

DSHS Congenital Syphilis Logic Model

Products

9/1/2020

Outcomes (Beneficiaries)

Audience	Resources	Activities	Outputs	Short	Mid	Long
Client	Central Office Staff Public Health Follow-Up (PHFU)/ Surveillance Staff Providers	Adequately treat pregnant women diagnosed with syphilis	Increased percentage of pregnant women diagnosed with syphilis who receive adequate treatment		Barriers to prenatal medical care removed for pregnant women Increased pediatric follow-up on infants born to women with positive syphilis serology Improved timeliness of reporting of pregnant women diagnosed with syphilis	Increased percentage of complete evaluations performed on infants Increased number of women of childbearing age who have been diagnosed with syphilis with adequate treatment
	Access to Benzathine Penicillin G therapy (Bicillin) treatment	Increase access to Benzathine Penicillin G (Bicillin) therapy	Increased number of women adequately treated for syphilis	Decreased number of probable CS cases.		Reduced longterm complications associated with CS.
	Fetal and Infant Morbidity Review on Congenital Syphilis (FIMR-S) Core Teams	Identify barriers to care for women who have delivered infants diagnosed with congenital syphilis	List of barriers to care generated by FIMR-S case review board members	Identified barriers to prenatal and medical care.	Barriers to prenatal medical care removed for pregnant women	Increased access to prenatal care
	Legislators	Coordinate with Texas Legislative bodies to update current testing and reporting requirements -- Central Office	Legislative bills are introduced that improve testing, treatment, reporting, and pregnancy reporting requirements.	Requested legislative bills and rules changes are passed/adopted	Increased percentage of pregnant women who are tested at first and third trimesters and at delivery.	Increased identification of syphilis cases early in pregnancy; increased timely and adequate treatment of syphilis during pregnancy
Client Goal: Decrease the number of infants diagnosed with congenital syphilis						
Community	Central Office and Field Staff	Initiate targeted digital media placements -- Central Office	Digital placements are placed in relevant areas	Increased awareness in pregnant women and women of childbearing age of syphilis and congenital syphilis	Improved screening for pregnant women or women of childbearing age	
	Example Media Campaigns	Open a social media presence to include paid digital placement -- Central Office	The number of views by target audiences (women, medical providers, high morbidity communities, etc)	Increased awareness of testing laws in women of childbearing age		
	Financial Support for Campaigns	Partner with groups to increase promotional messaging -- Central Office	Radio spots on syphilis and congenital syphilis delivered to rural and Rio Grande Valley populations, as appropriate			
	Media Developers	Identify media campaigns used by other jurisdictions	Customizable media platforms offered to jurisdictions	Media components developed	Media components made customizable	Media components made available to jurisdictions
	Data identifying key partners	Engage with other states and DSHS Office of Border Health to initiate media campaigns	Improved communications across borders with Mexico and neighboring states	Communications between neighboring states established; work with Office of Border Health to establish communications with Mexico	Stronger internal procedures for communicating across jurisdictional boundaries developed	Improved reporting of testing and treatment history
	Maternal and Child Health (MCH) Section	Offer outreach and awareness to Healthy Texas Mothers and Babies (HTMB) Local Coalitions	Inclusion on existing websites as well as targeted messaging to the general public in coordination with other media campaigns led by LIDS			

Community Goal: Overall decrease in the number of patients diagnosed with syphilis

Provider	Central Office Staff	Develop FIMR Fact Sheet	Updated factsheets posted on DSHS website	Epidemiological profile and FIMR and congenital syphilis factsheets posted to DSHS website		
	FIMR-S Data	Develop Health Advisory Establish a third FIMR-S in the Dallas-Fort Worth area with Dallas County Health and Human Services	Health Advisory about congenital syphilis is developed (modified to match website) Information obtained from FIMR-S meetings (Dallas, Houston, San Antonio) for use for planning future congenital syphilis prevention activities	Health Advisory distributed to Texas Medical Association, Hospital Administrators, and other relevant statewide associations Internal FIMR-S meetings regularly occur with Central Office DSHS and Dallas County.	Dallas FIMR-S activities expanded to external partners	
	Surveillance	Educate providers about how to confirm prior syphilis history and treatment	Providers reach out to local jurisdictions for treatment history	Providers reach out to local jurisdictions for treatment history	Additional treatment offered to patients with inadequate treatment	Improved treatment adequacy in patients with the potential of pregnancy
	Denver Prevention Training Center	Assist with Provider Summit planning	Summit occurred involving medical providers across the state	Increased awareness and knowledge of maternal and congenital syphilis		
	Medical Expertise	Conduct a Ground Rounds on congenital syphilis at the University of Texas Rio Grande Valley	Grand Rounds conducted and made available through web	Improved provider awareness of congenital syphilis	Improved provider management of congenital syphilis and acquired syphilis	
	THSS High Risk Screening Tool	Create a provider evaluation and treatment tool for congenital syphilis and make available on the STD Clinical section of the DSHS website	Created provider education modules and presentations	Created screening tool to include congenital syphilis	Promoted screening tool to providers	Implemented full-scale utilization of the screening tool

Provider Goal: Decrease medical barriers for pregnant women.

