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TB CARE I

TB CARE I - Djibouti

**Year 2
Quarterly Report
October-December 2012**

January 30, 2013

Quarterly Overview

Reporting Country	Djibouti
Lead Partner	WHO
Collaborating Partners	
Date Report Sent	
From	Ridha Jebeniani
To	Ahmed Mansour
Reporting Period	October-December 2012

Technical Areas	% Completion
1. Universal and Early Access	100%
2. Laboratories	100%
4. PMDT	100%
6. Health Systems Strengthening	88%
7. M&E, OR and Surveillance	100%
8. Drug supply and management	100%
Overall work plan completion	98%

Most Significant Achievements

During this quarter a TB expert from the Union has been recruited as part of an agreement WHO/UNION to finalize in French the national guidelines on programmatic management of MDR TB. As per the contract with the Union the deliverable "final draft of the guide to be validated by national stakeholders" is due on 10 January 2013.

The consultant also conducted the training of doctors (all the five doctors in addition to staff from the Central Unit and the dean of the medical school bringing the total to 13 persons) from the TB National Reference Center on programmatic management of MDR TB. The training was an opportunity to remind doctors about the MDR regimens endorsed at national level and on side effects and their management, and to focus on critical requirements for quality PMDT:

- Importance of preventing MDR by tackling the issue of default among patients with sensitive TB
- Knowledge of the scientific evidence behind the choice of treatment regimens
- Importance of a good DOT and making sure that the whole amount of drugs is available for an individual patient before starting the treatment.
- Good infection control
- Collective decision by a panel of doctors for the treatment of patients with MDR.

Overall work plan implementation status

This quarter was the final one after the end of the fiscal year and the main focus was on close out of the project.

Technical and administrative challenges

The challenge is anticipated as per the Global Fund section below.

In-country Global Fund status and update

The GF R10 grant signature has yet again been postponed with the implementation due to start on 1st March 2013 instead of 1st January 2013, putting a threat to the sustainability of the gains from TBCAP/TB CARE I.

Quarterly Technical Outcome Report

Technical Area		1. Universal and Early Access							
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target	
		Data	Year	Data	Year	Y2			
1.2 Increased quality of TB services delivered among all care providers (Supply)	<p>1.2.x Central Team maintained with up to date NTP Manager, one Program Assistant, one M&E Officer, two DOTS supervisors, one lab supervisor and international technical assistance</p> <p>Description: Central Team maintained with up to date NTP Manager and international technical assistance.</p> <p>Indicator Value: Yes/No</p> <p>Level: Central</p> <p>Source: NTP records.</p> <p>Means of Verification: WHO reports</p>	Yes	2011	Yes	2012	YES	The NTP Central Team is fully functional and composed as planned of the NTP Manager, one Program Assistant, one M&E Officer, two DOTS supervisors, and one lab supervisor. TB CARE international technical assistance has been provided to the central team. The supervisions were conducted on a regular basis according to schedule by the Central Team. The NTP Manager attended the UNION conference in November.		

Technical Area	2. Laboratories						Highlights of the Quarter	Challenges and Next Steps to Reach the Target	
	Expected Outcomes	Outcome Indicators	Baseline		Target				Result
			Data	Year	Data	Year			Y2
2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans	<p>2.3.1 New technologies have been introduced</p> <p>Indicator Value: Number for each technique below by Central, Provincial, district and Peripheral levels</p> <ol style="list-style-type: none"> 1. TB culture 2. First line DST 3. Second-line DST 4. HAIN MTBDRplus 5. GeneXpert 6. LED microscopy 	1	2011	5 (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). The target related to new technologies introduced is cumulative and reflects the output generated by TB CARE I and other donors.	2012	5	A 5-day training for setting up and using the GeneXpert device (only one is available in Djibouti as planned) conducted by an expert from Cepheid was held in July 2012. GeneXpert tests have been performed without problem since the end of July and through the period from October to December 2012;		

Technical Area		4. PMDT					Highlights of the Quarter	Challenges and Next Steps to Reach the Target
Expected Outcomes	Outcome Indicators	Baseline		Target		Result		
		Data	Year	Data	Year	Y2		
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	37%	<p>The national guidelines on programmatic management of MDR TB are being finalized in French by a TB expert from the Union, who has been recruited as part of an agreement WHO/UNION.</p> <p>The TB expert also conducted the training of doctors (all the five doctors in addition to staff from the Central Unit and the dean of the medical school) from the TB National Reference Center on programmatic management of MDR TB</p> <p>The NTP will develop an MDR strategic plan embedded in the NSPs based on the newly endorsed national guidelines for Programmatic Management of MDR TB developed with TB CARE I technical assistance.</p> <ul style="list-style-type: none"> - The health authorities should materialize their pledge to contribute through the national budget to the purchase of second line drugs while negotiating with the GF to make available the funding as quickly as possible as part of the GF R10 grant, which is due to be signed by the start of the next year. - It will make much more sense to prevent MDR by tackling the long lasting issue of patients lost to follow up especially in the National TB Reference Center. As all technical elements of this intervention have been repeatedly stated, the only way to break the deadlock is through an even stronger political will. 	

