

The purpose of the *Forging Partnerships to Eliminate Tuberculosis Toolkit* is to make it easier for you to implement the tips and strategies provided in the *Forging Partnerships to Eliminate Tuberculosis* guide. The *Toolkit* contains checklists and worksheets designed to help you assess existing assets and barriers to effective partnering, and to use that information to develop and implement more effective TB prevention and control programs. In addition, the *Toolkit* contains sample materials that you can easily adapt for local use. The documents are available in the following formats:

Forging Partners Documents	Printed Manual	CD Rom	Web
Guide	1	PDF	PDF
Toolkit	1	PDF	PDF
		Fillable PDF Forms (of each tool)	—
		Word document (of each tool)	Word document (of each tool)

The guide and *Toolkit* are available on the internet at www.cdc.gov/tb/pubs/forge/ default.htm.

Toolkit Contents

То	ol	Purpose	For more information, see
1.	At-Risk Population Information Worksheet	To gather, organize, and store information that will help partners gain a deeper understanding of community leaders' perspectives on barriers to TB prevention and control. The tool also helps partners to identify community assets that could help to overcome these barriers.	Chapter 4, page 22
2.	Associations of Primary Care Providers and Professional	To organize and store information provided by individuals who provide primary care to at-risk populations and their professional associations. You can use this information to	Chapter 4, page 25
	Associations Worksheet	- Assess knowledge levels of TB risk factors and diagnosis and treatment protocols, as well as the cultural issues that impact TB prevention and control efforts.	
		- Identify and recruit new partners.	
		- Understand and address training needs.	
3.	Developing Linguistic Competence within Primary Health Care Organizations Checklist	To help primary health care organizations assess their linguistic competence. The checklist covers policies, structures, practices, and procedures.	Chapter 4, page 28
4.	Sample Partnership Description	To provide new or potential partners with consistent written background and contact information about your partnership. You can also include the description with press releases or other partnership correspondence.	Chapter 5, page 31
5.	Sample Letter to an At-Risk Community Leader	To introduce your partnership and its issues to leaders of local at-risk communities.	Chapter 5, page 37
6.	Partnership Skills and Abilities Inventory Checklist	To help the partnership identify the skills and abilities of current partners, as well as to develop a common understanding of skills and abilities gaps that need to be addressed.	Chapter 5, page 36
7.	Assessing Your Agency's Commitment Worksheet	To help you to accurately understand your agency's view of partnerships. The worksheet can also help you to identify and address concerns or limitations your agency has with its participation in partnership activities.	Chapter 5, page 34

То	bl	Purpose	For more information, see
8.	Planning with Partners: Moving from Goals to Effective Action Checklist	To help you focus on identifying the goals, strategies, objectives, projects, and activities most likely to accomplish the partnership's vision.	Chapter 6, page 48
9.	How to Write SMART Objectives Checklist	To help you write objectives that are the specific, measurable, attainable, realistic and time-framed (SMART) outcomes you are seeking.	Chapter 6, page 48
10.	Planning with Partners Worksheet	To guide partners through a cooperative planning process that produces realistic and appropriate objectives that partners are committed to achieving. In addition, worksheet information can help to clarify any additional skills, abilities, volunteers, or material resources the partnership may need to achieve its objectives.	Chapter 6, page 48
11.	Conducting a Press Conference Checklist	To help partners develop a common understanding of the steps involved with conducting a successful press conference, as well as the time and resources needed to complete these steps.	Chapter 9, page 70
12.	Single Overriding Communications Objective (SOCO) Worksheet and	To provide an example of how to develop key messages around a particular TB topic.	Chapter 9, page 70
13.	Sample Single Overriding Communications Objective (SOCO) Worksheet	To provide an example of how to develop key messages around a particular TB topic.	Chapter 9, page 70
14.	Sample TB Article for Use with a High-Risk Population	To show the type of article that a community leader might adapt and use to educate the local constituency about TB issues.	Chapter 9, page 72
15.	TB Outbreak Communication Needs Assessment Checklist	To help partners determine where they stand with respect to their partnership's preparedness to communicate about a TB outbreak or other TB- related crises to each other and the public.	Chapter 10, page 76
16.	Show Me the Money	To show how to use the CDC NPIN Website to locate funding opportunities.	Chapter 12, page 91

At-Risk Population Information

Worksheet

Population			
Contact Information			
Name		Organization	
Address		Phone	
		FAX	
		E-mail	
About the population			
Geographic distributio United States	n, common religions, langua	iges, employers, le	ength of time in the
what are your commu	nity's main health concerns?		
How does the population view TB?			
What do you see as the principle barriers to TB prevention and control?			

