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**TB CARE I**

# **TB CARE I - Djibouti**

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

**April 30, 2012**

## Quarterly Overview

<b>Reporting Country</b>	<b>Djibouti</b>
<b>Lead Partner</b>	<b>WHO</b>
<b>Collaborating Partners</b>	
<b>Date Report Sent</b>	
<b>From</b>	Ridha Jebeniani
<b>To</b>	Ahmed Mansour
<b>Reporting Period</b>	<b>January - March 2012</b>

<b>Technical Areas</b>	<b>% Completion</b>
1. Universal and Early Access	0%
2. Laboratories	50%
4. PMDT	25%
6. Health Systems Strengthening	38%
7. M&E, OR and Surveillance	75%
8. Drug supply and management	50%
<b>Overall work plan completion</b>	<b>40%</b>

### Most Significant Achievements

With TB CARE I technical assistance, technical documents of the World TB Day were developed (health education messages, slogan, technical material for the media, a brochure on TB, address of the Minister of Health, address of the WHO Representative, analysis of the TB epidemiological situation and TB control activities).

New TB treatment regimens in line with the new WHO guidelines were developed and were submitted for the approval of national stakeholders during a workshop organized by the NTP. While the workshop was organized by the MOH with funding from the World Bank, TB CARE I provided full technical assistance locally. The treatment revision was decided by the MOH upon recommendation from WHO/TB CARE I.

In coordination with FIND experts responsible for the introduction of new rapid diagnostic technologies in the National Reference Laboratory, namely LPA, liquid culture and Strip Speciation, TB CARE I initiated the procurement of the GeneXpert 4 module instrument and test cartridges.

### Overall work plan implementation status

Taking in consideration the fact that TB CARE I workplan became ready for use only after the start of the quarter, the overall workplan implementation is fair with more than half the planned money being used.

### Technical and administrative challenges

As a part of monitoring and evaluation activities, the feedback from the central level to the periphery was not systematically set and TB CARE I will work with the NTP to make this operational during the next few days.

### In-country Global Fund status and update

As part of the R10 negotiation phase the relevant technical documents, developed with locally based TB CARE I technical assistance, were sent by the PR (FHI360) to the GF for review after approval by the CCM.

## 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
		Data	Year	Data	Year			
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.x Central Team maintained with up to date NTP Manager, one Programm Assistant, one M&E Officer, two DOTS supervisors, one lab supervisor and international technical assistance Description: Central Team maintained with up to date NTP Manager and international technical assistance. Indicator Value: Yes/No Level: Central Source: NTP records.	Yes	2011	Yes	2012		The Central Team is functioning with a new NTP manager, appointed in December, one Program Assistant, one M&E Officer, two DOTS supervisors, one lab supervisor and international technical assistance provided by TB CARE I.	The NTP Manager is expected to attend the UNION conference in next November (Mrs Hawa Guessod, hawahassangue@yahoo.fr).

Technical Area 2. Laboratories								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
		Data	Year	Data	Year			
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	1	2011	(GeneXpert will be introduced by TB CARE I while TB culture, first line DST and Hain will be introduced by FIND; LED microscopy being already present at the baseline)	2012		After the technical specifications have been identified and the diagnostic algorithm developed, the procurement of the 4 module GeneXpert instrument with laptop and 2060 cartridges has been initiated with money from TB CARE I as per plan of action. This was done through TBREACH as part of the arrangement procurement using GDF and the arrangements with Cepheid. A product request form has been sent to TBREACH with the required information about the procurement.	In order to avoid losses that might arise from relatively short shelf life, the procurement of test cartridges will be done in three instalments: <ul style="list-style-type: none"> <li>800 in the first instalment now</li> <li>800 cartridges in the second instalment after 4 months</li> <li>460 in the third instalment after 8 months.</li> </ul>

