

OVERVIEW OF PURPOSE AND USE OF THE CDI DUTY STATEMENT, CORE COMPETENCIES, CAPABILITIES ASSESSMENT TOOL, AND TRAINING CURRICULUM

Introduction

The California Department of Health Services, Tuberculosis Control Branch (TBCB) is issuing a Communicable Disease Investigator (CDI) Duty Statement, complementary Core Competencies, a CDI Capabilities Assessment Tool, and a CDI Training Module Curriculum. The purpose of these documents is to encourage the use of CDIs in tuberculosis (TB) control programs and to begin to standardize their training. The tools are designed to help guide local TB programs' efforts to develop a CDI job classification, evaluate current CDI job specifications, and support competency-based training and professional growth of CDIs in TB control.

These tools were developed by the California Department of Health Services TBCB and the Francis J. Curry National TB Center (CNTC) with oversight and consultation from a CDI Advisory Group. The 16-member Advisory Group included representatives from the California TB Controllers Association (CTCA) Nurses and Allied Health Professionals Forum (NAHPF); Public Health Nursing Directors; California Department of Health Services Sexually Transmitted Disease (STD) Control Branch; TB and STD field staff; University of California (UC) Berkeley Center for Infectious Disease Preparedness; TBCB; University of California, San Francisco (UCSF) Center for Health Professions. Advisory Group members collectively represented low, medium, and high morbidity jurisdictions. These documents were reviewed by the National TB Controllers Association (NTCA)/ National TB Nurse Consultant Coalition's (NTNCC) Disease Investigator Core Competencies Workgroup, comments and input have been included. These California tools and documents were adopted by the NTCA/NTNCC Disease Investigator Core Competencies Workgroup. They serve as the foundation to the National Disease Investigator model duty statement and core competencies statement currently under development.

These tools are not intended to replace or eliminate the need for appropriate supervision of CDI staff. The Advisory Group strongly recommends that staff supervising CDIs have experience or training in TB duties related to field and contact investigations. The Advisory Group has asked TBCB to explore future strategies for assisting local TB programs with ensuring adequate CDI supervision.

Background

CDIs have been used for over 50 years as part of communicable disease control, and actively assist controlling infectious diseases such as syphilis, TB, HIV, vaccine-preventable illnesses, and more recently anthrax. CDIs perform technical and investigative activities that do not require nursing-level clinical training and skills. Factors such as an increased focus on TB contact investigation, demand for disease control staff as a result of bioterrorism preparedness, and requests from LHDs to

develop CDI tools (e.g. duty statement) and training materials led to the development of these tools and curriculum. A statewide survey was implemented to determine the current use and identify training needs of CDIs working in local TB programs. General findings from the 34 LHDs that responded to the survey include:

- Responses suggest some LHDs are unclear about the roles and/or contributions of CDIs
- CDI duties and supervision varied among respondents
- Training topics, methodologies, materials, and length of training sessions were near consensus among respondents
- Counties currently using CDIs indicated creating a career ladder, cross training, and expanding current CDI duties are planned changes to the CDI position in their county
- There was a wide range of job titles and positions used across jurisdictions and overlapping job responsibilities

The survey findings and advisory committee together shaped the duty statement, capabilities tool, competencies, and curriculum.

Duty Statement

The Duty Statement summarizes the scope of CDI practices and lists typical CDI core and supporting duties. It also identifies the qualifications, essential knowledge and abilities, and important attributes of CDIs in TB control.

The qualifications suggest a stepwise progression from entry-level to journey-level CDI classification. These levels are based on the understanding that most newly hired CDIs do not have prior CDI experience and that some level of academic achievement is optimal to ensure CDIs can perform the critical thinking and analysis that is essential to performing effective field and contact investigations.

The Duty Statement represents the minimum duties and requirements for CDIs in TB control. The CDI duties and qualifications are meant to complement the duties typically carried out by front line public health nurses and other allied health professionals. These duties reflect the CDI's role and responsibilities as a member of a multidisciplinary TB team.

