

Interviewing for TB Contact Investigation

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Learning Objectives

After this session, participants will be able to:

1. Describe the objectives of the initial case interview
2. List the steps of the interview format
3. Describe ways to confront and solve problems that may arise during the interview

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Difference Between STD Interview and TB Interview

STD Interview

- Usually only 1 interview conducted
- Rapport building not so much a priority
- Only have to ask about one specific type of contact (sexual) so much less people you will need to follow up with
- Transmission period specific

TB Interview

- Multiple interviews required
- Building rapport is key since you need to ensure patient returns to clinic...and you will have multiple opportunities to re-interview
- Have to ask about multiple types of contacts (e.g., all sex partners, family, friends, co-workers, classmates)
- Transmission period may be vague, and for a long period of time

What is the Main Goal of a TB Interview?

The main goal of a TB interview is to identify contacts.

Why?



So you can assess them for TB disease and infection and get them on appropriate treatment.

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When Should the TB Interview Be Conducted?

- Initial interview should be conducted
 - Within 1 business day of reporting for infectious cases
 - Within 3 business days for others
- Second interview (re-interview) should be conducted 1 to 2 weeks later
- Additional interviews may be needed to gather more information and to build trust

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Where Should the Interview Take Place?

- Interview should be conducted in person
 - Hospital
 - TB clinic
 - Case's home or living space
 - Other location convenient for the case
- At least one interview should be conducted in the case's home or living space



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What are the Objectives of the Initial Interview?

- Establish rapport
- Educate the case about TB and the CI process
- Verify and expand on information collected in the pre-interview phase
- Identify
 - Places **WHERE** they spent time
 - Persons with **WHOM** they spent time
 - Participation in activities and events (**WHAT** and **WHEN**)

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What are the Objectives of the Re-Interview?

- Identify gaps in information
- Identify additional contacts
- Review/refine the infectious period
- Continue to build trust and rapport



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Effective Interviewer Musts

- Build rapport
- Maintain confidentiality
- Arrange for privacy
- Listen actively
- Be objective and nonjudgmental
- Be creative
- Develop a style that works for you

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The TB Interview: Video



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Interview Format

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Interview Format

1. Introduction
2. Education
3. Information collection and confirmation
4. Contact identification
5. Conclusion of the interview

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TB Interview Checklist

TB Contact Investigation Interview Checklist	
On-Patient Activities	2. Contact Identification
1. Review patient chart	1. Review patient chart
2. Review patient history	2. Review patient history
3. Review patient medications	3. Review patient medications
4. Review patient symptoms	4. Review patient symptoms
5. Review patient test results	5. Review patient test results
6. Review patient contacts	6. Review patient contacts
7. Review patient social history	7. Review patient social history
8. Review patient travel history	8. Review patient travel history
9. Review patient employment history	9. Review patient employment history
10. Review patient education history	10. Review patient education history
11. Review patient family history	11. Review patient family history
12. Review patient legal history	12. Review patient legal history
13. Review patient insurance history	13. Review patient insurance history
14. Review patient financial history	14. Review patient financial history
15. Review patient criminal history	15. Review patient criminal history
16. Review patient military history	16. Review patient military history
17. Review patient volunteer history	17. Review patient volunteer history
18. Review patient religious history	18. Review patient religious history
19. Review patient sexual history	19. Review patient sexual history
20. Review patient substance use history	20. Review patient substance use history
21. Review patient mental health history	21. Review patient mental health history
22. Review patient chronic conditions	22. Review patient chronic conditions
23. Review patient acute conditions	23. Review patient acute conditions
24. Review patient surgical history	24. Review patient surgical history
25. Review patient anesthesia history	25. Review patient anesthesia history
26. Review patient transfusion history	26. Review patient transfusion history
27. Review patient organ donation history	27. Review patient organ donation history
28. Review patient vaccination history	28. Review patient vaccination history
29. Review patient immunization history	29. Review patient immunization history
30. Review patient allergy history	30. Review patient allergy history
31. Review patient blood product history	31. Review patient blood product history
32. Review patient radiation history	32. Review patient radiation history
33. Review patient chemotherapy history	33. Review patient chemotherapy history
34. Review patient hormone therapy history	34. Review patient hormone therapy history
35. Review patient biologics history	35. Review patient biologics history
36. Review patient off-label drug history	36. Review patient off-label drug history
37. Review patient off-label device history	37. Review patient off-label device history
38. Review patient off-label food history	38. Review patient off-label food history
39. Review patient off-label cosmetic history	39. Review patient off-label cosmetic history
40. Review patient off-label medical device history	40. Review patient off-label medical device history
41. Review patient off-label medical device component history	41. Review patient off-label medical device component history
42. Review patient off-label medical device accessory history	42. Review patient off-label medical device accessory history
43. Review patient off-label medical device part history	43. Review patient off-label medical device part history
44. Review patient off-label medical device subassembly history	44. Review patient off-label medical device subassembly history
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Refer to Appendix O

