Public Health Tuberculosis (TB) Logic Model

Purpose: The Tuberculosis team works in partnership with others to maximize responsiveness to TB prevention and management

Goal: To coordinate and deliver safe and caring TB prevention services that promotes health and well-being and reduce burden of disease.

Inputs	Outputs		Outcomes		
	Participation	Components and Activities	*Short*	*Medium*	*Long*

Results from the completion of outputs

Has the completion of the short-term goal lead to change?

Has the completion of the medium term goal led to improved health and decreased inequity?

Inputs

Human Resources:
- Tuberculosis Team

Partnership Resources:
- Integrated Tuberculosis Services
- PPH Surveillance Team
- Hospitals
- Contracted Pharmacies
- Labs
- FNIHB
- Other Regions
  - Interlake-Eastern
  - Southern Health-Santé Sud
  - Prairie Mountain Health Board
  - Northern Health

Financial Resources
- Manitoba Health
- FNIHB

Planning assumptions
- We work interdisciplinary, collaboratively and in partnership.
- Our work is evidence informed and based on best practice.
- We are responsive to outbreaks.
- We believe in continuous improvement.
- We understand the importance of cultural safety.

Participation

PPH Surveillance Team

Integrated Tuberculosis Services

Manitoba Health

FNIHB

WRHA Programs Hospitals

Contracted Pharmacies

Labs

Other Regions
- Interlake-Eastern
- Southern Health-Santé Sud
- Prairie Mountain Health Board
- Northern Health

Community Agencies

Components and Activities

Tuberculosis Disease Case Management
- Care coordination to enable completion of medical treatment and care
- Consultation to stakeholders on TB prevention and management
- Provide and support direct observed therapy

Contact Investigations
- Determine scope and parameters of investigations to identify contacts
- Prompt identification of contacts to TB disease
- Identify, assess and support timely referral for assessment of TB disease or LTBI or Window Period Prophylaxis

Outbreak Investigations
- Early detection
- Lead and coordinate outbreak investigations
- Mobilize Humans Resources
- Communicate with affected communities and health resources
- Implement and influence control measures

Support treatment of Latent Tuberculosis Infection (LTBI)
- Support, assessment, referral and monitoring for people being treated for LTBI

Partnerships and collaboration
- Participate as a member of ITBS
- Provide consultation, education and support to community health and social service providers, agencies and communities

Surveillance
- Data collection and entry
- Analysis of data
- Interpretation of data
- Dissemination

Short

Reduced TB transmission by people with TB disease

Appropriate treatment and isolation for people with TB disease

Early identification of TB disease and LTBI

TB outbreaks detected Resources for outbreaks are mobilized

Populations deemed as priority for LTBI complete treatment

Role clarity and understanding amongst partners

Accurate and timely data is available

Medium

People with TB disease complete treatment, defined as at least 80% of treatment completed within 3 months of projected treatment length

Coordinated, individual, family and community-centred quality care and expertise across the TB spectrum

Positive client and family experience

Decreased progression to active TB disease

Increased capacity for TB prevention and care built across Manitoba

Program, policy, practice and partnerships are evidence-informed

Long

Prevention of community spread of TB