



TB CARE I

TB CARE I - Kazakhstan

Year 4

Quarterly Report

October – December 2013

January 30, 2014

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1. Quarterly Overview

Country	Kazakhstan
Lead Partner	KNCV
Coalition Partners	N/A
Other Partners	NTP, PIU GF, QHCP, Dialogue
Workplan Timeframe	October 1, 2013 – December 31, 2014
Reporting Period	October – December 2013

Most Significant Achievements:

- The outpatient care model piloted in Akmola by TB CARE I received the support of NTP and MoH, and will be expanded at the national level. The revised MoH decree draft #218 (expected to be signed by the MoH in early 2014) also mandates the administration of outpatient care nationwide for the first time, using the admission criteria developed by TB CARE I for its outpatient care pilot in Akmola oblast for further scale-up countrywide (included in a new National TB Complex Plan for 2014-2020 that is expected to be approved by the MoH).
- GeneXpert received official registration in Kazakhstan in December 2013, which shall enable MOH to procure cartridges with government funding in the future.

Technical and Administrative Challenges:

- TB CARE I is still facing difficulties in accessing national TB database for its research projects; negotiations to resolve this issue are underway.
- Hiring the TB CARE I accountant took longer than expected which placed additional workload on financial staff this quarter. The accountant shall be hired in early January.

2. Year 4 Technical Outcomes and Activity Progress

2.1 Universal Access

Code	Outcome Indicators and Results	Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Results to Date ¹	Comments
1.2.11	<i>National policy document on outpatient care introduced at national level</i>	NO	National policy document on outpatient care introduced at the national level	No	The national policy document on outpatient care is under consideration of MOH
1.2.12	<p><i>Percent of (MDR) TB patients put on full outpatient care in Akmola and East Kazakhstan regions</i></p> <p>Numerator: Number of (MDR) TB patients put on outpatient care</p> <p>Denominator: Total number of (MDR) TB patients put on treatment</p>	<p>Akmola oblast – 82 patients put on full outpatient care for Jan-June 2013 (or 14% from all TB/MDR-TB);</p> <p>East Kazakhstan oblast – 0</p>	<p>Akmola oblast – 30%;</p> <p>East Kazakhstan oblast – 10%</p>	<p>Akmola region – Data of cohort analysis for 2013 (July-September): 23.3% (or 74) patients including MDR-TB put on outpatient care (from registered 318 patients)</p> <p>East Kazakhstan region (data for Semey and Oskemen cities) – Data of cohort analysis for 2013 (July-September): 21.2 % (or 67) patients including MDR-TB put on outpatient care (from registered 313 patients)</p>	<p>EKO reported this data for the first time under TB CARE I. No baseline data was available prior to this quarter.</p>
1.2.13.	<i>Percent of MDR TB patients in prisons put on SLD treatment</i>	60% in 2012	85% MDR TB patients having adequate treatment in Akmola,	Akmola region – 95% (42 MDR TB patient put on SLD treatment	

¹ If results are not available, write “Measured annually” or “Not yet measured” and say when the data are estimated to be available. Not all indicators can be measured quarterly.

	Numerator: Number of MDR TB patients in prisons put on SLD treatment Denominator: Total number of diagnosed MDR TB patients		East Kazakhstan and North Kazakhstan oblasts	out of 44 diagnosed MDR TB patients) EKO – 86,2% (94 of 109) NKO – 96% (32 of 33)		
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress as of End of Quarter	Planned Month		Status ²
				Start	End	
1.2.1.	KNCV	Introduction of the national policy document (new provisions of MOH order 218) on outpatient care at the national level	Since the approval of MoH order 218 has been postponed, and taking into account the newly developed national TB/MDR/XDR-TB complex plan for 2014 – 2020, the activity was redesigned into the national workshop on introduction of full outpatient care based on results of full outpatient care piloting in Akmola region. For the period of November 20-22, 2013, TB CARE I Regional Technical Officer Gulnara Kaliakbarova, with support of TB CARE I regional staff (Country Director for Kazakhstan/Regional Senior TB Advisor, Regional M&E Officer, Regional Technical Director and Regional IC Officer) and KNCV HQ Senior Epidemiologist and KNCV HQ HRD Consultant conducted a three-day workshop in Astana to gather key specialists from the MoH, NTP (central level and chief doctors from all TB dispensaries and Akmola region team (60 participants, 32 females, 28 males) to share Akmola region’s results of implementation of full outpatient care and identify next steps for enhancing outpatient care of TB/MDR-TB patients, expanding full outpatient care through the entire country. The MoH and NTP fully supported the pilot results. The newly developed National Strategic TB Plan for 2014-2020 will promote a scale-up of Akmola pilot	Nov 13	Feb 14	Completed