At-Risk Population Information

Worksheet (cont.)

About the community	structure
What are the principle organizations to which community members belong?	
Who are the main primary care providers for the population?	
How does the community share information (e.g., newsletters, community forums, and events)?	
About your organization	bn
The organization's age, mission, and primary activities	
The organization's structure, leaders, and decision making processes	

Associations of Primary Care Providers and Professional Associations

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Contact Information	on		
Name		Organization	
Address		Phone	
		FAX	
		E-mail	
		Website	
About your praction	ce and patients		
	our awareness of/ vith TB and at-risk populations?		
and cultural	tigmas, language, issues impacting serve your at-risk patients?		
	elp you to address as, language, and cultural issues?		
How do your at-	risk patients view TB?		
About your organ	ization	 	
What is its mis	ssion and primary activities?		
(How are decision	dership structure? ns made, are there rking groups, etc.)		

Associations of Primary Care Providers and Professional Associations

Worksheet (cont.)

About your meeting	ngs			
Type/purpose			Type/purpose	
Who attends			Who attends	
How often			How often	
Location			Location	
Time			Time	
Type/purpose			Type/purpose	
Who attends			Who attends	
How often			How often	
Location			Location	
Time			Time	
Communicating w	vith your organization's	s members		
Do you pub	lish a newsletter?			
Do you use any el (for example, e	ectronic channels -mail or website)?			

Developing Linguistic Competence within Primary Health Care Organizations

Checklist

Use this checklist to help primary health care organizations develop policies, structures, practices, and procedures that support linguistic competence.

Does the primary health care organization or program have:

- □ A mission statement that articulates its principles, rationale, and values for providing linguistically and culturally competent health care services?
- Policies and procedures that support staff recruitment, hiring, and retention to achieve the goal of a diverse and linguistically competent staff?
- Position description and personnel performance measures that include skill sets related to linguistic competence?
- Policies and resources to support ongoing professional development and in-service training (at all levels) related to linguistic competence?

The terms *interpretation* and *translation* are often used interchangeably. The National Center for Cultural Competence makes a distinction between the two terms and has provided the following definitions:

- Translation typically refers to the written conversion of written materials from one language to another.Interpretation is the oral restating in
- one language of what has been said in another language.
- Policies, procedures, and fiscal planning to ensure the provision of translation and interpretation services?
- Policies and procedures regarding the translation of patient consent forms, educational materials, and other information in formats that meet the literacy needs of patients?
- Policies and procedures to evaluate the quality and appropriateness of interpretation and translation services?
- Policies and procedures to periodically evaluate consumer and personnel satisfaction with interpretation and translation services that are provided?
- Policies and resources that support community outreach initiatives to persons with limited English proficiency?
- Policies and procedures to periodically review the current and emergent demographic trends for the geographic area served in order to determine interpretation and translation services?

Source: "Linguistic Competence in Primary Health Care Delivery Systems: Implications for Policy Makers," January 2001: Policy Brief 2. National Center for Cultural Competence.

Sample Partnership Description

<The Name of Your TB Program>

The <<u>name of your TB program</u>> has responsibility for controlling tuberculosis (TB) in our area. The program coordinates its efforts with over <<u>number</u>> agencies, including <<u>name the agencies or stakeholder groups</u>>.

Concern

Unfortunately, TB is not yet a disease of the past. In <<u>name of your state or program</u> <u>area></u>, people who are <<u>name your area's high-risk populations</u>, including the specific <u>countries or world regions for those born outside of the United States</u>> are among those most affected by the disease. We are particularly concerned that_<<u>describe specific</u> <u>problems and resulting human suffering associated with TB in your area that the</u> <u>partnership will be addressing</u>, such as treatment-completion rates and the resulting risk <u>of drug-resistant TB that could be passed on to loved ones</u>, or lack of awareness among <u>at-risk populations of symptoms and risk factors</u>>.

Response

<<u>If your partnership is already established, you may wish to provide a brief history of the</u> partnership, along with its significant accomplishments and participating stakeholder groups.>

We are seeking partners who are willing to work with us to develop and implement programs that will reduce the suffering caused by TB in <your state or program area>. With the support of partners who are recognized experts in the field of TB elimination, respected leaders of at-risk populations, health care providers, and <<u>name additional</u> TB stakeholder groups you wish to include, such as elected officials, faith-based organizations, universities, schools of public health, professional associations, and business or community-based organizations>,we can make a difference.

