

The public reporting burden of this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to all collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATTN: PRA (0920-0879).

2024 Tuberculosis (TB) Training and Education Needs Assessment of the U.S.-affiliated Pacific Islands

Overview

The Centers for Disease Control and Prevention's Division of Tuberculosis Elimination (DTBE) is conducting a training and education needs assessment of the U.S.-affiliated Pacific Islands. Results from the needs assessment will be used to develop a plan to address TB training and education needs in the region.

A summary of the needs assessment findings will be shared with DTBE, as well as the TB program staff of the U.S.-affiliated Pacific Island jurisdictions. Findings may also be presented at TB conferences.

Participation and Confidentiality

Please complete this questionnaire based on your own TB training and education needs. The assessment will take approximately 25 minutes to complete. We encourage you to share this survey with your partners in TB prevention. Participation in the needs assessment is voluntary. Please keep in mind that your answers will remain secure. We will only share data in aggregate form.

The online needs assessment will be open until **[INSERT MONTH, DATE, 2024]**.

Additional Information

If you have any questions about the TB training and education needs assessment, please contact Carissa Bisnath (ldo7@cdc.gov) or Derrick Felix (dnf2@cdc.gov).

1. Do you agree to participate in this needs assessment?

- Yes
- No

2. Please select the jurisdiction in which you primarily work.

- American Samoa
- Commonwealth of the Northern Mariana Islands
- Chuuk State, Federated States of Micronesia
- Kosrae State, Federated States of Micronesia
- Pohnpei State, Federated States of Micronesia
- Yap State, Federated States of Micronesia
- Guam
- Ebeye, Republic of the Marshall Islands
- Majuro, Republic of the Marshall Islands
- Republic of Palau
- None of the above

3. Which of the following most closely describes your professional training? *Select only one.*

- Disease intervention specialist
- Epidemiologist
- Health educator
- Laboratorian
- Medical assistant
- Nurse (registered or practical nurse)
- Nurse practitioner
- Outreach worker
- Physician
- Physician assistant
- Surveillance / Data encoder
- Other, please specify_____

4. Which of the following most closely describes your job role/responsibilities? *Select only one.*

- Disease intervention specialist
- Epidemiologist
- Health educator
- Laboratorian
- Medical assistant
- Nurse (registered or practical nurse)
- Nurse practitioner
- Outreach worker
- Physician
- Physician assistant
- Program manager
- Surveillance / Data encoder
- Other, please specify_____

5. Which of the following most closely describes your primary work setting? *Select only one.*

- Community health center
- Health department
- Hospital
- Laboratory
- Private clinic
- Other, please specify_____

6. What percentage of your time is spent working on TB-related activities?

- 10% or less
- 11 - 25%
- 26 - 50%
- 51 - 75%
- 76 - 100%

7. How many years of experience do you have working in TB or with persons at risk for TB?

- Less than 1 year
- 1 - 5 years
- 6 - 10 years
- More than 11 years

8. Are you involved with clinically diagnosing persons with latent TB infection and TB disease?

- Yes
- No

The following questions relate to your own TB training and education needs. The topics are listed in alphabetical order and do not reflect order of importance.

9. Please indicate how much training you need regarding the following TB diagnostic strategies. NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.

	Not needed	Needed	Highly needed	N/A
Effect of BCG vaccine on TST and IGRA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of acid-fast bacilli (AFB) smear microscopy results	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of culture results	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of drug susceptibility testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of interferon-gamma release assays (IGRAs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of molecular detection of drug resistance (MDDR)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of radiologic tests (i.e. chest X-ray, CT scans, or MRI)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of tuberculin skin test (TST) (e.g. including placing and reading, measuring and interpretation of reactions, false-positive reactions, false-negative reactions, boosted reactions, and two-step testing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sputum collection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation and use of Xpert MTB/RIF assay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nucleic acid amplification (NAAT) tests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Please indicate how much training you need regarding the following TB diagnosis topics. NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.

	Not	Needed	Highly Needed	N/A
--	-----	--------	---------------	-----

	needed			
Diagnosing extrapulmonary TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing latent TB infection (LTBI)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing multidrug-resistant (MDR) TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing TB in children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing TB in contacts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnosing TB in pregnant women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Do you treat or clinically manage patients who have latent TB infection or TB disease?

- Yes
- No

12. Please indicate how much training you need regarding the following TB treatment topics. NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.

	Not needed	Needed	Highly needed	N/A
Adverse reactions to TB treatment drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Directly observed therapy (DOT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug-drug interactions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating extrapulmonary TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating latent TB infection (LTBI)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating multidrug-resistant (MDR) TB contacts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating multidrug-resistant (MDR) TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating TB disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating TB in children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating TB in contacts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treating TB in pregnant women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Video directly observed therapy (vDOT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Please indicate the training topics that are needed to enhance your skills about clinical management of TB patients with co-morbidities. NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.

	Not needed	Needed	Highly needed	N/A
TB and diabetes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and cancer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and HIV infection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and immunosuppressive therapies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TB and kidney disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and liver disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and mental illness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and renal failure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and solid organ transplant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and substance use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and viral hepatitis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (please specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Do you perform programmatic activities as part of your TB-related job duties?

- Yes
- No

15. Please indicate how much training you need regarding the following TB program activities in a public health setting. NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.