² Status options: Pending (the activity has not yet started, but is not delayed); Ongoing (the activity has started and is in process); Completed (all sub-activities and outputs are complete); Postponed (the start or completion of this activity has been delayed, but will still be completed by the end of the workplan year); Cancelled (the activity, which may or may not have started, will not be completed by TB CARE I.)

			<p>experiences to the entire country, which is already supported by the draft MoH's order 218, to be signed in early 2014.</p> <p>Output:</p> <ul style="list-style-type: none"> • Conducted a workshop in Astana to discuss comprehensive outpatient care and psychosocial support models that increase patients' commitment to treatment. • Developed a set of recommendations to expand the outpatient model of care throughout the entire country. 			
1.2.2.	KNCV	Monitoring and supervision visits to Akmola oblast to support administration of outpatient care across the Akmola oblast	<p>For the period of October 27 – November 2, 2013, Regional Technical Officer and Chief Doctor of Akmola region conducted monitoring and supervision visits across the Akmola oblast to support administration of outpatient care. As a next step, Akmola region started implementing full outpatient care at PHC facilities at district level. Mission findings and recommendations were developed and discussed with Akmola team.</p> <p>Next supervision and monitoring visit is planned for May 2014.</p> <p>Output:</p> <ul style="list-style-type: none"> • Supportive supervision visit conducted and set of recommendations on the implementation of outpatient care and provision of TB patient support (based on mission findings and results) developed. • Conducted on-the-job training on the provision of psychosocial patient support for those involved with providing patient support (psychologists, social workers and DOT nurses.) • Discussed with TB service managers were the data collected on outpatient care and patient support (actual collected data and 	Oct 13	Sep 14	Ongoing

			additional relevant data) in preparation for a workshop on lessons learned and to draft a protocol on operational research on outpatient care. Agreed to agenda and prepared outlines for presentations and discussion on the forthcoming national workshop on introduction of full outpatient care based on pilot experience of Akmola oblast.			
1.2.3.	KNCV	Training on outpatient care and patient support in Akmola oblast	Training on outpatient care and patient support in Akmola oblast is planned for March 2014	Feb 14	Apr 14	Pending
1.2.4.	KNCV	Training on outpatient care and patient support in East Kazakhstan oblast	Training on outpatient care and patient support in EKO preliminary is planned for March 2014.	Nov 13	Feb 14	Postponed till March 2014 (upon request from local partners)
1.2.5.	KNCV	Monitoring and supervision visits on outpatient care in East Kazakhstan oblast	<p>For the period of October 20-26, 2013, Regional Technical Officer and key specialists of East Kazakhstan region conducted monitoring and supervision visits across the oblast to asses practice on outpatient care, identify needs and capacity, support administration of outpatient care. Mission findings and recommendations have been developed and discussed with EKO team.</p> <p>Output:</p> <ul style="list-style-type: none"> • Supportive supervision visit and a set of recommendations on the implementation of outpatient care and provision of TB patient support (based on mission findings and results) developed. 	Jan 14	Sep 14	Completed
1.2.6.	KNCV	Coordination meeting with Prison Service on the implementation of TB control reorganization plan in prisons for 2012-2015	The agenda of the coordination meeting has been preliminarily discussed with NTP Deputy Director (Dr. Berikova). The transfer of prison health service from the Ministry of Justice to the Ministry of Health will be highlighted at this meeting in March.	Mar 14	Jun 14	Pending

