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**USAID TB Program South Africa**



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TUBERCULOSIS  
PROGRAM  
SOUTH AFRICA

**Quarterly Report**

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Submitted to USAID by  
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## 1. EXECUTIVE SUMMARY

In this quarter, activities focused mainly on project start up, work plan development and preparations for implementation. Consultative meetings were held with USAID, National Department of Health (NDoH), Provinces and sub partner organizations. Recruitment of project staff and drawing up of contracts with existing staff was completed. Recruitment of additional staff for the project is underway.

USAID – a briefing meeting was held on 20<sup>th</sup> October 2009 with the Contracts Officer, CTO and members of the finance team that the project will be reporting to. Key issues related to project implementation, budget, reporting lines, USAID rules and regulations were discussed and agreed upon.

NDoH - A strategic consultative meeting was held on 22<sup>nd</sup> October 2009, with Dr Yogan Pillay, Deputy Director General. General public health priorities of South Africa's new government were discussed including the 10 point plan and priority health programs. For the TB program, the following areas were highlighted as key focus areas for the NDoH:

- Scaling up of successful TBHIV integration models
- Strengthening the TB information system, ETR.net, identify problems, review alternate reporting systems and general improvement in the quality of TB data
- Infection control – operationalizing the Infection control model piloted in the Eastern Cape by CDC and CSIR
- Implementation of TB drug quantification systems
- Solutions to address health worker attitudes

Provinces – Below is a table showing the provinces visited, date of visit, priority areas and number of districts allocated for initial implementation.

<b>Date of visit</b>	<b>Province</b>	<b>Districts selected</b>	<b>Priority area</b>
25 November 2009	Eastern Cape	Amathole Nelson Mandela Metro	DOTS implementation PPM DOTS
26 November 2009	Limpopo	Waterberg Sekhukhune	DOTS implementation Community based

			DOTS
23 November 2009	Northern Cape	Siyanda	DOTS ACSM
10 December 2009	Gauteng		Training TBHIV integration Infection control
7 December 2009	Free State	Motheo Lejweleputswa Fezile Dabi	TBHIV integration
06 January 2010	KwaZulu Natal	eThekwini uMgungundlovu uMkhanyakude Zululand uThukela	TB Monitoring and Evaluation Training MDR TB DOTS

Grants management: A call for proposals was released in October 2009 and over seventy concept papers were received. Three grants have been given to MCDI, PHRU and DeNovo Communications to complete the work they had started during the TASC II TB project. Short listing of the concept papers have been conducted and selected organizations to be informed and called for a briefing workshop.

Work plans: The project work plan was developed with a program monitoring plan which was both submitted to USAID for review and approval.

## 2. **PROGRESS (achievements)**

This is the first report since the contract was awarded. Activities were mainly focused on the start up of the project, consultative meetings with stakeholders, setting up office and recruiting staff.

### 2.1. Staffing

Key personnel proposed for the project are in place except for Monitoring and Evaluation Advisor. The position was re advertised and a new M&E Advisor will start work in February 2010.

Staff contracts were finalized with existing project staff members. At the national level, there are four positions remaining vacant still. These are:

- M&E Advisor – position advertised, interviews conducted and candidates identified. Contract expected to be finalized in January. This position is seconded by our sub partner, Karensoft Consulting.
- ACSM Advisor – position advertised, interviews conducted and a candidate identified. Candidate to start work in February 2010. This position is seconded by sub partner, John Hopkins Health and Education in South Africa (JHHESA)
- Priority District Coordinator – The project is in the process of recruiting a new person.
- Laboratory Technical advisor – position advertised, interviews early January. Successful candidate expected to start work mid February 2010

The seven open provincial coordinator positions will be filled once consultative meetings with Provinces are finalized. The project is expected to be running on a full staff complement by the end of the quarter.

A 3 day project planning meeting was held on 30<sup>th</sup> November to 2<sup>nd</sup> December with all project staff. The new project was outlined in detail and discussions were held around finalization of work plans and implementation approaches. This meeting also provided an opportunity to conduct a skills audit for all staff employed by the project.

## 2.2 Work plans

Preliminary work plans were developed. Individual plans for the five key provinces were developed based on current status of the program as evidenced by the TB data submitted to the NTP as well as findings from the recent WHO review. A program monitoring plan was also developed.

## 2.3 Summary of Consultative meetings

Fruitful meetings were held with the NDoH, National TB Program and the TBHIV Unit, as well as the following provincial TB programs - Northern Cape, Eastern Cape, Limpopo, Gauteng,

Free State, North West and KwaZulu Natal. From almost all the meetings held, there were common key areas mentioned as requiring technical support. The areas of focus are summarized below. There was also general concern about progress in the implementation of the national TB strategic plan and meeting targets set for DOTS expansion by the different Provinces.

Common key areas requiring support:

- Implementation of TBHIV activities at facility level
- MDR TB clinical management training for all clinicians, doctors and nurses
- Implementation of infection control measures at facilities
- Engagement of other partners including other government departments, private sector, traditional leaders and business
- TB information system, specifically data flow processes
- Expansion of community based DOTS

2.4.Improved quality of TB services

2.5.Increased availability of TB treatment

2.6.Increased demand for TB treatment

2.7.Improved management support systems

### Grants management

Over 70 concept papers were received following a call for proposals. Thirty three have been selected for submission of full proposals. A briefing workshop will be held at the end of January with all potential recipients.