Technical Area		6. Health Systems Strengthening					Highlights of the Quarter	Challenges and Next Steps to Reach the Target
Expected Outcomes	Outcome Indicators	Baseline		Target		Result		
		Data	Year	Data	Year	Y2		
6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components	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.	National: 120/140= 86%	2010	National:140 /140=100%	2012	135/140= 96%	The supervisions were carried out using the TB CAP developed supervision guide and checklist.	

Technical Area		7. M&E, OR and Surveillance					Highlights of the Quarter	Challenges and Next Steps to Reach the Target
Expected Outcomes	Outcome Indicators	Baseline		Target		Result		
		Data	Year	Data	Year	Y2		
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	=16/16=100%	No related activities conducted during close out. See annual report for Year 2 results.	

Technical Area		8. Drug supply and management					Highlights of the Quarter	Challenges and Next Steps to Reach the Target
Expected Outcomes	Outcome Indicators	Baseline		Target		Result		
		Data	Year	Data	Year	Y2		
8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs	8.1.4 Quarterly quantification and order based on the epidemiological method implemented by all DOTS centers Indicator Value: Number and percentage Level: National Source: NTP records Means of Verification: NTP Central Pharmacy records Numerator: Number of DOTS centers performing quarterly quantification and order based on the epidemiological method Denominator: Total number of DOTS centers	0/15=0%	2010	15/15=100%	2012	15/15=100%	No related activities conducted during close out. See annual report for Year 2 results.	

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	100%	Sept	2012	The NTP Manager attended the UNION conference in November.

100%

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	100%	Jan	2012	The 4 module GeneXpert instrument was procured.
	2.3.2	Purchase of cartridges for GeneXpert	WHO	46.556	100%	Jan	2012	800 cartridges were procured as part of the first installment of the total 2060 cartridges ordered. Savings will be considered for funding the purchase of more cartridges.

	2.3.3	Technical assistance for the introduction of GeneXpert including training	WHO	8.475	 100%	Jan	2012	A 5-day training for setting up and using the GeneXpert instrument by Cepheid was held from 16-20 July 2012. The training was conducted on the web with the participation of all staff from the NRL (5 technicians including one female).
	2.3.4	Training of NRL staff on GeneXpert	WHO	407	 100%	Jan	2012	As shown above, the training of the NRL was conducted on the web by CEPHEID. A training of doctors on the use of the TB CARE I developed algorithm based on GeneXpert was conducted in July 2012 with the involvement of TB CARE I local technical assistance and the National TB Reference Hospital in the facilitation.
	2.3.5	Complementary equipment for GeneXpert	WHO	661	 100%	Jan	2012	The equipment was procured.
	2.3.6	Refrigerator for GeneXpert	WHO	2.260	 100%	Jan	2012	The refrigerator was procured.
					 100%			

4. PMDT			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
4.1 Improved treatment success of MDR	4.1.1	Technical assistance for training on MDR case management	WHO	8.475	100%	July-Sept	2012	A TB expert from the Union has been recruited as part of an agreement WHO/UNION to finalize in French the national guidelines on programmatic management of MDR TB and to train 13 doctors (all five doctors in addition to staff from the Central Unit and the dean of the medical school; 6 were female) from the TB National Reference Center on programmatic management of MDR TB. As per the contract with the Union the deliverable "final draft of the guide to be validated by national stakeholders" is due on 10 January 2013.
	4.1.2	Training on MDR case management	WHO	2.441	100%	July-Sept	2012	The training has been conducted.
					100%			

6. Health Systems Strengthening			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components	6.2.1	Supervision in the capital	WHO	2.915	100%	Monthly for each DOTS Centre	2012	The supervision activities in the capital have been carried out on a regular basis (monthly in the capital and quarterly in the districts for every DOTS structure) as scheduled during the whole APA2 term.
	6.2.2	Supervision in the districts by the Central Team	WHO	13.180	75%	Quarterly for each of the five rural	2012	The supervision activities in the districts (supervisory visits to the DOTS structures in the districts) have been fully implemented during the three last quarters, after the challenges resulting from the lack of funds experienced during the first quarter. During the first quarter only supervision in the capital took place.
					88%			

7. M&E, OR and Surveillance			Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
7.2 Improved capacity of NTPs to analyze and	7.2.1	Desktop computers	WHO	7.571	100%	Apr	2012	The three computers were procured
	7.2.2	Laptop PC	WHO	2.260	100%	Apr	2012	The laptop PC was procured
					100%			

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	100%	Jun	2012	The cumulative progress consisted of the training on drug management for DOTS personnel on charge of TB drugs took place on 4 and 5 August 2012.
					100%			

Quarterly MDR-TB Report

Country	Djibouti
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Period	October-December 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
Total 2011	73	12
Jan-Mar 2012		
Apr-Jun 2012	41	16
Jul-Sep 2012	30	10
Oct-Dec 2012		
Total 2012	71	26

CUMULATIVE DATA FROM 1st January 2012. By sex: 23M and 18F

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

MDR training 18-19 December 2012