Technical Area 4. PMDT		Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Data	Year	Data	Year	Y1		
4.1 Improved treatment success of MDR	<p>4.1.x Percentage of MDR TB patients enrolled on second line treatment according to the national protocol</p> <p>Description:</p> <p>Indicator Value: percentage</p> <p>Level: National</p> <p>Source: MDR recording and reporting system</p> <p>Means of Verification: regular supervision</p> <p>Numerator: number of MDR TB patients enrolled on second line treatment according to the national protocol among those diagnosed</p> <p>Denominator: Number of MDR TB patients diagnosed</p>	0/8=0%	2010	100%	2012		<p>Some preparatory work was done during the quarter before the training scheduled in Q4 2012 through TB CARE I funds.</p> <p>The preparatory work involved TB CARE I local technical assistance with the technical support of The Union with Dr Ignacio Monedero, UNION expert, conducting a mission in Djibouti during which guidelines on programmatic management of MDR TB together with standard MDR treatment regimens have been developed after consultation with relevant national stakeholders.</p> <p>This will be the technical material used for the TB CARE I training on programmatic management of MDR TB.</p>	The relevant TB CARE I activities are scheduled for Q4 2012

Technical Area 6. Health Systems Strengthening		Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Data	Year	Data	Year	Y1		

<p>6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&amp;E) formed integral part of national plans, strategies and service delivery of these components</p>	<p>6.2.1 Supervisory visits conducted according to country supervisory standards Indicator Value: Percent Numerator: Number of annual supervisory visits conducted disaggregated by three levels. Denominator: Number of annual supervisory visits planned disaggregated by three levels.</p>	<p>National: 120/140= 86%</p>	<p>2010</p>	<p>National:140 /140=100%</p>	<p>2012</p>	<p>After TB CARE I funds have been made available, the NTP was asked to develop a supervision schedule in the capital and the districts. It was decided not to hand over the entirety of funds to the MOH as part of an agreement with WHO but to pay directly supervision teams upon completion of each visit and establishment of the relevant supervision report.</p> <p>As per the schedule developed by the NTP the supervision activities funded by TB CARE I will start on next month, knowing that during the previous quarter the NTP carried out supervision visits on other financial sources. Although these visits are not tied to TB CARE I they are included in the related TB CARE I performance indicator.</p>	<p>The direct oversight by WHO as described in the highlights cell will guarantee more quality to the supervision visits with the use of the TBCAP developed supervision guide and TB CARE I technical assistance.</p>
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Technical Area 7. M&E, OR and Surveillance		Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Data	Year	Data	Year	Y1		
7.2 Improved capacity of NTPs to analyze and use quality data for management of the TB program	7.2.2 NTP provides regular feedback from central to lower levels Indicator Value: Percent per quarter Numerator: Number of quarterly feedback reports prepared and disseminated disaggregated by three levels. Denominator: Total number of recipient units/facilities at each level	0/16=0%	2010	16/16=100%	2012		<p>The World TB Day was an occasion to take stock of the TB situation in the country as well as TB control activities undertaken so far. The need was perceived to analyze trends at national level and compare the epidemiologic situation among districts in 2011. The graphs are displayed in the photo album sheet.</p> <p>Moreover the feed back to lower levels has been perceived as still weak and the decision was taken to send the 2011 annual analysis to all districts focusing on their results compared with the national level and other districts. The exercise will also concern Q1 of the calendar year 2012 and so on for the next quarters.</p>	<p>The 2011 annual analysis will be sent to all districts focusing on their results compared with the national level and other districts. Starting Q1 of the calendar year 2012, every district will receive a quarterly report highlighting achievements and challenges. The reports will be developed by the NTP with the technical assistance from TB CARE I.</p>

Technical Area 8. Drug supply and management		Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Data	Year	Data	Year	Y1		

<p>8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs</p>	<p>8.1.4 Quarterly quantification and order based on the epidemiological method implemented by all DOTS centres  Indicator Value: Number and percentage  Level: National  Source: NTP records  Means of Verification: NTP Central Pharmacy records  Numerator: Number of DOTS centres performing quarterly quantification and order based on the epidemiological method  Denominator: Total number of DOTS centres</p>	<p>0/15=0%</p>	<p>2010</p>	<p>15/15=100%</p>	<p>2012</p>		<p>After the one week training on M&amp;E and the recording and reporting system (including quarterly drug order form and the GDF drug calculation sheet) was held during the previous quarter with the participation of DOTS personnel and doctors, the dedicated training as part of TB CARE I workplan was scheduled for Q3.</p>	<p>After TB CARE I funds have been made available the dedicated training on the use of the NTP quarterly drug order form was scheduled for Q3.</p>
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## Quarterly Activity Plan Report

