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TB CARE I

TB CARE I - Ethiopia

**Year 2
Quarterly Report
October-December 2011**

January 30, 2012

Quarterly Overview

Reporting Country	Ethiopia
Lead Partner	KNCV
Collaborating Partners	MSH, WHO
Date Report Sent	30/01/2012
From	Ezra Shimelis, Country Director
To	Yared Kebede & Helina Worku
Reporting Period	October-December 2011

Technical Areas	% Completion
1. Universal and Early Access	4%
2. Laboratories	7%
3. Infection Control	18%
4. PMDT	17%
5. TB/HIV	8%
6. Health Systems Strengthening	16%
7. M&E, OR and Surveillance	36%
8. Drug supply and management	2%
Overall work plan completion	13%

Most Significant Achievements

The 3rd MDR TB Treatment Unit started service at ALERT Center.

A Multi Drug Resistant Tuberculosis (MDR-TB) treatment unit renovated at ALERT center started service on 28th of November 2011. USAID through TBCAP/TB CARE I Ethiopia has covered the cost of renovation, medical supplies, furnishing equipment and capacity building activities. As of December 31, 2011, a total of 13(M=9;& F=4) MDR TB patients who had been in a waiting list are admitted for treatment. This 28 bedded MDR unit has a capacity to provide in-patient service for about 300 MDR TB patients annually.

Regional Laboratory experts trained on TB Culture.

TB CARE I in collaboration with EHNRI organized and conducted 15 days training on Tuberculosis culture to strengthen the five Regional laboratories. A total of 14(M=10;F=4) laboratory experts attended the training. The training will enable the regional laboratories to start the long awaited TB culture services and this inturn will strengthen the diagnostic capacity of MDR in the country. In effect, it will upgrade the rate of MDR TB patient enrolment improving access to Second line treatment.

Pannel Discussion on TB Prevention

A panel discussion was held on TB prevention under the theme of “Simple Precaution saves lives” on Dec. 3, 2011 organized by TB Media forum in collaboration with TB CARE I. The discussion was attended by 80 (M=66 & F=14) participants from faith-based organizations, educational institutes, prisons and government & private media organizations. Participants are expected to use their communication skills to convey the intended messages regarding TB to the community using mini Medias at the school and public /religious gathering places. TB CARE I will continue supporting the organizations by providing the necessary technical assistance and TB IEC materials.

Visible Changes on TB IC

A three days training on TB IC provided for 34(M=26;F=8) Health care providers working in 13 health centers in Addis Ababa, Sep. 1-3/2011. A follow up visit which was conducted after three months of the training has shown that 95% of the health centers established/strengthened TB IC committee. Nearly all the health centers also developed TB IC plan with budget and also assigned a focal person to oversee the overall TB IC activity. Additionally, 90 % of the health centers strengthened triage system, including cough triage and almost all of them significantly reduced TB suspect OPD waiting time. Notably, eight of the 13 health centers undergone visible renovations (both minor & major) in TB room, waiting area, maternity ward, & ART units by their own budget that undoubtedly will bring major impact in reducing nosocomial TB transmission. After the performance assessment during a one day follow up workshop in December 2011, TB CARE I in collaboration with the Health Bureau awarded three best performers, which demonstrate major changes in TB IC.

TB CARE I awarded Certificate of Appreciation

A ten day training on methods of Epidemiology for Operational research and ethics was provided for 15(M=13 ; F=2) participants from regions and the Federal Ministry of Health. The main objective of the training was to capacitate TB program managers,health professionals and academicians with a skills of proposal development to enable conduct research on the area of TB, HIV, TBHIV and other related health issues. TB CARE I Ethiopia provided technical assistance and fully sponsored this training for whichit was awarded a certificate of appreciation. (certificate on Phto Album) It is rememebered that this is the fourth round of OR training supported by TB CARE/TB CAP since 2009.

Overall work plan implementation status

The overall plan accomplishment showed that 13 % of the planned activities have been implemented in the first quarter of APA2.

Technical and administrative challenges

No major challenges in the quarter.

In-country Global Fund status and update

Ethiopia has been granted three rounds of Global Fund in recent years which include round 6, 9, and 10. The support during round 6 was mainly for procurement of anti TB drugs, human resource development, renovation and procurement of second line drug for nearly 1200 patients. Round 9 grant was only for Health system strengthening activities. whereas, round 10 was for disease control activities including programmatic management of MDR TB and the grant agreement was signed and budget is expected to be released soon. The overall budget allocated for SLD is below the demand to tackle the burden of the disease, therefore, the TB program has to rely on partners support especially for procurement of second line drugs in the years to come. There was an intention to apply for Round 11 though it could have been less probable. The recent decision of GFATM will have a significant impact on the continuity of sensitive programs like PMDT, apart from its major consequence on the overall TB program.