1.2.7.	KNCV	Development of regulation (instruction) on clinical management of TB patients during transportation	In the previous discussion with NTP management team, it was agreed that the draft of the instruction document will be developed in March by the technical working group with involvement of representatives from NTP, Central Committee in Astana, and practitioners from pilot sites (Akmola, EKO and NKO). After distribution of the draft version to all services involved (SES, MoIA, convoy department), this document will be finalized at the following TWG meeting.	Mar 14	Jun 14	Pending
1.2.8.	KNCV	Training for convoy staff on personal IC prevention measures during transportation	The training for convoy staff was postponed to February due to busy schedule of convoy department at the end of year.	Nov 13	Jul 14	Postponed

Pictures

Workshop on Introduction of Full Outpatient Care in Astana, November 20-22, 2012



Photo 1.

From left to right: **Prof. Tleukhan Abildayev** (NTP Manager), **Dr. Gulnara Kulkayeva** (Deputy Director of Healthcare Service Organization Department of the MoH), **Michael S. Klecheski** (Deputy Chief of Mission, USAID/CAR, U.S. Embassy Astana), **Timur Bazikov** (TB CARE I in Central Asia)



Photo 2.

From left to right (Chief Doctors): **Dr. Nurlan Mukushev** (Almaty City TBD), **Dr. Noyan Bidabayev** (Karaganda OTBD), **Dr. Salavat Sarsembayev** (Almaty Region OTDB) and **Dr. Nassira Zhaksylykova** (Semei City Regional TBD, EKO)



Photo 3.

Dr. Malik Adenov, Chief Doctor of NTP



Photo 4.

From left to right: Dr. Aiman Temirkhanova (Chief Doctor of Akmol Region OTBD), Mrs. Lubov Rubezhanskaya (Director of Ray of Hope NGO in Akmol Region) and Dr. Tamilla Shayakhmetova (Head of Outpatient Care in Akmol Region OTBD)

2.2 Laboratories

Code	Outcome Indicators and Results		Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Results to Date	Comments
2.3.2	Rapid tests conducted		NRL - 1,400 Almaty - 1,350 EKO - 1,350 Akmola - 1,400	NRL - 1,920 Almaty - 1,920 EKO (Oskemen) - 1,440 Akmola - 1,920	NRL - 828 Almaty - 574 EKO (Oskemen) - 312 Akmola - 288	
2.3.3	Patients diagnosed with GeneXpert		TB NRL - 630 (45%) Almaty - 675 (50%) EKO - 620 (46%) Akmola - 560 (40%)	TB NRL - 922 (48%) Almaty - 1018 (53%) EKO - 691 (48%) Akmola - 864 (45%)	NRL - TB 317 (39%), RIF 130 (41%) Almaty - TB 100 (18%), RIF 54 (54%) EKO (Oskemen) - TB 110 (35,6%), RIF 54 (49%) Akmola - TB 122 (51%), RIF 59 (48%)	
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress as of the quarter's end	Planned Month		Status (pending, ongoing, completed, postponed, cancelled)
				Start	End	
2.3.1.	KNCV	Development of Xpert MTB/RIF maintenance plan	Upon the request of NTP, the Xpert maintenance plan will be developed next quarter after Cepheid training.	Oct 13	Nov 13	Postponed