	Not needed	Needed	Highly needed	N/A
Communication skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community education and engagement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developing Annual Performance Reports, Interim Performance Reports, and Work Plans for the CDC Cooperative Agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developing budgets for the CDC Cooperative Agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effectively using incentives and enablers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effectively using interpreters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal issues related to TB (e.g., court orders)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outbreak detection and response	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnership building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partnership planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient health education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program evaluation for TB activities (including National TB Indicators Project - NTIP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screening high-risk populations (i.e., targeted testing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB and air travel restrictions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB genotyping, whole genome sequencing, and interpretation of phylogenetic trees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with diverse patient populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with private providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Do you perform case management or contact investigation activities as part of your TB related job duties?

- Yes
- No

17. Please indicate how much training you need regarding the following TB case management and contact investigation topics. *NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.*

	Not needed	Needed	Highly needed	N/A
Case review (i.e., a monthly “real-time” systematic review of the management and treatment of persons with suspected or confirmed TB disease and their contacts. Many of the patients are currently receiving treatment.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cohort review (i.e., a quarterly “retrospective” systematic review of the management, treatment, and outcomes of persons with suspected or confirmed TB disease and their contacts. Many of the patients have completed treatment.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conducting contact investigations (i.e. prioritizing contacts)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contact investigations skills in congregate settings (for example, school, workplace, jail, hospital, and shelters)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interviewing for contact investigations skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interjurisdictional referrals (i.e., for TB patients or contacts who move to the U.S. mainland or within the USAPI)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
International transfer notifications (i.e., for TB patients or contacts who move to other countries)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Do you perform infection control activities as part of your TB related job duties?

- Yes
- No

19. Please indicate how much training you need regarding the following TB infection control topics. *NOTE: If you do not perform the activity, or you do not need to know the information as part of your work duties, please select N/A.*

	Not needed	Needed	Highly needed	N/A
TB infection control measures (i.e., administrative measures, environmental controls, and use of respiratory protective equipment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB risk assessments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB testing programs (e.g., health care worker screening programs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TB transmission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Two-step testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use of nucleic acid amplification (NAAT) tests to guide decisions for airborne infection isolation in health care facilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with infection control practitioners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. Considering your TB-related work responsibilities, which TB topics are most needed to enhance your knowledge and skills? *Select top 3 topics.*

- TB diagnostic strategies
- TB case management
- TB co-morbidities
- TB contact investigation
- TB program activities
- TB infection control
- TB treatment
- Other, please specify _____

21. How many online TB trainings or courses have you taken in the past 12 months?

- 0 (none)
- 1 - 3
- 4 - 6
- More than 7

22. How many in-person TB trainings or courses have you attended in the past 12 months?

- 0 (none)
- 1 - 3
- 4 - 6
- More than 7

23. How many live online TB webinars or web conferences have you attended in the past 12 months?

- 0 (none)
- 1 - 3
- 4 - 6
- More than 7

24. How many recorded online TB webinars or web conferences have you attended in the past 12 months?

- 0 (none)
- 1 - 3
- 4 - 6
- More than 7

25. What barriers to participating in online modes of TB education and training events have you experienced?

Select all that apply.

- Accessibility needs unmet
- Budget/limited funding available
- Cannot take time away from work responsibilities to participate
- Difference in time zone

- Lack of internet access or internet connection problems
- Not able to download software needed to access webinars or web conferences
- Not enough staff coverage
- Online TB training and education events
- Too many distractions in the workplace
- Webinars or web conferences are too long
- None/No barriers
- Other, please specify_____

26. What barriers to participating in in-person modes of TB education and training events have you experienced? *Select all that apply.*

- Accessibility needs unmet
- Budget/limited funding available
- Cannot take time away from work responsibilities to participate
- Event too far away
- In-person TB training and education events are not available
- Not enough staff coverage
- Travel restrictions not related to funding
- None/No barriers
- Other, please specify_____

27. Identify any incentives that encourage you to attend TB trainings (in-person and online). *Select all that apply.*

- Certification
- Continuing education credits (i.e., CME, CNE, CHES, MOC)
- Opportunity to network and interact with colleagues
- Professional development
- None
- Other, please specify _____

28. Which of the following are your most preferred formats for TB trainings? *Select top 3.*

- In person conference
- In person classroom training/workshop
- Interactive online course
- Live webinar
- Mentorship from a TB expert
- Microlearning videos (i.e., short, focused video clips rather than full didactic training)
- One-on-one trainings
- Peer education training
- Recorded webinar
- Self-study materials (online or print based)
- Train-the-trainer (ToT) training
- Virtual conference
- Other, please specify_____

29. Which of the following are your most preferred formats for TB educational materials for professional development? *Select top 3.*

- Brochures/pamphlets
- Conversation guides

- DVDs
- e-Newsletters
- Fact sheets
- Interactive online training
- Mobile apps (applications for mobile devices including tablets, Android, iPhone)
- Online videos
- Pocket cards
- Podcasts
- Printed materials
- Self-study materials (i.e., manuals or books)
- Slide decks
- USB flash drive/thumb drive
- Other, please specify_____

30. Which of the following are your most preferred formats for TB educational materials for delivering patient education? *Select top 3.*

- Brochures/pamphlets
- DVDs
- Fact sheets
- Flip books
- Online educational resources
- Online videos
- Pocket cards
- Posters
- Printed educational resources
- Other, please specify _____

31. Please provide any additional comments you have regarding your TB training and education needs.