a need for a systematic, consistent approach to data collection, organization, analysis, and dissemination. To date, there is no available comprehensive application for TB contact investigations for data collection and analysis. Local health jurisdictions have either used an Excel spreadsheet, Access database or costly off the shelf applications, which TB programs with limited resources are unable to afford. The planned expansion of CalCONNECT inclusion of TB would greatly benefit local health jurisdiction TB Programs for data collection and analysis for TB contact investigations.

Santa Clara County Public Health partners documented the health equity impact of integrating of social services with disease investigation using CalCONNECT in a recent journal article, [Integrating social services with disease investigation: A randomized trial of COVID-19 high-touch contact tracing](#). Within CalCONNECT, contact tracers could create referrals to resource coordinators and clinicians as needed for each client, facilitating risk-based referrals for TB prevention activities. A comprehensive list of additional use cases for TB in CalCONNECT is appended.

Though aware of the health inequities of the TB burden in California, we link here two quick references to illustrate the special considerations warranted by the challenges of this airborne infectious disease that disproportionately burdens some California communities while remaining a threat to all.

- <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/TBCB-TB-Snapshot-2022.pdf>
- <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/CostsandConsequencesofTBinCA.pdf>

Thank you for your thoughtful consideration of this appeal.
[CTCA Executive Committee](#)

Use Cases for TB in CalCONNECT

Contact investigation (contact tracing) management including:

1. Softphone, email, and text-based methods of communication with cases and contacts
2. Eliciting contacts from index case including exposure characteristics (duration, location)
3. Tracking attempts to reach each contact
4. Clinical and demographic characteristics of contacts (age, comorbidities, place of birth, TB history)
5. Track testing; initial and follow up test results; result aggregation to guide expansion or closure of investigation
6. LTBI treatment recommendation/acceptance
7. Generate a contact roster for each case

LTBI treatment assistance and documentation (not limited to contacts):

Use virtual assistant to help programs educate patients and communities about LTBI and TB risk in order to improve treatment acceptance as well as ongoing support and tracking patients on LTBI treatment including:

1. Providing patients with education about LTBI, TB, TB Prevention, LTBI treatment, linkage to LTBI care, link to other TB/LTBI patient resources
2. Adherence to LTBI treatment including weekly regimen of INH and Rifapentine
3. Assessment of side effects during treatment and link to advice
4. Capture info on clinical provider, LTBI treatment regimen, and outcome
5. NonEnglish language support, tailored messages could help address disparities in TB

Outbreak investigation management:

1. Use exposure events and location histories to identify outbreaks and assist with TB outbreak investigation and congregate setting contact investigations.
2. Generate outbreak line lists and timelines
3. Track outbreak response activities, coordination, communication including across LHJs
4. Use data visualization to guide investigation and prevention activities (e.g., contact network diagrams and geographic mapping of cases and exposure locations)

LTBI and TB Prevention Surveillance:

Data captured would populate CDPH LTBI/TB prevention registries as well as used for CDC-required aggregate reporting of contact investigation and targeted testing and treatment activities.

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