2.3.2.	KNCV	Training in Xpert MTB/RIF maintenance and troubleshooting, planning and budgeting	Preparations for training have been started and the training will be conducted after finalization of Xpert MTB/RIF maintenance plan.	Dec 13	Mar 14	Pending
2.3.3.	KNCV	Supportive supervision and monitoring of Xpert MTB/RIF implementation in the country	One mission was conducted to Oskemen, EKO as part of USAID assessment mission on December 18-20, 2014. Mission was conducted by TB CARE I Country Director/Regional Senior TB Advisor and Regional Program Support Officer. Supervision visit planned in the Quarter 1 to Akmola postponed upon request of pilot site.	Oct 13	Sep 14	On-going
2.3.4.	KNCV	Meetings to review progress of Xpert MTB/RIF implementation in the project sites	N/A	Mar 14	Sep 14	Pending
2.3.5.	KNCV	Revision of the national Xpert MTB/RIF strategy	N/A	Jul 14	Sep 14	Pending
2.3.6.	KNCV	Refresher trainings on clinical aspects of Xpert MTB/RIF for clinicians of TB and PHC services in TB CARE I sites	Refresher trainings postponed to next quarter at the request of local partners.	Nov 13	Jun 14	Postponed
2.3.7.	KNCV	Trainings on clinical aspects of Xpert MTB/RIF testing for doctors and nurses from peripheral prisons	Preparation for training was started, but training will be conducted next quarter.	Oct 13	Jun 14	Ongoing
2.3.8.	KNCV	Delivery of Xpert cartridges to Xpert sites	Procurement of cartridges is pending because review of documents at the custom department took longer than expected.	Nov 13	Aug 14	Pending
2.3.9.	KNCV	Support to NTP to ensure sustainable operation of GX and supply of cartridges through state funds	The first meeting with the Xpert coordination body is planned for January 2014.	Nov 13	Sep 14	Pending

2.3 Infection Control

Code	Outcome Indicators and Results	Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Results to Date	Comments
3.1.1	National TB-IC guidelines that are in accordance with the WHO TB-IC policy have been approved	National TB IC guidelines approved	National TB IC guidelines introduced in all TB facilities of	No	Draft National TB IC guidelines are still on the phase of

			Akmola and EKO oblasts		finalization by NTP.	
3.1.2	TB-IC measures included in the overall national IPC policy	Revision of SES regulatory documents (such as SanPin, government order #309) initiated	SES regulatory documents (such as SanPin, government order# 309) revised and approved	No	SES regulatory documents (such as SanPin, government order# 309) revised and approved. TWG on SES regulatory documents is going to be conducted during summer 2014.	
3.2.1	"FAST" strategy has been adapted and adopted	FAST strategy included in the national TB IC guidelines	FAST strategy adopted and implemented at a TB facility level in project sites	No	The wording of the FAST strategy was included in National TB IC guidelines. Only two TB facilities in EKO and four TB facilities in Akmola (50%) are implementing FAST.	
3.2.2	Facilities implementing TB IC measures with TB CARE support	18 HCWs in EKO and 23 HCWs in Akmola oblast from TB service and SES were trained in TB IC risk assessment and facility IC plan development	12 TB facilities of Akmola and East Kazakhstan oblasts implementing IC measures with TB CARE I support	Five TB facilities in Akmola and two TB facilities in EKO are implementing TB IC measures with TB CARE support		
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress at End of Quarter	Planned Month		Status (pending, ongoing, completed, postponed, cancelled)
				Start	End	
3.1.1.	KNCV	Revision of SES national regulatory TB IC documents	Revision of SES national regulatory TB-IC documents is planned after approval of National TB-IC guidelines.	Oct 13	Sep 14	Pending
3.2.1.	KNCV	TB IC plans development in TB facilities of EKO and Akmola oblast	By mid-November 2013, the Regional IC Officer and representatives of EKO and Akmola TB dispensaries visited six TB facilities in the EKO and six TB facilities in the Akmola oblasts and facilitated the development of TB-IC activity plans during	Oct 13	Feb 14	Completed

			<p>on-the job trainings.</p> <p>Output:</p> <ul style="list-style-type: none"> • Supportive visits conducted on TB-IC activity plan development for TB facilities in East Kazakhstan and Akmola oblasts. • Supportive visits to selected PHC facilities. • Recommendations developed on TB-IC activity plans based on findings from supervision monitoring visits. 			
3.2.2.	KNCV	Supervision and monitoring of TB IC plans implementation in TB facilities of EKO and Akmola oblast	Supervision and monitoring visits on implementation of TB-IC are planned in June 2014	Jun 14	Sep 14	Pending

Pictures

Supportive Visits on TB-IC Plan Development to TB facilities in East Kazakhstan and Akmola oblasts, Kazakhstan