Pharmacy	Benzathine Penicillin G (Bicillin)	Develop 340B policy for DSHS providers	Policy developed and distributed	Clarification on 340B and distribution of medications provided for all DSHS Inventory Tracking Electronic Asset Management System participants		
		Review of private pharmacist qualifications for distribution of Benzathine Penicillin G (bicillin)	List of pharmacists developed			

Public Health	Central Office Staff	Establish case management model within PHFU for following pregnant women diagnosed with syphilis	Report on pregnancy ascertainment on women identified with syphilis or are named in a syphilis investigation			
	Disease Intervention Specialists or Community Health Workers	Increase percent of pregnancy ascertainment for women of childbearing age diagnosed with syphilis or named in syphilis investigations				
	THISIS Data Management System	Use vital statistics data to improve completeness of congenital syphilis investigations	Increased percentage of congenital syphilis investigations without missing data			
	MCH Section Staff (Zika Contract Management Section (CMS) Grant)	Administer CMS grant and provide guidance and technical assistance to South Texas LHDs				
	South Texas LHD Staff (Zika CMS Grant)	<p>Conduct education and outreach activities to prevent the spread of Zika, syphilis, and other infectious diseases</p> <p>Increase access to contraceptive services for women of childbearing age and their partners</p> <p>Increase access and reduce barriers to Zika and syphilis testing and counseling</p> <p>Increase access to services for pregnant women and infants affected by the Zika virus and/or congenital syphilis</p> <p>Increase services offered to pregnant women</p>				
Other Stakeholders	Texas Medicaid and Healthcare Partnership	Enter into a memorandum of understanding (MOU) and data use agreement (DUA) with Medicaid.	<p>Sharing of Texas Medicaid data</p> <p>Line list of out-of-compliance hospitals serving pregnant women with syphilis provided to jurisdictions for follow-up</p>	<p>MOU and DUA are established and updated annually</p> <p>Increased jurisdictional awareness of hospitals with compliance concerns</p>	Syphilis treatment of Pregnancy Medicaid clients is matched	Percentage pregnant women with syphilis entering prenatal care (PNC) through Medicaid is reviewed and Medicaid wait times concerning PNC are evaluated
	Public Health Follow-Up/STD Surveillance Staff	Local jurisdictions follow-up with hospitals which appear out of compliance with reporting laws	Increased collaboration with hospitals	Provider visits conducted	Local jurisdictions follow-up with hospitals which appear out of compliance with reporting laws	
	Community Health Improvement	Collaborate with Community Health Improvement (CHI) to see how community health workers might assist in outreach to hard-to-reach populations.	Increased outreach to hard-to-reach populations by community health workers	Collaboration with CHI established	Community health workers engaged in community efforts to address congenital syphilis	Increased prenatal care rates
	<p>Vital Statistics</p> <p>Delivery Hospitals</p>	<p>Partner with the Center for Health Statistics and the Vital Statistics Section in developing more accurate reporting.</p> <p>Begin reporting of pregnancy status among women diagnosed with syphilis, including those diagnosed at labor and delivery</p>	Increased percentage of congenital syphilis investigations without missing data	Improved Vital Statistics birth matching to maternal syphilis cases to improve timely reporting of congenital syphilis cases to Central Office and CDC		