The Duty Statement was developed with the recognition that CDI duties vary widely across LHDs. The intention is that local programs will customize this template to meet their local needs. This tool can also be used by LHDs to help create a CDI job classification or to evaluate their current use of CDIs.

Core Competencies

The CDI TB Core Competencies parallel the CDI Duty Statement and are meant to illustrate the skills necessary to carry out the responsibilities of this job classification. The competencies were adapted from a list developed by the Council on Linkages

between Academia and Public Health Practice that was reviewed by over 1000 public health professionals.

The Core Competencies are categorized as general or TB-specific. General competencies are cross-cutting and necessary for the performance of all CDI job responsibilities. These competencies are listed under the following four domains:

- Communication
- Cultural Competency
- Community Dimensions of Practice
- Team Skills

TB-specific competencies represent the skills necessary to carry out specialized CDI TB roles and responsibilities. Competencies are grouped under each of the major responsibility areas of the CDI Duty Statement and are divided into the following three domains:

- Analytic/Assessment skills
- Planning Skills
- TB Control Skills

The competencies are cross-referenced with the Duty Statement, Capabilities Assessment Tool, and Training Curriculum. The core competency document may also be helpful in developing a framework for hiring and evaluating CDI staff.

The core competencies document also contains an extensive reference and resource list.

Capabilities Assessment Tool

The Capabilities Assessment Tool illustrates the behaviors and skills that CDIs are expected to demonstrate in each of the competency areas. They relate to the Core Competencies list and major duty headings of the Duty Statement. The Training Curriculum focuses on the development of these capabilities as well.

The Assessment Tool provides capability measures for the general and specific core competency categories and indicates the level of mastery for both entry-level and journey-level CDIs. These levels of mastery are reflected in the following categories:

- Aware: Basic level of mastery of the competency. Individuals may be able to identify the concept or skill, but have limited ability to perform the skill.
- Knowledgeable: Intermediate level of mastery of the competency. Individuals are able to apply and describe the skill.

- **Proficient:** Advanced level of mastery of the competency. Individuals are able to integrate, critique, and teach the skill.

Levels of mastery for entry- and journey-level CDIs are based on the following:

- **Entry-Level:** Most competencies are ranked as "Aware" since the entry-level qualifications do not require prior CDI experience. The "Knowledgeable" ranking is used mostly for competencies that do not require TB-specific knowledge, but indicate that the candidate has a basic understanding of how to work appropriately with diverse clients in a public health setting.
- **Journey-Level:** Skills that are central to the CDI position and within its scope of practice are ranked as "Proficient." Competencies related to working as part of the TB Team or knowing particular information are most often ranked as "Knowledgeable."

This tool can be customized to further define the level of mastery that a TB program expects in each of the core competency areas from CDI candidates, entry-level CDIs, and journey-level CDIs. It can also be adapted to evaluate CDI job performance.

Training Curriculum

The CDI Training Curriculum was developed from a variety of resources recommended by the CDI Advisory Group, and was designed to promote a core set of skills for staff that perform the duties described in the CDI Duty Statement. It does not contain material related to every CDI job duty or core competency identified by the project (e.g. placing and measuring tuberculin skin tests). The curriculum focuses on training for the CDI duties that fall within the scope of non-licensed practice. It is divided into sessions that can be conducted as individual stand alone sessions or in a multi-session series.

The training module curriculum covers the following topics:

1. Contact Investigation
2. Elements of Effective Interviews
3. Interview Outline
4. Field Investigation and Field Safety
5. Adherence and DOT
6. Legal/Ethical Aspects of the CDI Role and Confidentiality
7. Cultural Competence
8. Working with Patients with Special Challenges (Homeless/Substance-using)
9. Patient Education, Infection Control, and Working with Providers and Labs

The content was developed using a variety of resources including materials supplied by or strongly recommended by the Advisory Group members. The training curriculum is designed to develop and reinforce the skills and capabilities that are needed to carry out CDI duties and responsibilities.

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