Partnership Participation

As partners, we bring a variety of skills, experiences, and perspectives to the table. We value each other's perceptions, and we are committed to working cooperatively to <<u>describe the</u> <u>overall purpose of your partnership</u>>. We regularly evaluate our efforts and our outcomes. We agree to meet at least <<u>name the desired frequency of meetings</u>, such as monthly>. We create and serve on working groups as needed to accomplish our goals and objectives. <<u>Briefly describe any current partnership projects or working groups</u>.>

For More Information

Contact person or persons> at <<pre>e-mail addresses> or phone numbers>.

Sample Letter to an At-Risk Community Leader

<Date>

Esteemed <<u>Dr., Mr. or Ms.</u>> <u><Recipient's Name></u> <<u>Title</u>> <<u>Street Address</u>> <<u>City, ST_ZI</u>P>

Dear <<u>Recipient's Name</u>>:

I respectfully request your help addressing a health problem that is disproportionately impacting people from <<u>name the area</u>> living in our <state, county, city, community>. As a respected community leader, your perspectives on how we might work together to address this problem are crucial to our ability to better serve <<u>name of at-risk</u> <u>community</u>>.

The health problem I am referring to is tuberculosis (TB). TB is both curable and preventable. However, left untreated, TB can be easily transmitted to loved ones and can be fatal.

I am seeking participation by you, a respected community leader, in a TB partnership we are forming to <<u>describe the overall purpose or need you are trying to address</u>>. In addition to community leaders, we are seeking participation from <<u>list participating</u> <u>stakeholder groups</u>>.

As a first step in exploring partnering, would you be willing to meet with <<u>name and</u> <u>title</u>> from my office so that we can learn more about the <<u>name</u>> community in our state? <<u>He/she</u>> will be calling you later in the week to see whether a meeting is possible and to answer any questions you may have about TB or our agency and its work. Should you wish to contact me directly, I can be reached at <<u>phone number</u>> or <<u>e-mail</u> <u>address</u>>.

Thank you for your time and consideration.

Sincerely,

<<u>Name></u> <u><Title></u> <u><Organization></u> <u><It is often helpful to have the letter come from the state TB controller, since it shows</u> <u>community leaders that there is a high level of organizational support for the partnership.></u> **d** Checklist

Leadership skills																
Meeting facilitation																
Social marketing media expertise																
Knowledge of TB rules and regulations																
Knowledge of TB programs & services																
policy makers Influence with high-level																
Financial resources or fundraising ability																
Health program development expertise																
Potential partners access																
Stakeholder access																
Decision maker in their organization																
stakeholders																
Respected by peers																
Cultural competency																
TB medical expertise																
Stakeholder Groups	TB Program Staff	Leader of At-Risk Populations	Professional Organizations	Community-Based Organizations	Advocacy Groups	Nonprofit Agencies	Employer of At-Risk Populations	Health Care Providers	Managed Care Providers	Academic Institutions	Residential Facilities	ia	Policy Makers	Foundations	Third-Party Payers	General Public
Stal	TBF	Lea(Pop	Prof Org	Con Orgí	Adv	Non	Emp Pop	Heal	Man Prov	Aca	Resi	Media	Poli	Four	Thir	Gen

Worksheet

1. Determine who has ultimate authority and responsibility for what aspects of your TB prevention and control program and its budget.

2. Determine the level of influence your partnership needs to have with your TB program and your agency to accomplish its purpose.

3. Clarify the extent to which partnership suggestions and input will be able to influence and shape your TB program. In other words, determine who within your agency has final say and clarify how open they are to outside input.

Worksheet (cont.)

4. Determine how your agency's formal and informal communication channels can be used to build and maintain support for your partnering efforts.

5. Identify the issues that are most important to your agency's key decision makers. Clarify how your TB partnership will address these issues.

6. Identify any fears and concerns your agency's key decision makers have about partnering. Identify ways to minimize these fears and concerns.

7. Anticipate the impact your agency's rules and regulations, such as prohibitions on working with the media or lobbying elected officials, are likely to have on the partnership. Clarify how you will respond should partners wish to proceed in these areas.

Planning With Partners: Moving from Goals to Effective Action

Checklist

1. Establish the planning context

- □ State the overall purpose of the partnership
- □ Summarize the partnership's vision
- Review significant environmental trends affecting TB in your area
- Summarize the partnership's successes and lessons learned to date

2. Brainstorm options

- Write one word or a one-phrase idea offered by each partner on a flip chart. Each partner has one, or several, orderly opportunities to contribute.
- □ No ideas are discussed, evaluated, or excluded.

