

## EXECUTIVE SUMMARY

### DEVELOPING THE STRATEGIC PLAN

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**T**HE WORLDWIDE TUBERCULOSIS (TB) epidemic is a major global health crisis. In the United States, the problem is less severe, but the resurgence of TB between the mid-1980s and the early 1990s demonstrated that the U.S. continues to be vulnerable. It also underscored the importance of maintaining vigilance against TB, especially at a time when there is strong competition for diminishing healthcare resources. Yet many healthcare and social service providers working with individuals who have or are at risk for TB know little about this disease. This makes comprehensive TB training and education an essential strategy to help combat TB.

A broadly based group of TB experts has collaborated to develop the *National Strategic Plan for Tuberculosis Training and Education*. The Strategic Plan provides a blueprint for building a strong, coordinated, and systematic approach to TB training and education. The original Strategic Plan was produced to guide the development of TB training and education for the period 1999–2003. In 2003, the planners revisited the Strategic Plan to assess its achievements, identify new and ongoing

challenges, and formulate strategies to carry the plan forward for the next five years. This document presents the updated and renewed Strategic Plan for 2004–2008.

**The Purpose of the Strategic Plan.** The Strategic Plan was created because its developers recognized that TB training and education programs are fundamentally important if TB is to be controlled and eliminated. Yet efforts in this area have often been fragmented, while resources to support or expand them are limited and likely to decline. The Strategic Plan is intended to encourage a comprehensive, coordinated, and sustained TB training and education effort that is targeted to the specific needs of various providers and communities. Its audience includes agencies and organizations that are involved in TB training and education for providers in the public and private sectors, with the term “providers” used in its broadest sense. The aim of the Strategic Plan is to engage the commitment, cooperation, and collaboration of local, state, national, and international stakeholders.

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**The Initial Planning Process.** The original Strategic Plan was the result of a year-long, broadly inclusive collaboration by institutions, agencies, and individuals representing the full spectrum of TB care, control, and prevention efforts. The three Model Tuberculosis Centers—Francis J. Curry National Tuberculosis Center (CNTC), Charles P. Felton National Tuberculosis Center at Harlem Hospital, and New Jersey Medical School National Tuberculosis Center—working in conjunction with the Division of Tuberculosis Elimination of the Centers for Disease Control and Prevention (CDC), coordinated the planning process. Through the CNTC, the CDC funded a secretariat to provide the administrative and logistic support necessary for a voluntary planning effort. A Steering Committee conducted a needs assessment and guided the planning process with consultation from an Advisory Committee of national TB experts.

Six workgroups developed position papers that contain background information on topics or populations central to TB training and education: 1) private-sector providers; 2) public health sector providers; 3) correctional and other detention facilities; 4) providers serving high-risk populations (the homeless, substance abusers, HIV-infected individuals; 5) international medical graduates and providers serving foreign-born patients; and 6) international liaison. Based on their findings, the workgroups recommended goals and strategic objectives to be considered for inclusion in the Strategic Plan.

The framework for the Strategic Plan was established during a Strategic Planning Summit held in Oakland, California, in October 1998. The participants established the mission and goals, and identified the first set of strategic objectives. The Strategic Plan was published in January 1999. A tribute to its value came from the Institute of Medicine (IOM); in its 2000 report, *Ending Neglect: The Elimination of Tuberculosis in the United States*, the IOM recommended full funding for the Strategic Plan.<sup>1</sup>

**Renewing the Strategic Plan for the Next Five Years.** In October 2002, the planners met to reaffirm their commitment to the Strategic Plan and lay the groundwork for a process to renew it for another five years. There was a strong consensus that the Strategic Plan is still needed, and that steps should be taken to ensure a systematized and sustainable planning and implementation process.

The Strategic Plan for the new five-year cycle incorporates the best thinking of more than 50 TB experts from around the country. The CDC again funded a secretariat to provide logistical and administrative support for the planning process. The six workgroups were reconvened to update the position papers and recommend new strategic objectives. Planners conducted a national survey in 2003 to assess current TB training and education trends and needs. Another assessment tool was the *TB Education and Training Resource Guide*, which evolved from an earlier inventory

maintained by the CDC and the one compiled as part of the original Strategic Plan.

The collaborative effort of the planners is intended to carry the Strategic Plan forward and ensure that TB training and education will

continue to be a high priority for policy makers, funders, educators, and service-delivery programs that have a stake in the elimination and control of TB.

## **TB TRAINING AND EDUCATION: CHALLENGES, ACCOMPLISHMENTS, AND ISSUES**

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**A**FTER RISING FOR SEVERAL YEARS, THE U.S. case rate for TB peaked in 1992 and has declined every year since. Despite this, TB remains a serious public health concern. Sustained efforts and resources are needed to ensure that the progress made in the 1990s will continue.

**Challenges in Combating TB.** Those individuals and organizations that are concerned with controlling and eliminating TB face formidable challenges that they must consider when developing strategies for TB training and education. These include the global nature of the epidemic; the variability of incidence from community to community; the increasing proportion of TB cases among foreign-born or disadvantaged populations; the growing importance of culturally competent approaches to TB outreach, screening, and treatment; and changes in the healthcare infrastructure.

**Key Results of the Strategic Plan to Date.** The Strategic Plan has had significant positive impacts on TB training and education. It has increased awareness of issues, needs,

and possible solutions, and has created a synergy among groups concerned with TB training and education. This has led to new partnerships being forged, pilot projects and initiatives being launched, and innovative programs, materials, and tools being developed and made more widely available.

