



NEW STRATEGIES FOR TB POST-COVID FROM SAN DIEGO COUNTY

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HEALTH AND HUMAN
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LIVE WELL
SAN DIEGO



SELECTED TB PROGRAM ADAPTATIONS FROM PANDEMIC



- **Telehealth**
 - **Transition of LTBI program to telehealth**
 - Expansion of vDOT: ~20% pre-pandemic → ~80% during → ~50% currently
 - App-based Ishihara testing
- **Outreach, Education, Community Engagement**
 - **Using COVID vaccine events for TB education and risk assessment**
 - Highlight health equity concerns relevant to both TB and COVID-19
 - **Adoption of virtual meetings facilitated provider engagement for TB prevention**
 - Virtual education sessions for contact investigation support
- **Workforce**
 - **Telework**
 - **Turnover/Retention**
 - **Mental Health, Burnout**

LTBI TELEHEALTH



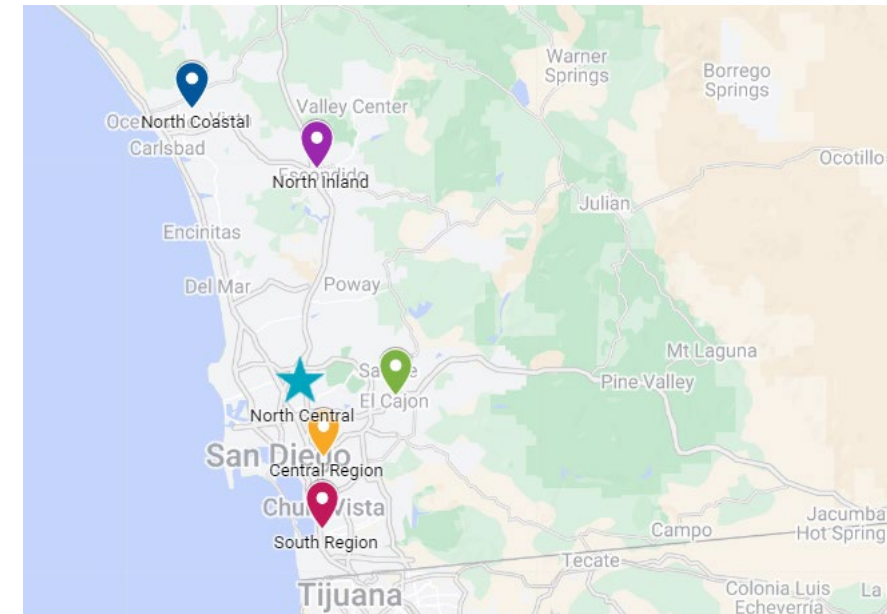
SUBTITLE

■ TB Clinic Located in North Central Live Well Center

- On site chest x-ray services
- TB skin testing
- IGRA: On site or referral to commercial draw station
- Medical provider services focused on active TB diagnosis and treatment

■ 5 Regional Public Health Centers

- TB skin testing
- IGRA: On site or referral to commercial draw station
- **LTBI Clinics (medical evaluation for treatment)**
 - In-person appointments ONLY pre-COVID
 - Telehealth appointments started during COVID
 - Now offering mix of in-person and telehealth



LTBI TELEHEALTH: PATIENT COORDINATION



LTBI Step	Visit Type	Provider Type and Activities
1-3	In person	<p>Nurse Staff</p> <ul style="list-style-type: none"> ▪ Intake assessment prior to telehealth appointment ▪ TB test and CXR – rule out active TB
4-6	Telehealth (or in person as appropriate)	<p>LTBI Coordinator</p> <ul style="list-style-type: none"> ▪ Review patient chart and test results prior to appointment ▪ Develop treatment plan ▪ Review monthly labs (if applicable) ▪ Manage patient side effects (if applicable)
7	Telehealth (or in person as appropriate)	<p>Nurse Staff</p> <ul style="list-style-type: none"> ▪ Monthly nursing assessments (in person or telehealth) ▪ Treatment adherence and completion

LTBI TELEHEALTH PROGRAM

Impetus for Telehealth Program

- Inspired by technology used for DOT (active TB)
- Increase access to care throughout San Diego County
- COVID-19 Pandemic

How Telehealth Program Was Started

- Worked closely with IT department
- Required creation of new documents and process flows - consent forms, telehealth intake forms
- Emergency approval during COVID
- Implemented using Doximity

Why Telehealth Works Well for LTBI

- Process to rule out active disease prior to LTBI appointment, or to refer for further evaluation if suspicious of active TB
- LTBI champions
- Continuity of care
- Patient-centered care

LTBI TELEHEALTH PROGRAM



Benefits

- Benefits to patients: improve patient access to care
- Benefits to providers: increase efficiency and productivity of LTBI coordinator
- Benefits to health program operations: focus on use of LTBI specialist

Challenges

- Language barriers
- Access to technology and technology literacy
- Acceptance of LTBI