3. Narrow the field

- Each partner identifies two or three options he or she sees as having the biggest impact on the vision.
- □ Each partner describes the impact he or she believes each chosen option will have on the vision.
- □ Together, partners make a final selection of the options they think the partnership should pursue at this time.

4. Summarize the remaining options

Partners work together to create a one or two sentence description or definition of the options selected above.

5. Identify the SMART (specific, measurable, attainable, realistic, and time-framed) objectives needed to implement each option

□ Identify one or more SMART objectives to implement each remaining option.

6. Identify the steps needed to achieve the SMART objectives

- □ Identify the data, procedures, and steps you will use to evaluate your outcomes.
- □ Use the Planning with Partners Worksheet to clarify the tasks needed to implement your SMART objectives.

Use these steps to focus the planning process on options and actions that will have the most impact on TB prevention and control.

Brainstorming encourages partners to generate a wide variety of options and to build on each other's ideas.

These steps help focus the discussion on fully understanding and comparing the relative merit of all options that might impact the vision.

This step helps the group solidify the choices it made above.

When all partners responsible for implementing an option help to create its SMART objectives, the objectives are more likely to be appropriate and realistic.

Identifying the needed steps alerts partners to SMART objectives that may be overly ambitious or difficult to achieve, allowing partners to modify such objectives before problems occur.

Checklist

Objectives are the specific, measurable, attainable, realistic and time-framed (SMART) outcomes you are seeking. Use this checklist to ensure your objectives are SMART.

□ Specific

Describe the specific behavior or outcome you wish to achieve. This outcome should be related to a number, rate, percentage or frequency.

Measurable

Determine the system by which you plan to measure your progress towards the achievement of the objective. This data may come from your TB registry or another information management system you have in place.

□ Attainable

Ensure that the objective can be achieved with a reasonable amount of effort.

D Realistic

Ensure that the people with whom the objective is set have the necessary knowledge, skills, and abilities to make an impact on the situation.

□ Time Framed

Include a time period or a start and finish date during which activity working toward the objective will take place.

Here are examples of SMART TB objectives:

- 1. An educational objective related to private providers: Upon completion of the 2-hour training session, participants will be able to identify three TB stigmas common to their high-risk populations and three strategies for minimizing these stigmas.
- 2. An educational objective related to patient incentives: At the end of the training session, the student will be able to list two incentives to use with TB patients to help them take their medicines.
- 3. A TB program objective related to completion of therapy: At least 90 percent of patients with newly diagnosed TB, for whom therapy for one year or less is indicated, will complete therapy within 12 months.

Planning with Partners

Worksheet

:uo		Activities Required to Meet the Objective Responsible Deadline Cost (including in-kind services) Partners										
Planning Option:	SMART Objective*:	Ac	÷.	તં	ю.	4.	5.	.9	7.	8	6	10.

*Sample of a SMART (specific, measurable, attainable, realistic, and time-framed) Objective: Upon completion of the 2-hour training session, participants will be able to identify three TB stigmas common to their high-risk populations and three strategies for minimizing these stigmas

						d Checklist
Reason for the Press Conference A newsworthy story or breaking TB ir	ess Conference ry or breaking TB ii	nformation	ı with significant	ason for the Press Conference A newsworthy story or breaking TB information with significant impact on your program area	n area	
□ TB partnership la	TB partnership launching a major new		or policy initiativ	program or policy initiative, or is issuing a public statement about a "controversial" issue	atement abou	t a "controversial" issu
☐ Key messages and information to be imparted	information to be in	nparted				
Schedule Press Conference Participants Speakers	Conference Parti	cipants				
Potential Speaker's Name	Relationship to Subject	Contact Date	Confirmed Participation?	Topics Will Cover	Visuals Needed?	Reviewed guidelines, questions, and tips?

Conducting a Press Conference

If Checklist (cont.)

Moderator

Potential Moderator's Name	Relationship to Subject	Contact Date	Contact Confirmed Date Participation?	Topics Will Cover	Visuals Needed?	Reviewed guidelines, questions, and tips?