October 20 – November 3, 2013



Picture 1.
Measurements of air flow in a re-circulator in the TBD Zyryanovsk

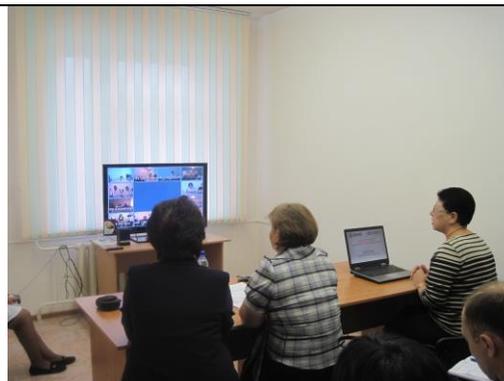


Picture 2.
Measurements with a UVC-meter in the TBD Zyryanovsk



Picture 3

Remote working session in the Akmola Oblast Health Care Department



Picture 4.

Remote working session in the Akmola Oblast Health Care Department

2.4 PMDT

Code	Outcome Indicators and Results		Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Results to Date		Comments
4.1.1	<i>Number of MDR TB patients put on SLD treatment</i> Numerator: Number of MDR TB patients put on SLD treatment Denominator: Total number of enrolled MDR TB patients		Akmola oblast – 85% (374/437) EKO – 87% (677/775)	Akmola oblast – 90% (396/440) EKO – 90% (702/780)			The data is not ready yet, so it will be available until the end of the month
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress as of Quarter's End	Planned Month		Status (pending, ongoing, completed, postponed, cancelled)	
				Start	End		
4.1.1.	KNCV	Development and submission to the national TB program the training modules on comprehensive, programmatic management of DR TB (utilizing cross cutting content)	The final draft module on comprehensive management of drug resistant TB was developed with assistance of KNCV HQ HRD Consultant. During the TOT training on November 24-29, 2013, this module was finally adjusted for its further use in practice in pilot sites.	Nov 13	Jan 14	Completed	
4.1.2.	KNCV	PMDT assessment visit in NKO	The program review was held in Northeast Kazakhstan oblast by a team of specialists consisting of TB CARE I, NTP, Prison and SES professionals November 5-8, 2013, to	Nov 13	Nov 13	Completed	

			<p>observe current TB (MDR-TB) situation in prison and general services.</p> <p>The main challenges were raised at the final meeting with key decision-makers of the oblast. It was agreed that progress on the recommendations will be checked by the Deputy Head of the oblast healthcare department; results will be discussed during the fourth quarter coordination meeting.</p> <p>Output:</p> <ul style="list-style-type: none"> • Assessment visits conducted to provide practical support and recommendations to local staff of general and prison health care services in the oblast. 			
4.1.3.	KNCV	Advanced TOT training on comprehensive programmatic management of DR TB	<p>The five-day training was held for healthcare professionals from prison and general health services (TB, HIV, SES), engaged in clinical management of DR-TB in their respective areas in Eastern Kazakhstan, Northeast Kazakhstan and Akmola oblast, as well as representatives from the National TB Centre. The event was aimed at preparing them to train local practitioners in clinical management of TB, TB-HIV and DR-TB in accordance with national PMDT guidelines. A total of 25 participants (7 males and 18 females) were involved in the training, with facilitation by TB CARE I staff (Country Director for Kazakhstan/ Regional Senior TB advisor, Regional Technical Officer and Regional IC Officer), and the KNCV HQ HRD Consultant. Specialists from the National TB Centre and pilot regions co-facilitated the TOT. Knowledge of the participants was evaluated before and after the course, increasing from 49% at pre-test to 82% at post-test.</p> <p>Output:</p> <ul style="list-style-type: none"> • National team of specialists from different services trained on 	Jan 14	Feb 14	Completed