Considerations for In-person Management

- Patients experiencing side effects
- Non-adherence
- Patient preference

OUTREACH, EDUCATION, AND COMMUNITY ENGAGEMENT



- Vaccine events for TB education
 - CoSD TB Outreach and Education Team first began using flu shot clinics as venues for TB education in 2018.
 - Model adapted and expanded at COVID-19 vaccine sites, in collaboration with Champions for Health.
 - Champions for Health received TB Elimination Alliance mini-grants to expand the incorporation of TB education and risk assessment into COVID-19 vaccine events.
- Prevention Coordination
 - San Diego County TB Elimination Initiative transitioned all clinician partner meetings to virtual
 - Increased participation, no commuting time / energy
 - Allows participation from attendees outside of San Diego County
 - Meetings remain virtual

WORKFORCE: TELEWORK



- Pre-pandemic: 0% telework
- Height of pandemic: ~75% of branch employees worked remotely
- Current: ~30-40% telework

- Has positive benefit on workforce satisfaction
- Beneficial environmental impact
- Balancing with operational considerations, collaboration and engagement

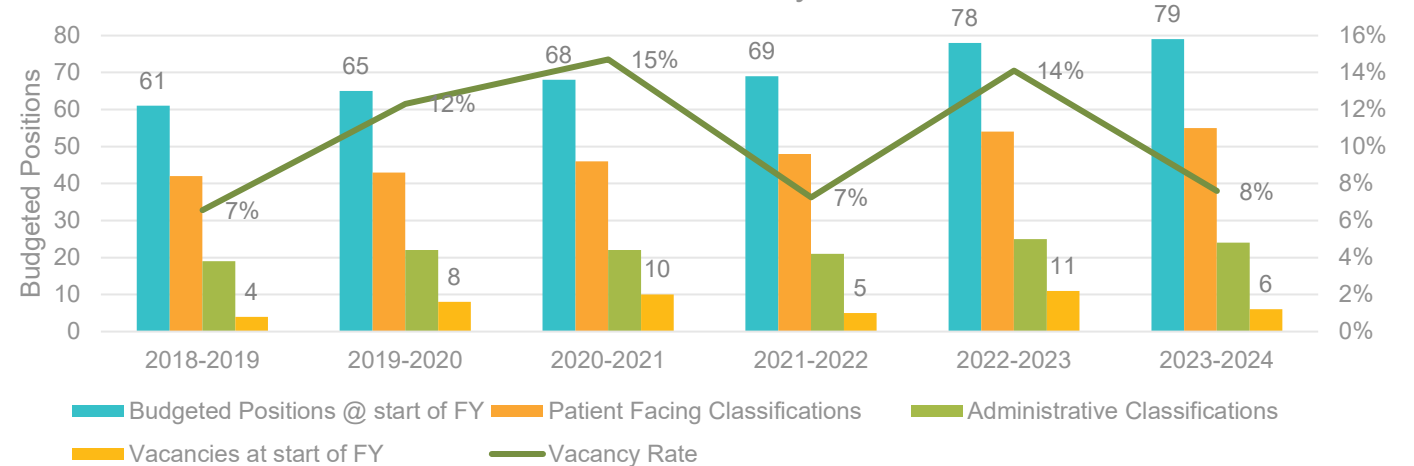
WORKFORCE: CHALLENGES



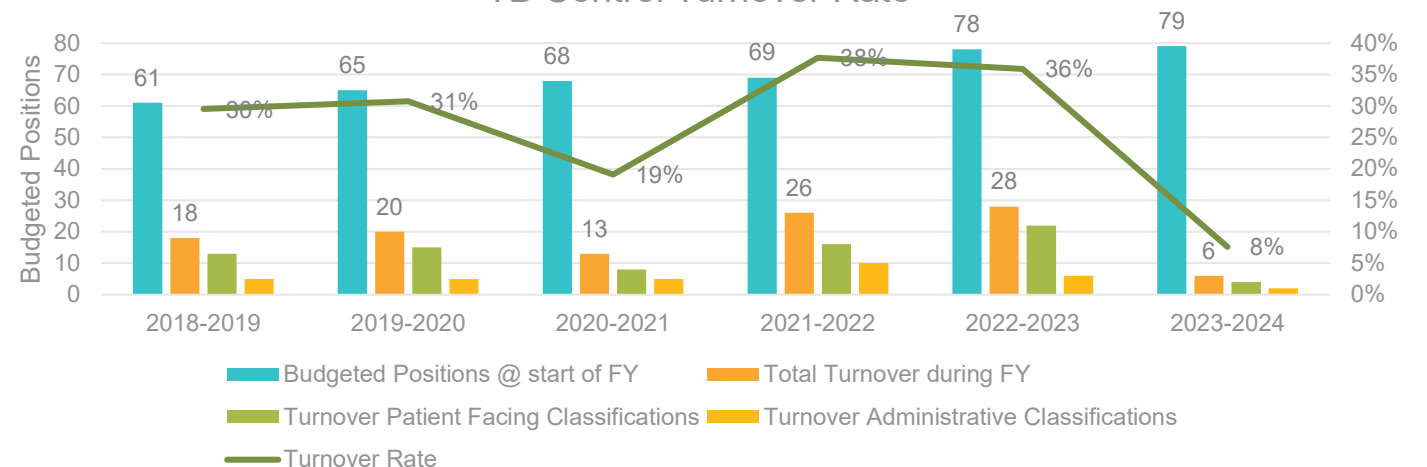
Turnover

- Very little turnover during early phases of pandemic
- A lot of movement in 2021-2022
- Type of turnover highly variable, occurred in both patient-facing and administrative positions
- Seems to be improving?

TB Control Vacancy Rate