Logistical contacts

Phone	Address FAX	E-mail	Phone	Address FAX	E-mail
Name	Address		Name	Address	

Assemble the Necessary Materials	ıry Materials						
• Sign-up sheet (each attending journalist signs with their name, organization, e-mail, fax, phone, and address)	nding journalist	signs with th	neir name, or	ganization, e	-mail, fax, ph	one, and addres	s)
 Press kit that includes: Dress conference agenda 	nda						
Press release or media advisory	a advisory						
\Box List of the press conference speakers and moderator, including brief biographies	ference speakers	and moderat	cor, including	t brief biogra	phies		
□ Fact sheets, graphs, a concise background on TB in your area, and concise information on your partnership's history, purpose, and major accomplishments	ı concise backgre accomplishment	ound on TB s	in your area,	and concise	information .	on your partners	hip's history,
\Box Executive summaries and full copies of any reports issued at the press conference	s and full copies	of any repor	ts issued at th	ie press confe	erence		
\Box Written copies of speakers' presentations or at least their key points	cakers' presentati	ions or at lea	st their key p	oints			
 Visuals: TB posters or banners 	LS						
\Box Displays that include pictures of the partnership and its work	e pictures of the	partnership a	and its work				
Ensure That Journalists Attend / Foll	ts Attend / Fo	llow-up an	ow-up and Follow-through	hrough			
Journalist/Editor	Press Release Sent?	Confirmed Receipt?	Reminder Sent?	Attended?	Press Kit Sent?	Produced Coverage?	Thank you / Rebuttal Sent?

Single Overriding Communications Objective (SOCO)

Worksheet

In one BRIEF paragraph, state the key point or objective you want to accomplish by doing the interview. This statement should reflect what you, the author or speaker, would like to see as the lead paragraph in a newspaper story or broadcast report about your topic.

What are the three or four facts or statistics you would like the public to remember as a

Who is the main audience or population segment you would like this message to reach? Primary: Secondary:

What is the ONE message you want the audience to take away from this interview/ report?

Who in your office will serve as the primary point of contact for the media?

Name:

Phone:

Email:

Date(s) and time(s)	available:	Date:	Time:
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result of reading or hearing about this story?

Sample Single Overriding Communications Objective (SOCO)

Worksheet

In one BRIEF paragraph, state the key point or objective you want to accomplish by doing the interview. This statement should reflect what you, the author or speaker, would like to see as the lead paragraph in a newspaper story or broadcast report about your topic.

National surveillance data show that the rate of active TB cases fell to an all time low in 2004 to 4.9 cases per 100,000 people, or 14,511 total cases.

However, decline in the national TB rate was only 3.3% from 2003 to 2004 – one of the smallest declines in more than a decade

- May suggest slowing in our progress towards eliminating TB in the U.S.
- Overall slowing, combined with disproportionate impact on several populations, especially racial/ ethnic minorities and foreign-born individuals, are reason for concern
- Have learned from the past that TB must continue to be taken seriously

What are the three or four facts or statistics you would like the public to remember as a result of reading or hearing about this story?

Foreign-born persons accounted for more than half of TB cases and had a case rate 8.7 times higher than U.S. born (22.5 v. 2.6/100,000)

CDC is working to strengthen global partnerships in areas hardest hit by TB by:

- Improving overseas screening for immigrants and refugees and testing recent arrivals from highincidence countries for latent TB infection
- Strengthening the notification system that alerts local health departments to the arrival of immigrants who are known or believed to have TB
- Improving coordination of TB control with Mexico

Rates for Hispanics 8 times higher than whites, 8 times higher for blacks, 20 times higher for Asians

CDC is working on an ongoing basis with state/local health departments to ensure adequate local resources in communities facing burden

• Funded demonstration projects in Illinois, Georgia, and South Carolina to help address TB among African Americans

Who is the main audience or population segment you would like this message to reach? Primary: General public Secondary: Policy makers (awareness)

What is the ONE message you want the audience to take away from this interview/report?

Latest data show that TB was at an all time low in 2004, but progress to eliminate TB in the U.S. may be slowing.

Who in your office will serve as the primary point of contact for the media?

Name:	Phone:	Email:
Date(s) and time(s) available:	Date: Friday, March 18	Time: 10:00 a.m

<Newsletter Article Title>

Though many people may think that tuberculosis (TB) is a disease of the past, it continues to be a problem in <<u>name your state or area</u>>. In our area, approximately <<u>number</u>> percent of all TB cases are occurring in <<u>describe TB case or case rate</u> disparities or high risk groups e.g., people who come from countries where TB is <u>common, racial and ethnic minorities, others</u>>. Among those most impacted by TB in our area are <<u>name and use figures from your area associated with this article's target audience, which may be people from a specific nation or region of the world></u>.

What is TB?

Tuberculosis (TB) is a disease caused by bacteria called *Mycobacterium tuberculosis*. The bacteria can attack any part of your body, but they usually attack the lungs. TB disease was once the leading cause of death in the United States.

How TB is Spread

One of the most serious challenges posed by active TB is that it can be spread to others through the air. The bacteria are put into the air when a person with TB disease of the lungs or throat coughs, laughs, or sneezes. People nearby may breathe in these bacteria and become infected. If a person lives in close proximity to someone with active TB, such as a family member, or if a person has frequent close contact with someone with active TB, that person is at higher risk for contracting the TB germ.

