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PART 2 Evaluation of information resource

TB & substance misuse: Guidance for substance misuse – key workers

Please note that this is not a test – just something to help us develop resources for your benefit.

Please answer this questionnaire after reading the questionnaire: (Kindly tick as many boxes as you think is appropriate)

1. Please indicate whether your answers are based on leaflet for:

Substance misuse & TB: Key worker ☐ Other ☐

2. Which form of TB is infectious?

Liver ☐ Lung ☐ Lymph Node ☐ Spine ☐ Brain ☐

3. Do you think TB is curable?

Don’t know ☐ Yes ☐ No ☐

4. How long does TB treatment need to be given?

Don’t know ☐ 6 – 9 days ☐ 6 – 9 weeks ☐ 6-9 months ☐ 6 – 9 years ☐

5. What are the symptoms of TB affecting the lungs?

Itchiness ☐ Persistent high temperature ☐

Unexpected bone fractures ☐ Heavy sweating at night ☐

General & unusual sense of tiredness ☐ Stomach cramping or bloating ☐

Loss of weight ☐ Cough – for a long time (2-3 weeks or more) ☐

Coughing up blood ☐
6. What would you do if you suspected a client in your care has TB?

- Do nothing
- Refer to their GP or a Specialist healthcare team (if they exist)

7. What would you do if you suspected a client in your care is diagnosed with TB?

- Client / relative will be given tablets, and will be responsible for taking them
- You or member of your staff will be asked to watch the clients take their tablets
- Your client’s progress will be monitored more closely
- TB treatment will not interfere with any other medication they may be on
- My colleagues will be at higher risk of getting infected
- The client should not share household items such as bed linen, crockery and utensils
- Pay for their medication

12. How can you help the medical services?

- Transfer the client to another hostel
- Provide information about the client’s background
- Support DOT
- Contact the Public Health lab

Your professional background / organization:

Thank you for your co-operation, your participation is greatly appreciated and your efforts will help us improve the information resources we develop for you

Consent: I agree to take part in the above study and I understand that any information I provide will not be shared on an identifiable form and my participation is voluntary.