TB Control Turnover Rate

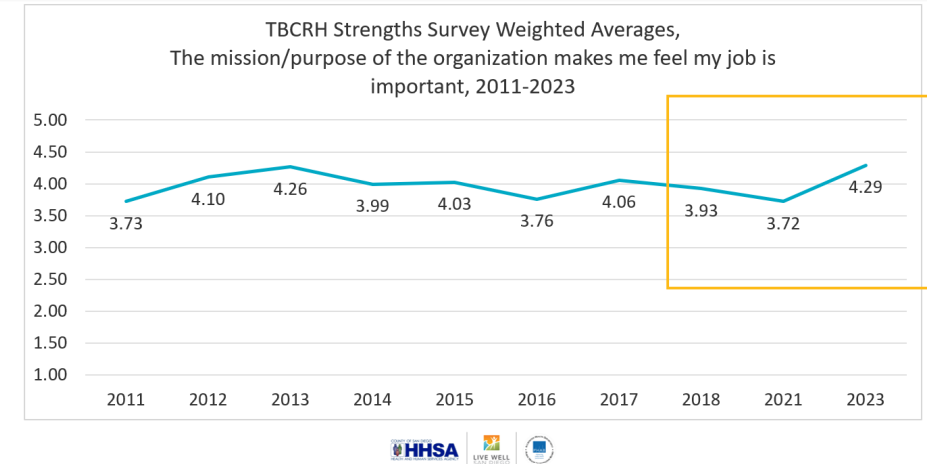


WORKFORCE: CHALLENGES & SUCCESSES

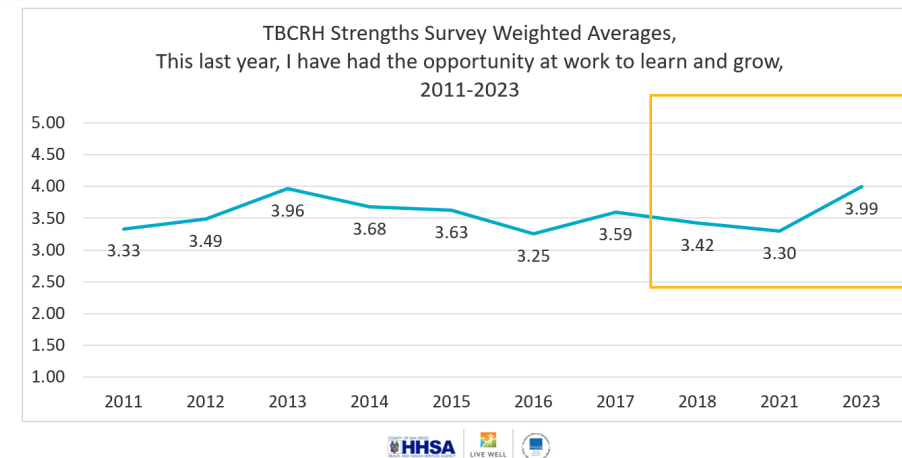


- Mental Health, Burnout
 - Turnover increased during pandemic, for myriad reasons
 - Employee Assistance Program provided on-site counselor starting in March 2021 to be able to quickly meet employee needs
 - Reduced frequency of all-staff meeting from twice a month to once a month, and used recovered time for team-building opportunities within and across units
 - Burnout recognition and prevention trainings, most recently June 2023
- Satisfaction!

The mission/purpose of the organization makes me feel my job is important.



This last year, I have had the opportunity at work to learn and grow.



SUMMARY



- New opportunities in telehealth
- New strategies for outreach, education, and community and provider engagement
- New creativity around telework
- Pandemic contributed to turnover, compounding stress of pandemic, but also opportunities for promotion and growth for many employees
- Lingering workforce challenges from stresses of pandemic, but big opportunities to emphasize the value of public health and the satisfaction of work in TB

THANK YOU



DISCUSSION AND QUESTIONS



The Public Health Services department, County of San Diego Health and Human Services Agency, has maintained national public health accreditation, since May 17, 2016, and re-accredited by the Public Health Accreditation Board on August 21, 2023.