Knowing the Symptoms

Not everyone infected with TB bacteria becomes sick. As a result, two TB-related conditions can exist: latent TB infection or active TB disease — both of which are treatable and curable.

A Person with Latent TB Infection	A Person with Active TB Disease
• Usually has a skin test or blood test result indicating TB infection	• Usually has a skin test or blood test result indicating TB infection
• Has TB bacteria in his/her body that are alive, but <u>inactive</u>	 Has <u>active</u> TB bacteria in his/her body
Does not feel sick	• Feels sick and may have symptoms such as coughing, fever, and weight loss
Cannot spread TB bacteria to others	• May spread TB bacteria to others
• Should consider treatment for latent TB infection to prevent active TB disease	• Needs treatment to cure active TB disease

Sample TB Article for Use With a High-Risk Population (cont.)

Many people who have latent TB infection never develop TB disease. In these people, the TB bacteria remain inactive for a lifetime without causing disease. But in other people, especially people who have weak immune systems, the bacteria become active and cause TB disease.

Getting Treatment

The good news is that persons with either latent TB infection or active TB disease can be effectively treated. The first step is to identify persons with latent TB infection or active TB disease by ensuring that they get a TB skin test and any other needed tests. The second step is to help the people with latent TB infection and those with active TB disease get proper treatment. Rapid progression from latent TB infection to active TB disease can easily be prevented. Active TB disease can be treated and cured.

In <<u>name your area, describe the TB services available, their cost, if any, and where they</u> <u>can be accessed</u>>. The privacy of those using TB services is respected and all patient information is kept in strict confidence. The medication used to cure TB is given to patients by medical professionals and must be taken as directed. Taking the medication as directed is very important because failure to take the medications as indicated can result in a person developing or transmitting drug-resistant forms of TB, which can lead to serious health problems for themselves and their loved ones.

Sample TB Article for Use With a High-Risk Population (cont.)

About <Partnership name>

<<u>Insert name and title of respected leader from this community</u>> is a valued member serving on the <<u>name of your TB partnership</u>>. The partnership is composed of <<u>list</u> <u>stakeholder groups or agencies</u>> that are committed to <<u>describe the purpose of your</u> <u>partnership and any programs that may be of interest to this article's target audience</u>>. For more information about the partnership, please contact <<u>community leader's name</u>, <u>phone number</u>, and if available, an e-mail address>.

Checklist

Planning, Research, Training, and Evaluation

	Yes	No	No Need
Does your TB partnership have an outbreak communication plan for public information and media, partner, and stakeholder relations?			
If yes, does the plan have the following elements:			
Designated staff responsibilities for the public information team?			
Information verification and clearance/approval procedures?			
Agreements on information release authorities (who releases what/ when/how)?			
Regional and local media contact list (including after-hours news desks)?			
Procedures to coordinate with the public health organization response teams?			
Designated spokespersons for public health issues in an outbreak?			
TB control program outbreak response team after-hours contact numbers?			
Contact numbers for emergency information partners?			
Procedures to secure needed resources (space, equipment, and people).			
Identified vehicles of information dissemination to public, stakeholders, partners (e.g., e-mail listservs, broadcast faxes, and press releases)?			
Have you coordinated your planning with the local and state TB control programs?			
Have you coordinated your planning with other key organizations such as the public education system?			
Have designated spokespersons received media training?			
Do the spokespersons understand communication principles that build trust and credibility?			

🗹 Checklist (cont.)

Messages and Audiences

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	Yes	No	No Need
Are any other types of incidents (e.g., a high-profile case) likely to require intense public information, media, and partner communication responses by your TB partnership?			
Have you identified special populations (e.g., elderly, first language other than English, Tribal communities, and border populations)? List any specific subpopulations that need to be targeted with specific messages during a TB outbreak.			
Have you identified the TB partners who should receive information and updates directly from (not solely through the media) the TB control program during an outbreak?			
Have you identified all stakeholder organizations or populations (groups or organizations that have an active interest in monitoring activities—to whom you are most directly accountable, other than official chain of command) who should receive direct communication during an outbreak?			
Have you developed topic-specific pre-outbreak materials for TB- related issues, or identified sources of these materials (if needed):			
- Topic fact sheet (e.g., description of active TB disease, latent TB infection, and treatment)?			
- Public Questions/Answers?			
- Partner Questions/Answers?			
- Resources for media/public/partners to obtain additional information?			
- Web access and links to information on TB?			
- Recommendations for affected populations?			
- Background beta video (B-roll) for media use on the topic?			
- List of subject matter experts outside your partnership who would be effective validators to public/media regarding your activities during an outbreak?			