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Interview Format

Introduction

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Interview Introduction (1)

- The first interaction with the case can influence the remainder of the interview
- Building trust and rapport early in the interview process is essential



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Interview Introduction (2)

- Introduce yourself and shake hands if appropriate
- Provide a business card or other identification
- Explain your role in the TB program
- Ask the case how they are feeling
- Demonstrate respect towards the case



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Explain the Purpose of the Interview

Explain the purpose of the interview to the case

- To identify contacts at risk of infection and refer them for medical assessment
- To provide TB education

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Discuss Confidentiality

- Explain that information will only be shared with persons who need to know
 - Health care providers who provide direct care
 - Public health authorities for the purpose of TB control
- Stress that confidentiality is reinforced by local program policies and state regulations

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Interview Format

Education

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Importance of Education

- Increases knowledge of TB
- Influences desired behavior
 - Identification of contacts
 - Treatment adherence
 - Infection control activities
- Helps the case make informed decisions



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What Education Should be Provided to the Case?

The case should be educated about the following:

1. Components of treatment and care plan
2. Infection control measures
3. Importance of maintaining medical care
4. Importance of the contact investigation

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1. Treatment and Care Plan

- Explain that medications kill TB germs when taken properly
- Stress the importance of treatment adherence and follow-up medical care
- Establish a specific schedule for treatment



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2. Infection Control Measures

- Review the importance of the case using a mask or tissue to cover cough
- In some situations, the interviewer may need to wear a respirator to protect themselves from inhaling TB germs/bacteria
- Discuss the importance of ventilation
- Describe other topics as appropriate
 - Home isolation
 - Visitors to the home
 - Return to work or school



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3. Importance of Maintaining Medical Care

Discuss the importance of:

- Adhering to all medical appointments and directly observed therapy (DOT)
- Sputum collection, chest x-rays, and medical evaluations



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4. Importance of Contact Investigation

- Stress the importance and urgency of identification of all contacts
- Emphasize the role of the case in helping to protect family and friends from TB

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What is Effective Education?

- Listening carefully
- Asking questions
- Understanding the case's needs and concerns
- Demonstrating a caring attitude
- Helping to solve problems
- Clarifying misinformation

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Tips for Providing Effective Education (1)

Use visuals

- Visuals can complement verbal and written information
 - Pictures
 - Calendars
 - Flipbooks
- Real-life examples
 - Pills



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Tips for Providing Effective Education (2)

Use culturally appropriate materials



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Tips for Providing Effective Education (3)

- Speak clearly and simply
- Use simple non-medical terms
- Use familiar words the case will understand
 - Simple: "These pills will help you get better"
 - vs.
 - Complex: "This drug, isoniazid, is a bactericidal agent that is highly active against *Mycobacterium tuberculosis*."