1. Universal and Early Access			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.1.1	Participation of the NTP Manager in an international conference on TB	WHO	5.277	0%	Sept	2012	Planned for The Union Conference; will take place in Kuala Lumpur from 13 to 17 November 2012.
					0%			

2. Laboratories			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans	2.3.1	Purchase of one 4-module instrument for GeneXpert	WHO	22.600	75%	Jan	2012	All technical, financial and administrative steps have been completed and the final step will be the shipment of the 4 module instrument to the country.
	2.3.2	Purchase of cartridges for GeneXpert	WHO	46.556	75%	Jan	2012	The procurement has been done in tandem with the GeneXpert instrument and the final step will be the shipment of the test cartridges to the country.
	2.3.3	Technical assistance for the introduction of GeneXpert including training	WHO	8.475	25%	Jan	2012	After the development of the diagnostic algorithm, the process of identifying the relevant consultant has been initiated with the STB unit of the WHO Regional Office.
	2.3.4	Training of NRL staff on GeneXpert	WHO	407	25%	Jan	2012	The diagnostic algorithm is already developed and TB CARE I Djibouti is identifying the relevant consultant for the training in coordination with the STB unit of the WHO Regional Office.

	<b>2.3.5</b>	Complementary equipment for GeneXpert	WHO	661	75%	Jan	2012	The technical specifications have been identified, the tender process has been completed and the purchase order has been initiated in the WHO GSM system.
	<b>2.3.6</b>	Refrigerator for GeneXpert	WHO	2.260	25%	Jan	2012	The tender process is underway.
					50%			

<b>4. PMDT</b>			<b>Activity Leader</b>	<b>Approved Budget</b>	<b>Cumulative Completion</b>	<b>Planned Completion</b>		<b>Cumulative Progress and Deliverables up-to-date</b>
<b>Outcome</b>	<b>Activity #</b>	<b>Activity</b>				<b>Month</b>	<b>Year</b>	
4.1 Improved treatment success of MDR	<b>4.1.1</b>	Technical assistance for training on MDR case management	WHO	8.475	25%	July-Sept	2012	With technical assistance from TB CARE I, Dr Ignacio Monedero, UNION expert, conducted a mission in Djibouti during which guidelines on programmatic management of MDR TB together with standard MDR treatment regimens have been developed after consultation with relevant national stakeholders.
	<b>4.1.2</b>	Training on MDR case management	WHO	2.441	25%	July-Sept	2012	The technical material for the training, namely guidelines on programmatic management of MDR TB and standard MDR treatment regimens, has been developed after consultation with relevant national stakeholders. This material will be the basis for the training.
					25%			

<b>6. Health Systems Strengthening</b>			<b>Activity Leader</b>	<b>Approved Budget</b>	<b>Cumulative Completion</b>	<b>Planned Completion</b>		<b>Cumulative Progress and Deliverables up-to-date</b>
<b>Outcome</b>	<b>Activity #</b>	<b>Activity</b>				<b>Month</b>	<b>Year</b>	
6.2 TB control components	<b>6.2.1</b>	Supervision in the capital	WHO	2.915	50%	DOTS Ce	2012	The supervision activities in the capital have been carried out on a regular basis as scheduled for the last two quarters.

(drug supply and management , laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components	<b>6.2.2</b>	Supervision in the districts by the Central Team	WHO	13.180	25%	h of the f	2012	The supervision activities in the districts have been fully implemented during the previous quarter, the NTP using World Bank funds, after the challenges resulting from the lack of funds experienced during the first quarter.
					38%			

<b>7. M&amp;E, OR and Surveillance</b>			<b>Activity Leader</b>	<b>Approved Budget</b>	<b>Cumulative Completion</b>	<b>Planned Completion</b>		<b>Cumulative Progress and Deliverables up-to-date</b>
<b>Outcome</b>	<b>Activity #</b>	<b>Activity</b>				<b>Month</b>	<b>Year</b>	
7.2 Improved capacity of NTPs to analyze and use quality data for management of the TB program	<b>7.2.1</b>	Desktop computers	WHO	7.571	75%	Apr	2012	The computers will be locally purchased after the technical specifications have been identified, the tender process has been completed and the purchase order has been initiated in the WHO GSM system.
	<b>7.2.2</b>	Laptop PC	WHO	2.260	75%	Apr	2012	The same procedures as per the desktop computers were followed and the final step is to get the laptop from the local supplier identified through the tender process.
					75%			