Checklist (cont.)

Messenger

	Yes	No	No Need
Have you identified TB partnership spokespersons for media and public appearances during an emergency?			
If yes, have you:			
Identified persons by position to act as spokespersons for multiple audiences (e.g., media spokesperson or community meeting speaker) and formats about public health issues during an outbreak?			
Ensured that the spokespersons understand their communication roles and responsibilities and will incorporate them into their expected duties during the outbreak?			

Delivery Methods and Resources

	Yes	No	No Need
Does your partnership have go kits for public information officers who may have to abandon their normal places of operation during an outbreak?			
If yes, does the kit include:			
A computer(s) capable of linking to the Internet/e-mail?			
CD–ROM or disks containing the outbreak communication plan (including media, public health, and organization contact lists, partner contact lists, and information materials)?			
A cell phone or satellite phone, pager, wireless e-mail, etc.?			
A funding mechanism (credit card, etc.) that can be used to purchase operational resources as needed?			
Manuals and background information necessary to provide needed information to the public and media?			
Have you identified the mechanisms that are or should be in place to ensure multiple channels?			
If yes, do they include:			
Media channels (print, TV, radio, Web)?			
- Websites? - Phone banks?			
- Town hall meetings?			
- Listserv e-mail?			
- Broadcast fax?			
- Letters by mail? - Subscription newsletters?			
- Submissions to partner newsletters?			
- Regular or special partner conference calls?			
Are contracts/agreements in place to post information to broadcast, fax, or e-mail systems?			
Have locations for press conferences been designated?			
		1	1

🗹 Checklist (cont.)

Personnel

	Yes	No	No Need
Have you identified employees, contractors, fellows, interns currently working for you or available to you in an outbreak situation, that have skills in the following areas:			
- Public affairs?			
- Health communication?			
- Communications?			
- Health education?			
- Training?			
- Technical writing/editing?			
- Audio/visual?			
- Internet/Web design?			
Others who contribute to public/provider information?			
Have you identified who will provide the following expertise or execute these activities during an outbreak (including backup):			
Command and control:			
Directs the work related to the release of information to the media, public, and partners?			
Activates the outbreak communication plan, based on careful assessment of the situation and the expected demands for information by media, partners, and the public?			
Coordinates with horizontal communication partners, as outlined in the plan, to ensure that messages are consistent and within the scope of the partnership's role?			
Provides updates to all partner organization's and others as determined in the plan?			
Advises the partnership and chain of command regarding information to be released, based on the partnership's role in the response?			
Ensures that outbreak communication principles are employed in all contact with media, public, and partner information-release efforts?			
Advises incident-specific policy, science, and situation?			
Reviews and approves materials for release to media, public, and partners?			
Obtains required clearance of materials for release to media on policy or sensitive topic-related information not previously cleared?			
Determines the operational hours/days, and reassesses throughout the outbreak?			
Ensures resources are available (human, technical, and mechanical supplies)?			

🗹 Checklist (cont.)

Media:	Yes	No	No Need
Assesses media needs and organizes mechanisms to fulfill media needs during the outbreak (e.g., daily briefings in person, versus a website update)?			
Triages the response to media requests and inquiries?			
Ensures that media inquiries are addressed as appropriate?			
Supports spokespersons?			
Develops and maintains media contact lists and call logs?			
Produces and distributes media advisories and press releases?			
Produces and distributes materials (e.g., fact sheets, Background-roll)?			
Oversees media monitoring systems and reports (e.g., analyzing environment and trends to determine needed messages; determining what misinformation needs to be corrected; and identifying concerns, interests, and needs arising from the outbreak and the response)?			
Ensures that communication principles that build trust and credibility are incorporated into all public messages delivered through the media?			
Acts as member of the outbreak investigation unit (OIU) on the field site team for media relations?			
Serves as liaison from the organization to the OIU and back?			
Directs public information:			
Manages the mechanisms to respond to public requests for information directly from the organization by telephone, in writing, or by e-mail?			
Oversees public information monitoring systems and reports (e.g., analyzing environment and trends to determine needed messages; determining what misinformation needs to be corrected; identifying concerns, interests, and needs arising from the outbreak and the response)?			
Activates or participates in the telephone information line?			
Activates or participates in the public e-mail response system?			
Activates or participates in the public correspondence response system?			
Establishes and maintains links to other emergency response websites?			