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Medical Terminology Exercise

Appendix P

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The TB Interview: Video



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Interview Format

Information Collection and Confirmation

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Information Collection and Confirmation

During the interview, information previously collected during the pre-interview phase should be reviewed and confirmed

- Personal information
- Medical information
- Infectious period

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Confirm Personal Information

- Full name, aliases, and nicknames
- Date of birth
- Place of birth
- If born in another country, date arrived in United States
- Current address
- Telephone number
- Next of kin
- Emergency contact information
- Physical description
- Other locating information



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Confirm Medical Information (1)

Obtain and/or confirm:

- Known exposure to TB (who, where, when)
- Recent hospitalization for TB (name of hospital, admission date, discharge date)
- Other medical conditions
- HIV status
- Substance use (frequency, type, how long)
- Medical provider for TB (private or public clinic, name, telephone number, address)
- DOT plan (where, when, by whom)
- Any barriers to adherence

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Confirm Medical Information (2)

Review the following symptoms, including onset dates and duration:

- Cough
- Coughing up blood
- Hoarseness
- Unexplained weight loss
- Night sweats
- Chest pain
- Loss of appetite
- Fever
- Chills
- Fatigue



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Confirm Medical Information (3)

Discuss the case's current diagnosis

- TST or IGRA results
- Site of disease
- Symptom history
- Radiographic and bacteriologic results



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Review the Infectious Period

- Refine the previously established infectious period based on a medical record review
- Review the significance of the infectious period with the case and discuss its role in the contact identification

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Interview Process

Contact Identification

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Contact Identification (1)

- Contact identification is the most important part of the initial interview with the case
- Get as much information as possible about contacts from the case during the interview
 - Talk to the case as if it is the last time you will see them

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Contact Identification (2)

To help identify contacts, interviewers should collect and confirm information regarding:

- Places WHERE they spent time
- Persons with WHOM they spent time
- Participation in activities and events (*WHAT* and *WHEN*)

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Identify Places WHERE Case Spent Time (1)

Ask the case where they spent time during the infectious period

- Residence
- Work, school, or volunteer sites
- Social, leisure, religious, or recreation sites
- Sites where illicit activities might have occurred
- Homeless shelters or jails



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Identify Places WHERE the Case Spent Time (2)

After getting the list of places, ask the case about

- Amount of time spent at each
- Environmental characteristics
 - Number of rooms
 - Room size/square footage
 - Crowding
 - Ventilation
 - Windows open or closed
 - HVAC systems



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Identify Places WHERE the Case Spent Time (3) - Residence

- Residence can include:

- House
- Apartment
- Congregate settings
 - Nursing home
 - Assisted living facilities
 - Dormitory
 - Correctional facility
 - Shelters



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Identify Places WHERE the Case Spent Time (4) - School

If attending school, collect information regarding:

- Name of school, address, telephone number
- Grade in school
- Hours per day/week
- Transportation type to and from school, length of commute



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Identify Places WHERE the Case Spent Time (5) - Workplace

- If employed, collect information regarding:

- Employer name, address, telephone number
 - Full or part-time, hours worked per day/week
 - How long employed
 - Transportation type to and from work, length of commute
 - Occupation/type of work
 - Indoor or outdoor work space, enclosed or open work space
- If unemployed
 - Source of income

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Identify WHO the Case Spent Time With (1)

Ask the case who they spent time with during the infectious period, for example:

- Wife, husband, or partner
- Children
- Household members
- Other family members
- Friends
- Roommates
- Cellmates
- Coworkers



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Identify WHO the Case Spent Time With (2)

- Ask for names and aliases of contacts
- Ask if contacts
 - Have TB symptoms
 - Have weakened immune systems
 - Are children younger than 5 years of age



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Identify WHEN and WHAT Activities or Events the Case Participated In (1)

- Ask about activities during infectious period
 - Travel, vacations
 - Social events
 - Holidays
- Ask the case to review calendar or appointment book
- Review cell phone logs and social networking sites (e.g., Facebook)



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Identify WHEN and WHAT Activities or Events the Case Participated In (2)

- Examples of social/recreational places and activities
 - Hangouts, bars, clubs
 - Team sports
 - Community centers
 - Bands, choir
 - Places of worship
- Ask about the number of hours per day/week, and means of transportation



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What Information Should Be Collected About Contacts?

