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**TB CARE I**

# **TB CARE I - Botswana**

**Year 2  
Quarterly Report  
January - March 2012**

**April 30, 2012**

## Quarterly Overview

<b>Reporting Country</b>	<b>Botswana</b>
<b>Lead Partner</b>	<b>KNCV</b>
<b>Collaborating Partners</b>	-
<b>Date Report Sent</b>	
<b>From</b>	Obert Kachuwaire
<b>To</b>	Ms Joan LaRosa (USAID Director Botswana)
<b>Reporting Period</b>	<b>January - March 2012</b>

<b>Technical Areas</b>	<b>% Completion</b>
1. Universal and Early Access	50%
2. Laboratories	67%
<b>Overall work plan completion</b>	<b>58%</b>

### Most Significant Achievements

The Botswana NTRL received its certificate for accreditation from South Africa National Accreditation System(SANAS). TB CARE I will support continued maintenance of accreditation status.

TB CARE I supported the development of a costed Global Fund Transitional Funding Mechanism (TFM) proposal through in country (Dr Diriba Mosissa and Obert Kachuwaire) and international technical assistance from Dr Jerod Scholten who provided desk support. A regional budget expert Dr David Maseng hired by TB CARE I supported the costing of the TFM proposal.

Through TB CARE I support, the in-country Senior Technical Advisor has provided technical support to the TB program focusing on the key technical areas: Community TB care, programmatic management of drug resistant TB (PMDT), TB/HIV, TB Infection Control, PPM DOTS and Monitoring & Evaluation. He facilitated the development of a comprehensive annual performance plan for 2012/13, supported the development of promotional materials and helped organize the commemoration of World TB Day 2012.

TB CARE I has developed an in-country knowledge exchange plan submitted to the local USAID office which is expected to help provide focused capacity building to local Ministry of health counterpart staff over the course of the project.

### Overall work plan implementation status

58%

### Technical and administrative challenges

The in-country Senior Technical Advisor faces challenges with fully supporting Community TB Care due to lack of funding for expansion activities, including lack of funds for district support visits and facilitation of district level trainings.

### In-country Global Fund status and update

TB CARE I supported the development of the Transitional Funding Mechanism proposal through in country and international technical assistance

## Quarterly Technical Outcome Report

Technical Area 1. Universal and Early Access								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.4 CB-DOTS program is implemented Indicator Value: Score (0-3) based on definition.	2	2011	3	2014	2	In country TA is involved in the development of strategies, tools and implementation plan for the scale up of community TB care: including integration of community TB Care and community home based care (CHBC) services; scale up of patient-centered-treatment (PCT) approaches .	Lack of funding for expansion of CB-DOTS program is a challenge. Intergration of the TB and HIV community care strategies will aid in leveraging HIV funds to be used for CB-DOTS expansion approaches .

Technical Area 2. Laboratories								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
2.1 Ensured capacity, availability and quality of laboratory testing in country needed to support the diagnosis and monitoring of TB patients	2.1.2 Laboratories with working internal and external quality assurance programs for tests that they provide including: a) smear microscopy, b) culture, c) DST, and d) rapid molecular test Indicator Value: Percent Numerator: Number of laboratories enrolled in EQA program meeting description above both nationwide and TB CARE areas. Denominator: All laboratories (national and TB CARE areas separately) that perform one or more of the above TB diagnostics.	100%	2011	100%	2012	100%	100% (52/52) laboratories continue participation in the blinded rechecking program with satisfactory performance. Support visits were conducted to 5 district labs according to support AFB smear microscopy and EQA.	TB CARE will continue technical support for the EQA program. Further support will be for the roll out of the fluorescent microscopy EQA program to 11 high volume facilities.

	2.1.3 Accreditation of NTRL by SANAS Indicator Value: Yes/No Level: Central Source: TB CARE Means of Verification: Accreditation Certificate	No	2011	Yes	2012	Yes	The NTRL received official accreditation certification from SANAS after closing of identified gaps from previous audit in November 2011	Key challenges include funding for maintenance of key laboratory equipment. Partners are working to ensure that government of Botswana can add this item to their budget and ensure sustainability
2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans	2.3.1 New technologies have been introduced Indicator Value: Number for each technique below by Central, Provincial, district and Peripheral levels 1. TB culture 2. First line DST 3. Second-line DST 4. HAIN MTBDRplus 5. GeneXpert 6. LED microscopy	0	2011	1-TB Culture/central 1-First Line DST/central 1-Sec Line DST/Central 1-LED/Central 9-LED/	2012	1 TB Culture/central 1 First Line DST/central 1 Second Line DST/Central 1 LED/Central 10	Validation of First and Second line DST his on going. Results of the validation are now expected at the end of the third quarter 2012. HAIN MTBDRplus validation protocol under development. External Quality Assurance program for LED microscopy developed. In country validation of LED microscopy has been completed	Regional Consultant will provide support through one mission for the validation of the First and Second Line DST in the fourth quarter, and will continue with desk support for current activities. Fluorescent microcopy roll out will begin third quarter April to June 2012.