			<p>comprehensive management of drug resistant TB</p> <ul style="list-style-type: none"> Practitioners from pilot regions introduced to the main approaches for management of drug resistant TB 			
4.1.4.	KNCV	Introduction of the national DR TB policy regulations (new DR TB guideline, revised MoH order 218) to TB care providers and SES in pilot sites	The newly adapted policy regulations on MDR TB will be introduced in the pilot sites in February 2014	Feb 14	Mar 14	Pending
4.1.5.	KNCV	Cross-country monitoring missions between the TB CARE I countries	The cross-country monitoring missions are planned in April 2014	Apr 14	May 14	Pending
4.1.6.	KNCV	Meeting at NTP to discuss the findings of the cross monitoring mission on the country level	This meeting will be conducted on the results of cross monitoring visits in pilot sites of the country	May 14	May 14	Pending
4.1.7.	KNCV	Supportive supervision and on-the-job training missions to NKO oblast to support PMDT implementers.	Supervision and on-the-job training are planned in June 2014 to support PMDT implementers	Jun 14	Jun 14	Pending

Pictures

Advanced ToT Training on Comprehensive Programmatic Management of Drug Resistant TB, Astana, November 25-29, 2013



Picture 1. Pre-testing of participants to evaluate the main job tasks to be trained



Picture 2. The epidemiologists from pilot site (EKO, NKO) develop the plan of the follow-up activities after the training at oblast level



Picture 3. Working group is finalizing the PMDT module for further use this at local level

2.6 HSS

Code	Outcome Indicators and Results		Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Result to date		Comments
6.2.2	People trained using TB CARE funds		6	6	Not yet measured		
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress as of End of Quarter	Planned Month		Status	
				Start	End		
6.2.1.	KNCV	Participation of partners in international conferences and trainings	TB CARE I sponsored participation of NTP Director Tleaukhan Abildayev at the 44 th Union World Conference on Lung Health in Paris for the period of October 30- November 3, 2013 to discuss the need to improve or preserve the quality of the air we breathe for both healthy and vulnerable persons alike.	Oct 13	Aug 14	On-going	

2.7 M&E, OR and Surveillance

Code	Outcome Indicators and Results	Actual Year 3 or Baseline Result	Expected End of Year 4 Result	Results to Date	Comments
7.3.2	OR study results disseminated	1	2	Measured annually	
7.1.2	Updated case definitions and M&E framework in the electronic surveillance system. Revise definitions and forms of	No	Yes	Measured annually	

	electronic surveillance system in accordance with latest recommendations of the WHO by September 2014						
7.1.2	<i>The percentage of penitentiary institutions with validated electronic data in a quarter</i> Numerator: Number of penitentiary institutions that register data and register error-free date, as checked by automatic data validation Denominator: Number of penitentiary institutions that use electronic register		0% (0) in June 2014	85% (29/35)	Not yet measured; data will start to be measured after next quarter		
7.2.3	<i>The percentage of oblast TB facilities using the national electronic M&E system for implementation of the National Strategic Plan.</i> Numerator: Number of TB facilities use national M&E indicators Denominator: Number of TB facilities		0% (0) in June 2014	100% (17/17)	Not yet measured; data will start to be measured after next quarter		
Activity Code (***)	Lead Partner	TB CARE Year 4 Planned Activities	Cumulative Progress as of End of Quarter	Planned Month		Status	
				Start	End		
7.1.1	KNCV	Development of reporting forms for the National TB Electronic Register			Jul 14	Sep 14	Pending
7.1.2	KNCV	Training on data collection for prison M&E specialists nationwide	Preparations for training were started, but training will be conducted in March 2014, at the request of local partners from Prison Service.		Dec 13	Dec 13	Postponed
7.1.3	KNCV	Supportive supervision to prison TB services to improve the quality of data collection			Feb 14	Aug 14	Pending
7.2.1	KNCV	Development of a special format for the set of National M&E indicators	A special format for the set of National M&E indicators is still under development and discussion with the specialists from NTP; it is expected to develop the set of M&E indicators in the third quarter of 2014.		Oct 13	Nov 13	Postponed
7.2.2	KNCV	Integration of the set of indicators in the software in the National Electronic Register	Integration of the set of indicators in the National Electronic Register was postponed because the set on National M&E indicators is under consideration of NTP.		Nov 13	Dec 13	Postponed