		🗹 Checklist (co	
Partner/stakeholder information:	Yes	No	No Need
Establishes communication protocols based on prearranged agreements with identified partners and stakeholders?			
Arranges regular partner briefings and updates?			
Solicits feedback and responds to partner information requests and inquiries?			
Oversees partner/stakeholder monitoring systems and reports (e.g., analyzing environment and trends to determine needed messages, determining what misinformation needs to be corrected, and identifying concerns, interests, and needs arising from the outbreak and the response)?			
Helps organize and facilitate official meetings to provide information and receive input from partners or stakeholders?			
Develops and maintains lists and call logs of legislators and special interest groups?			
Responds to legislator / special interest groups requests and inquiries?			
Content and material for TB outbreaks:			
Develops and establishes mechanisms to rapidly receive information from the TB control program regarding the outbreak?			
Translates TB control program situation reports and meeting notes into information appropriate for public and partner needs?			
Works with subject matter experts to create situation-specific fact sheets, Q/As, and updates?			
Compiles information on possible TB-related topics for release when needed?			
Tests messages and materials for cultural and language requirements of special populations?			
Receives input from other partnership outbreak communication team members regarding content and message needs?			
Uses analysis from media, public, and partner monitoring systems, and reports (e.g., environmental and trend analysis to determine needed messages, what misinformation needs to be corrected, identify concerns, interests, and needs arising from the outbreak and the response) to identify additional content requirements and materials development?			
Lists contracts/cooperative agreements/consultants currently available to support outbreak information dissemination?			

☑ Checklist (cont.)

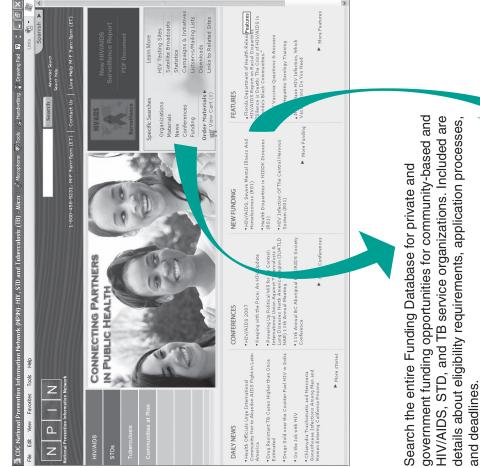
Resources

Do you have space:	Yes	No	No Need
To operate your outbreak communication plan at various partner sites? (You need a place to bring media on site, separate from the TB control program.)			
To quickly train spokespersons?			
For team meetings?			
For equipment, exclusive for your use? (You cannot stand in line for the copier when media deadlines loom.)			
Have you considered the following contracts and memoranda of agreement:			
A contract for writers or public relations personnel who can augment your staff?			
Lab/treatment protocols?			
Managers/school administrators looking for policy statements for employees and students?			
Do you have the following recommended equipment:			
Fax machine (with a number that is preprogrammed for broadcast fax releases to media and partners)?			
Computers (on LAN with e-mail listservs designated for partners and media)?			
Visible calendars, flow charts, bulletin boards, and easels?			

Show Me the Money!

Using CDC NPIN to locate funding opportunities and information Locating Funding Opportunities

To find information about specific funding opportunities, go to www.cdcnpin.org to browse or search.



Register and other sources. They're added to the CDC Browse "New Funding" opportunities from the Federal NPIN home page every Friday afternoon.

Funding Information Links

To find links to information on how to write proposals, background information on funders, or CDC's funding websites, go to www.cdcnpin.org.

Website	Funding
Catalog of Federal Domestic Assistance	www.cfda.gov/
CDC, NCHSTP, Division of HIV/ AIDS Prevention	www.cdc.gov/hiv/topics/ funding
CDC, Procurement and Grants Office	www.cdc.gov/od/pgo/funding/ funding.htm
Foundation Center	www.fdncenter.org/
Funders Concerned About AIDS	www.fcaaids.org
Health Resources and Service Administration, HIV/AIDS Bureau	www.hab.hrsa.gov/grant.htm
National AIDS Fund	www.aidsfund.org/
National Institutes of Health, Grants and Funding Opportunities	www.grants.nih.gov/grants/ index.cfm
Partners in Information Access for the Public Health Workforce	www.phpartners.org/grants html

For Help or More Information

Contact NPIN for assistance from a Health Information Specialist:

Monday through Friday, 9 a.m. to 8 p.m. (ET) 1-800-458-5231 1-888-282-7681 info@cdcnpin.org Hours Phone

- Fax E-mail

Centers for Disease Control and Prevention National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention Division of Tuberculosis Elimination