8. Drug supply and management			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs	8.1.1	Training of DOTS personnel on the use of the NTP quarterly drug order form	WHO	4.882	 50%	Jun	2012	A one week training on M&E and the recording and reporting system (including quarterly drug order form and the GDF drug calculation sheet) was held in with the participation of DOTS personnel and doctors. The workshop was financed by WHO regular budget. The involvement of TB CARE I was through local technical assistance, used for preparation and contribution to the facilitation of the workshop. After TB CARE I funds have been made available the dedicated training on the use of the NTP quarterly drug order form was scheduled for Q3.
					 50%			

## Quarterly MDR-TB Report

Country	Djibouti
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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	8	8
Jan-Sep 2011		
Oct-Dec 2011		
Total 2011	73	12
Jan-March 2012	to be added	

## Quarterly GeneXpert Report

Country	Djibouti
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Period	January-March 2012
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**Table 1: GeneXpert instruments and cartridges procured or planned by quarter**

	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	1	mei-12
# Cartridges	0	0	0	2060	Starting May 2012 with

**Table 2: Cumulative List of GeneXpert Instruments Procured to Date or Planned in the Next Quarter**

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
Planned	1	4	NRL	USAID	WHO
	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**

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
Planned	1	2060	NRL	USAID	
	2				
	3				
	4				
	5				

\*There are 10 cartridges per kit, but we need the total # of **cartridges** (not kits)  
Add an additional row for every procurement order of cartridges

Any additional information/clarifications to the above (optional)

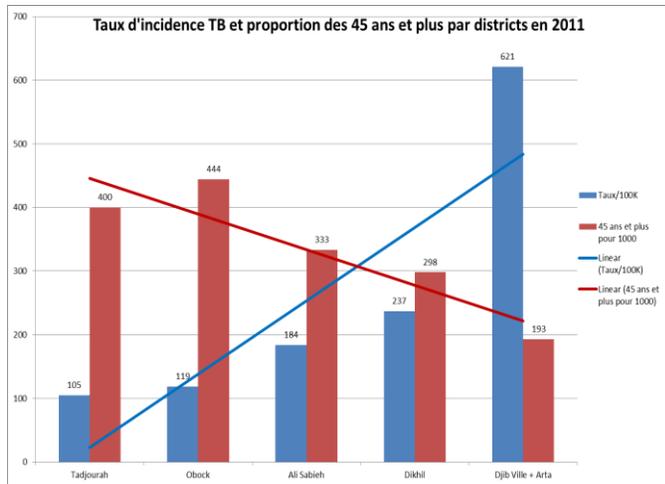
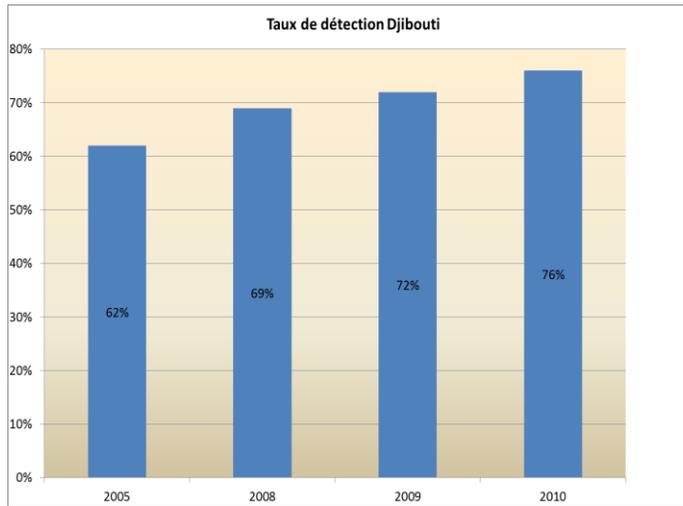
Information is provided in the relevant sections in the Technical Outcome Report.

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.

Technical assistance for training of NRL staff on GeneXpert is planned.

## Quarterly Photos (as well as tables, charts and other relevant materials)



**Pourcentage des nouveaux cas de tuberculose pulmonaire à microscopie positive qui ont plus de 44 ans**