Among the notable projects that have arisen to fulfill the needs described in the original Strategic Plan, four will be key in planning the future of TB training and education. The first project is the development of the *TB Education and Training Resource Website*, a searchable online database of materials and resources for TB education, training, and public awareness. The CDC regularly updates the *Resource Website* and intends that it be the most robust and comprehensive catalogue available for such materials. The second project is the TB Education and Training Network (TB ETN), a networking initiative that CDC instituted to facilitate communication and collaboration among TB professionals. The third is TB Educate, an electronic listserv where

subscribers can exchange information about TB education and training issues. The fourth is this Strategic Plan itself, which defines mutual goals and strategic objectives. (For more information, see Attachment C.)

**TB Training and Education Issues.**

Planners considered a number of key challenges and issues in crafting strategic objectives for 2004–2008. While the Strategic Plan has had positive impacts in many of these areas, it is important to move forward to address the continuing concerns:

▶ ***Recognition of the need for training.***

Persons and organizations for which TB control is not a primary mission do not always view TB training and education as important. However, healthcare and other professionals, especially those working in high-incidence areas or with high-risk patient populations, need appropriate TB-related knowledge and skills. Advocacy efforts are needed to maintain TB training and education as a priority.

▶ ***Collaboration, coordination, and communication.*** Collaborative partnerships should be further encouraged among agencies and organizations that provide TB education and training, as such alliances enable groups to optimize resources and increase their reach.

▶ ***Targeted training.*** Curricula and training materials should be focused and targeted very specifically to the needs and roles of the particular audience receiving the training.

▶ ***Core competencies and training standards.*** Core competencies should be defined for particular job categories to ensure that training recipients will acquire an appropriate level of knowledge about TB. Both the content of the training and the quality of the delivery should meet suitable standards.

▶ ***Education and training of students of medicine, nursing, and allied health professions.*** Schools preparing students for healthcare careers should be encouraged to integrate scientific, clinical, and public health elements of TB into their curricula. This will elevate the status of TB in professional education and create intellectual interest in TB among students.

▶ ***Involvement of providers in related areas.*** It is important to train providers in non-TB specialty areas who work with populations at high risk for TB infection and disease, such as substance abusers, individuals with HIV/AIDS, homeless persons, and foreign-born individuals.

▶ ***Cultural competency.*** TB training and education programs need to be culturally and linguistically appropriate if providers are to interact effectively with members of many of the groups at high risk for TB.

▶ ***Training materials and resources.*** Excellent TB training and education resources exist. While there are gaps, awareness and accessibility are greater issues than supply. The CDC’s *TB Education and Training Resource Website* and other mechanisms that facilitate development, sharing, and use of

information and materials should be sustained and promoted.

► ***Training methods and technologies.***

New technologies, including the Internet, are creating unprecedented opportunities for distance learning, innovative training techniques, and the exchange of information and resources. While capitalizing on these potentials, training developers should design flexible computer-based training programs to account for differences in jurisdictions' needs and individuals' learning styles.

► ***Need for ongoing effort.*** Effective TB training and education is not a one-shot effort, but must be a continuing enterprise. For organizations, personnel turnover creates

ongoing training needs, while individuals need regular updating of information and enhancement of skills.

► ***Need for funding.*** Jurisdictions and organizations frequently lack the resources to provide adequate training. There is a critical need to develop stable funding sources to ensure sufficient resources for developing, distributing, and providing access to training programs and resources.

► ***International cooperation.*** The U.S. should build and sustain collaborative efforts with global partners and take an active role in international TB training and education activities.

## OVERVIEW OF THE MISSION, GOALS, AND STRATEGIC OBJECTIVES

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**T**HE MISSION STATEMENT AND FIVE-YEAR goals are presented on the first page of this document and discussed in detail in Section III. The planners for 2004–2008 reaffirmed the mission and goals of the original Strategic Plan.

The mission statement provides a succinct declaration of the Strategic Plan's purpose—the reason why it was developed and its intended result. “Promotes” and “guides” are the key words. The goals are broad statements of intent that define what accomplishments are necessary to carry out the

mission. The Strategic Plan calls for a nationwide endeavor to:

- Expand current efforts through greater collaboration and coordination among agencies and organizations involved in TB training and education
- Advocate for the widespread distribution of training resources, extending their reach to all individuals who have direct or indirect responsibilities for, or opportunities to contribute to, TB care, treatment, and control

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- Promulgate efforts by agencies and organizations to set appropriate standards for TB training and education efforts, assess training needs and accomplishments, and achieve the levels of knowledge, skills, and practice needed to control and eliminate TB
  - Encourage the continuing development of curricular, informational, and financial resources for TB training and education
4. Cultural competency
  5. Materials for TB training and education
  6. TB-dedicated networks for training and education staff
  7. Full funding and implementation of the Strategic Plan
  8. Coordinated U.S.-based efforts for international TB training and education.

The strategic objectives are specific steps to take toward the accomplishment of the Strategic Plan's goals. The planners have selected these objectives as reasonable and feasible priorities for the next five years. The objectives offer strategies for achieving progress in eight broad areas:

1. TB education for students
2. TB core competencies
3. TB training opportunities

The strategic objectives are presented in detail in the table that begins on page 43. By intention, the descriptions of the strategic objectives do not specify who will do what. Instead, they describe a desired outcome and identify the types of organizations that need to be engaged if the strategic objective is to be achieved. We urge all organizations involved in TB training and education to make a commitment and take action that will lead to the achievement of the Strategic Plan's strategic objectives and goals.