DSHS Congenital Syphilis Work Plan

9/1/2020

Goal 1: Reduce spread of congenital syphilis in infants.					
Strategies	Collaborators	Objectives	Activities	Timeframes	Expected Outcomes
Adequately treat pregnant women diagnosed with syphilis.	Clients, Providers	Increase percentage of adequate treatment in pregnant women diagnosed with syphilis.	<ol style="list-style-type: none"> 1. Identify current treatment offered by providers through interviews, meetings, surveys, and THISIS data. 2. Disseminate results to the TB/HIV/STD Section and the Laboratory and Infectious Disease Division. 3. Review possible barriers to care for pregnant women. 4. Outline possible measures to increase treatment adequacy 	<p>1/11/2021</p> <p>1/26/2021</p> <p>2/5/2021</p> <p>4/5/2021</p>	Increase percentage of pregnant women and women of childbearing age who have been diagnosed with syphilis and have completed adequate treatment.
Coordinate with Texas Legislative bodies to update current testing and reporting requirements for pregnant women.	Clients	Introduce legislative bills that improve testing, treatment, and reporting requirements.	<ol style="list-style-type: none"> 1. Review current laws and policies in HSC and TAC. 2. Draft legislation for 87th Session. 3. Implement legislation passed during Session. 	9/1/2021	Reduce the number of infants diagnosed with congenital syphilis.
Goal 2: Improve provider relations.					
Strategies	Collaborators	Objectives	Activities	Timeframes	Expected Outcomes
Provide education to providers about treatment confirmation.	Providers	Providers are aware of the treatment history of their patients.	<ol style="list-style-type: none"> 1. Establish provider trainings on congenital syphilis. 2. Encourage providers to reach out to local jurisdictions for clients' treatment history. 3. Obtain THSS surveillance data. 4. Review THSS surveillance data. 5. Work with providers to implement data. 6. Develop and maintain FIMR Factsheet for release on website. 7. Obtain information from FIMR-S to use for planning congenital syphilis prevention activities. 8. Hold a congenital syphilis provider summit for pediatricians, obstetricians, and gynecologists. 9. Develop a congenital syphilis infant evaluation and treatment tool. 	12/31/2020	Improve treatment adequacy in women of childbearing age.

Goal 3: Establish a media campaign concerning congenital syphilis.

Strategies	Collaborators	Objectives	Activities	Timeframes	Expected Outcomes
Initiate targeted digital media placements.	Clients, Partners, Providers	Community has increased awareness about congenital syphilis.	<ol style="list-style-type: none">1. Determine areas most affected by congenital syphilis for best targeted media placement.2. Open social media presence to include paid digital media placement.3. Create digital messages for communities.4. Publish information on agency website and social media.5. Partner with providers outside of DSHS to spread media placements throughout communities.	8/31/2021	Increase awareness among pregnant women and childbearing women of syphilis and congenital syphilis.
Partner with local media campaigns to increase promotional messaging (Central Office).	Clients, Partners	Groups assist DSHS in delivering brand messaging to community.	<ol style="list-style-type: none">1. Review groups that have potential to assist in increasing promotional messaging.2. Reach out to groups that can assist with messaging.3. Review media campaigns used by other groups.	8/31/2021	Strengthen relationships with partners and increase awareness among pregnant women and women of childbearing age about syphilis and congenital syphilis.
Identify media campaigns used by other jurisdictions.	Clients, Partners	Offer customizable media platforms to jurisdictions.	<ol style="list-style-type: none">1. Review media campaigns in other jurisdictions.2. Engage in dialogue about communities served.3. Customize media for those jurisdictions.	8/31/2021	
Engage with other states and Office of Border Health to initiate media campaigns.	Partners	Improved communications across borders with Mexico and surrounding states.	<ol style="list-style-type: none">1. Contact other states and work with Office of Border Health to advise of Texas's congenital syphilis plans.2. Review other states' and Mexico's media platforms, including radio, television, digital communications campaigns.3. Develop internal procedures for communicating across jurisdictional boundaries.	8/31/2021	Improve testing, treatment, and reporting.

Goal 4: Establish pharmacy needs concerning congenital syphilis.					
Strategies	Collaborators	Objectives	Activities	Timeframes	Expected Outcomes
Develop 340B policy for DSHS providers.	Providers	Improve, efficient direction for DSHS and providers.	1. Review of current policies. 2. Evaluation of policies concerning providers. 3. Revision of policies. 4. Implement policies.	12/31/2020	Improve policies concerning DSHS 340B providers.
Updates on the use of Bicillin in treating syphilis, including shortages, costs, and delivery.	Providers	Improve the use and delivery of Bicillin for treating syphilis.	1. Review current use of bicillin. 2. Evaluate current delivery and costs of bicillin. 3. Evaluate impacts of shortages. 4. Bicillin supply is monitored and communicated with programs.	12/31/2020	Improve delivery and costs of bicillin.
Goal 5: Establish better reporting requirements for the laboratories.					
Strategies	Collaborators	Objectives	Activities	Timeframes	Expected Outcomes
Update more timely lab reporting for syphilis and congenital syphilis cases.	Partners, Providers	<p>Improve electronic lab reporting of syphilis and congenital syphilis cases for completeness and accuracy.</p> <p>Improve provider reporting of syphilis and congenital syphilis cases for completeness and accuracy.</p>	<p>1. Review current laboratory reporting policies.</p> <p>2. Evaluate laboratory policies.</p> <p>3. Revision of policies.</p> <p>4. Implement policies.</p>	12/31/2020	Improve lab reporting of syphilis and congenital syphilis cases