## Quarterly Activity Plan Report

1. Universal and Early Access					Planned Completion	Cumulative Progress and Deliverables up-to-date		
Outcome	Activity #	Activity	Activity Leader	Approved Budget				Month
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.1.1	Enhanced community DOTS implementation plan developed and rolled out	KNCV	18.882	 50%	Sep	2012	In country Senior Technical Advisor has been involved in the development of strategies and tools to scale up the implementation of community TB care: integration of community based HIV and TB care programs, harmonization of related tools, scale up of patient-centered-treatment (PCT) approach in selected districts.
					 50%			

2. Laboratories					Planned Completion	Cumulative Progress and Deliverables up-to-date		
Outcome	Activity #	Activity	Activity Leader	Approved Budget				Month
2.1 Ensured capacity, availability and quality of laboratory testing in country needed to support the diagnosis and monitoring of TB patients	2.1.1	Training of laboratory technicians to AFB smear microscopy and conducting external quality assurance through technical input into course and into EQA program	KNCV	10.263	 50%	Sep	2012	A Fluorescent microscopy EQA program has been developed to include training, panel testing, blinded rechecking and on site support visits. On site support visits were conducted to 5 sites for AFB smear microscopy and EQA.
	2.1.2	Acquire and maintain SANAS Accreditation of National TB Reference Laboratory through technical input into accreditation	KNCV	7.500	 100%	Sep	2012	Botswana NTRL has received its official accreditation certificate from the South Africa National Accreditation Systems(SANAS) after closing of identified gaps.
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date

2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans	<b>2.3.1</b>	Finalized validation of MGIT DST for 1st line drugs and begin validation for second line testing through bi-annual regional TA	KNCV	10.110	 50%	Sep	2012	Validation of MGIT first and Second line DST is ongoing, The first phase of testing (reproducibility) has been done.
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 67%

## Quarterly MDR-TB Report

Country	Botswana
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Period	January-March 2012
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### MDR TB cases diagnosed and put on treatment in country

Quarter	Number of MDR cases diagnosed	Number of MDR cases put on treatment
Jan-Dec 2010	106	92
Jan-Sep 2011	30	0
Oct-Dec 2011	16	44
<b>Total 2011</b>	46	44
Jan-Mar 2012	Not yet available	Not yet available

## Quarterly GeneXpert Report

Country	Botswana
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Period	January - March 2012
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**Table 1: GeneXpert instruments and cartridges procured or planned by quarter with TB CARE I funds**

	Procured			# still planned for procurement in APA 2	Month, Year procurement planned (i.e. April 2012)
	Jan-Dec 2011	Jan-March 2012	Cumulative total		
# GeneXpert Instruments	0	0	0	0	
# Cartridges	0	0	0	0	

**Table 2: Cumulative List of GeneXpert Instruments Procured to Date or Planned in the Next Quarter (TB CARE I-funded)**

Already procured or still planned? (i.e. Write "Procured" or "Planned")	Instrument	# of Modules (1, 2, 4, or 16)	Location(s) (facility name & city/ province or TBD)	USG Funding Source (e.g., PEPFAR COP FYxx, USAID) <sup>1</sup>	Partner/ Implementing Organization; Additional Comments
Procured	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				

<sup>1</sup> Differentiating between PEPFAR and USAID-funded is important. If it is PEPFAR funded, specify the fiscal year (i.e. FY2011). Add rows if there are more than 8 instruments in total.

**Table 3: Cumulative Xpert MTB/RIF Cartridges Procured to Date or Planned for Next Quarter (TB CARE I-f**

Already procured or still planned? (i.e. Write "Procured" or "Planned")	Order #	# of Cartridges*	Location(s) (facility name and city/ province or TBD)	USG Funding Source (e.g., PEPFAR COP FYxx, USAID) <sup>1</sup>	Comments
Procured	1				
	2				
	3				
	4				
	5				
*There are 10 cartridges per kit, but we need the total # of <b>cartridges</b> (not kits) Add an additional row for every procurement order of cartridges					

Any additional information/clarifications to the above (optional)

Please provide a brief description of any significant problems encountered in use of the GeneXpert machine(s) and Xpert MTB/RIF cartridges

Please describe technical assistance or evaluation of implementation activities performed and planned.