- Name/aliases/nicknames
- Relationship to the case
- Address, telephone number, and other locating information
- Hours of exposure per week and date of first and last exposure
- Setting in which exposure took place
- Age, sex, race, and physical description

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Process for Collecting Contact Information (1)

Contact and place information can be gathered using the following format:

1. Name	2. Relationship	3. Locating	4. Exposure Time	5. Setting Size	6. Description

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Process for Collecting Contact Information (2)

1. Name					

- Get a name and/or alias
- Ask the case to list as many contact names as possible before moving on

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Process for Collecting Contact Information (3)

1. Name	2. Relationship				

Ask the case what their relationship is to the contact

- Spouse
- Boyfriend/Girlfriend
- Child
- Friend
- Co-worker
- Classmate
- Roommate
- Teammate
- Any other "mate"

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Process for Collecting Contact Information (4)

1. Name	2. Relationship	3. Locating			

Collect information on how to get in touch with the contact:

- Address or map to home/living space
- Phone number
- Best time to contact
- Email address

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Process for Collecting Contact Information (5)

1. Name	2. Relationship	3. Locating	4. Exposure Time		

- Gather exposure information for each contact:
 - First and last time the case saw the contact
 - Frequency of interaction
- Use significant dates (birthdays, holidays, etc.) to jog case's memory

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Process for Collecting Contact Information (6)

1. Name	2. Relationship	3. Locating	4. Exposure Time	5. Setting Size	

Determine the size of the setting in which exposure took place:

- Size of a bedroom?
- Size of a car/van?
- Size of a house?

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Process for Collecting Contact Information (7)

1. Name	2. Relationship	3. Locating	4. Exposure Time	5. Setting Size	6. Description

Obtain a detailed physical description for each contact

- Age
- Hair color and length
- Height
- Weight
- Complexion
- Identifying features (e.g., tattoos, piercings)

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Contact Identification Exercise

Refer to Appendix Q



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Interview Process Conclusion of the Interview

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Conclusion of the Interview (1)

1. Answer the case's questions.
2. Review and reinforce all components of the adherence plan.
3. Evaluate the case's remaining needs or potential adherence problems.
4. Confirm the date of the next medical appointment, if known.

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Conclusion of the Interview (2)

5. Arrange for both a re-interview and home visit, if not already completed.
6. Confirm referral procedure of each contact.
7. Leave information on how the case can contact you.
8. If appropriate, shake the case's hand, express appreciation, and close the interview.

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Problem Solving During the Interview

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Potential Interview Problems

The case:

- Does not believe or trust the health care worker
- Will not talk
- Is distracted or not paying attention
- Is hostile, abusive, or aggressive

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Methods to Confront and Solve Problems

1. Provide Information
2. Direct Challenge
3. Self-Involvement
4. Withdrawal of Reinforcement

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1. Provide Information

Use a factual statement to challenge what a case has told you.

For example:

- If the case says: "I knew I shouldn't have shaken my neighbor's hand when he offered it."

How would you confront this statement by providing information?

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2. Direct Challenge

A direct challenge is confronting a statement that is false. Use when the case says something which can lead to greater problems if not addressed.

For example:

- A case denies any contact with children. However, there are toys in the front yard and a picture of the case and a baby hanging on the wall.

How would you directly challenge this statement?

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3. Self Involvement

Used to challenge information or commitments a case has made in interviewer's presence.

For example:

- A case states that they don't have a phone number for a contact. When looking through their cell phone address book, with permission, you notice a number for that contact.

How would you use self-involvement to address this statement?

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4. Withdrawal of Reinforcement

Designed to appeal to a case's need for positive reinforcement: the interviewer expresses disappointment with the case's present behavior and/or withdraws positive feedback previously given.

For example:

- "You know, I thought you acted responsibly by coming into the clinic so quickly; however, by saying that you don't care if your co-workers get examined for TB, that's demonstrating little concern for their health."

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If You Continue to Have Challenges...

- Recognize the need to stop and reschedule a stalled interview.
- Assign another team member to conduct the interview at a later time if you are unable to gather necessary information.

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The TB Interview: Video



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Review

1. What are the objectives of the initial case interview?
2. What are the steps of a TB interview?
3. What are some ways in which to confront and solve problems that may arise during the interview?

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