7.2.3	KNCV	Training in the use National Electronic Register and running performance reports		Feb 14	Mar 14	Pending
7.2.4	KNCV	National workshop to review results of reports and develop plans to address remaining gaps in performance		Mar 14	Apr 14	Pending
7.3.1	KNCV	Evaluation of implementation of outpatient treatment in Akmola oblast	Routine data collection is ongoing.	Nov 13	Sep 14	Ongoing
7.3.2.	KNCV	Evaluation of GeneXpert in Kazakhstan	Access to database of TB patients of Kazakhstan is under consideration of NTP.	Nov 13	Sep 14	Pending
7.3.3.		Publication of manuscripts of TB CARE I studies		Sep 14	Sep 14	Pending

1. TB CARE I's Support to Global Fund Implementation in Year 4

Current Global Fund TB Grants

Name (i.e. Round 10 TB)	Average Rating*	Current Rating	Total Approved Amount	Total Dispersed to Date
Round 8	B1	N/A	\$54,475,094	\$49,808,595
Round 6	B1	B1	\$8,612,252	\$ 8,612,252

* Since January 2010

In-country Global Fund Status - key updates, challenges and bottlenecks

Through Global Fund TB Program Round 8, National TB program received nine GeneXpert machines and 5,820 cartridges. One GeneXpert machine was installed at the laboratory of Regional TB Dispensary in Semey, EKO. All cartridges have been distributed to 13 Xpert sites, including four sites of TB CARE I. Proposal for NFM GF has been submitted to MoH for approval on December 25, 2013.

TB CARE I & Global Fund - TB CARE I involvement in GF support/implementation and effect of GF on the TB CARE I workplan

During the period of October-December 2013, TB CARE I technical staff participated in several TWGs and shared the ideas for the NFM concept note. NTP/PIU GF included M&E plan, developed with support of TB CARE I, included in the National Complex Plan 2016-2020. PIU used the results of TB CARE I project on implementation of GeneXpert in four pilots and experience of Akmola oblast on transition to outpatient care for the National Complex Plan and NFM proposal.

2. MDR-TB Cases Diagnosed and Started on Treatment

Quarter	Number of MDR Cases Diagnosed	Number of MDR Cases Put on Treatment	Comments
Total 2010	7336	5740	
Total 2011	7386	5311	
Total 2012	7608	6525	
Jan-Mar 2013	1500	1462	
Apr-Jun 2013	1972	1911	
Jul-Sep 2013	1837	1806	
Oct-Dec 2013	Not yet available	Not yet available	
Total 2013	5309	5179	

5. TB CARE I-supported International Visits (technical and management-related trips)

	Partner	Activity Code	Name	Purpose	Planned Month, Year	Status (pending, completed, postponed, cancelled)	Dates Completed	Additional Remarks (Optional)
1	KNCV	1.2.1.	Ieva Leimane	Introduction of the national policy document (new provisions of MOH order 218) on outpatient care at the national level	November 2013	Completed	November 19-22, 2013	
2	KNCV	1.2.3.	Ieva Leimane	Training on outpatient care and patient support in Akmola oblast	March 2014	Pending		
3	KNCV	1.2.4	Ieva Leimane	Training on outpatient care and patient support in East Kazakhstan oblast	November 2013	Postponed until March 2014		
4	KNCV	2.3.2.	Sanne van Kampen	Training in Xpert MTB/RIF maintenance and troubleshooting, planning and budgeting	March 2014	Pending		
5	KNCV	4.1.3.	Ieva Leimane	Advanced TOT training on comprehensive programmatic management of DR TB	November 2013	Completed	November 23-30, 2013	
6	KNCV	2.3.3.	Sanne van Kampen/Gulmira Kalmambetova	Supportive supervision and monitoring of Xpert MTB/RIF implementation in the country	May 2014	Pending		
7	KNCV	7.2.4.	Susan van den Hof	National workshop to review the results of reports and develop plans to address remaining gaps in performance	April 2014	Pending		
Total number of visits conducted (cumulative for fiscal year)						2		
Total number of visits planned in workplan						7		
Percent of planned international consultant visits conducted						29%		