Quarterly Technical Outcome Report

Technical Area		1. Universal and Early Access					Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Baseline		Target					
		Data	Year	Data	Year				
1.1 Increased demand for and use of high quality TB services and improve the satisfaction with the services provided (Population/Patient Centered Approach)	1.1.3 Patients' Charter is implemented Indicator Value: Score (0-3) based on definition	0	2011	1	2012		Planned for next Quarter		
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.	1	2011	2	2012		Discussion underway with NTP and will continue supporting Community DOT at national level.	Challenges: Unable to complete first quarter activities because of delayed approval of year 2 plan	
1.3 Reduced patient and service delivery delays (Timing)	1.3.2 Provider Delay Indicator Value: Number (of days or weeks)	4 Wks	2011	2 Wk	2012		Management of pediatric TB included in the national TB guideline revision workshop, capacity building activity will continue to the health care providers in order to reduced provider delay to diagnose childhood TB.		

Technical Area		2. Laboratories					Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Baseline		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	450/1596 =28% (for a) 0(for b,C & d)	2011	50% 5/5(100%)	2012		A 10 day training on TB culture and identification provided for 14(M=10 F=4) laboratory personnel in two rounds. This training will support the Regional laboratories to start the long awaited TB culture services and this in turn will strengthen the diagnostic capacity of the country.		

Technical Area 3. Infection Control		Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
Expected Outcomes	Outcome Indicators	Data	Year	Data	Year	Y1		
3.2 Scaled-up implementation of TB-IC strategies	3.2.2 Key facilities with IC focal person, implementation plan, budget, and monitoring system Indicator Value: Percent Numerator: The number of selected categories of key facilities with all three (a+b+c) interventions in place. Denominator: Total number of key	=16/50	2011	60/90	2012		planned for the next quarter	
3.4 Improved TB-IC human resources	3.4.1 A team of trained trainers in TB IC is available Indicator Value: Yes/No	Yes	2011	Yes	2012		planned for the next quarter	
3.3 Strengthened TB-IC monitoring & measurement	3.3.1 Annual reporting on TB disease (all forms) among HCWs is available as part of the national R&R system Indicator Value: Yes/No	NA	2011	Yes	2012		Draft tool developed to capture data from region/s and rapid assessment will be conducted in January 2011.	Challenges: It will be difficult to get information on TB among health care workers, as there is no column for TB among health care workers in the TB Register. Next Step: data from selected region/s will be collected and analyzed using the tool developed by TB CARE I and the information will be shared to MoH.

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 TB	4.1.1 Number of MDR cases put on treatment Description: number of MDR cases put on treatment funded by USAID Indicator Value: Number Level: national Source: MDR treatment register Means of Verification: field visits (national and TBCARE project sites), checking MDR treatment registers with reports Numerator: The number of MDR patients put on treatment disaggregated by gender and type of patient (new or previously treated) Denominator:	150	2011	300	2012	158	A total of 75(M=44;F=31) MDR TB patients put on treatment nationally in the first Quarter. Eight of them were put on treatment with the drug procured using USAID funds, which makes a cumulative number of 158 patients put on treatment using USAID funds.	
	4.1.2 MDR TB patients who are still on treatment and have a sputum culture conversion 6 months after starting MDR-TB treatment Indicator Value: Percent Numerator: Number of MDR TB patients in a cohort who are still on treatment and had culture conversion latest at month 6 (having had 2 negative sputum cultures taken one month apart and remained culture negative since) Denominator: Total number of MDR patients who started treatment in the cohort.	= 31/85	2011	55%	2012			Challenges: National reporting system for MDR TB not well established. Reported using the facility based data. Next Step: Planned to discuss the issue with the national Health management information system(HMIS) unit.

Technical Area	5. TB/HIV								
	Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
			Data	Year	Data	Year			
5.1 Strengthened prevention of TB/HIV co-infection	5.1.1 New HIV patients treated for latent TB infection during reporting period Indicator Value: Percent Numerator: Total number of newly-diagnosed HIV-positive clients in whom active TB has been excluded who start (given at least one dose) treatment of latent TB infection. Denominator: Total number of newly diagnosed HIV-positive clients.	= 21%(6636/31650)	2010	80%	2015		Discussion underway with the NTP & HMIS team on how to address data Quality issue on TB & TB/HIV indicators.	Challenges: MoH didn't get first quarter data from the Regions. Next Steps: plan to address the data quality issues during data quality training for TB coordinators of the region and will continue of working closely with MoH to get the data on time	
5.2 Improved diagnosis of TB/HIV co-infection	5.2.1 HIV-positive patients who were screened for TB in HIV care or treatment settings Indicator Value: Percent Numerator: Number of HIV-positive patients seen at HIV testing and counseling or HIV treatment and care services who were screened for TB symptoms, over a given time period. Denominator: Total number of HIV-positive patients seen at HIV testing and counseling or HIV treatment and care services, over the same given	=79% (43837/55350)	2010	100%	2015		Discussion underway with the NTP & HMIS team on how to address data Quality issue on TB & TB/HIV indicators.	See above	
	5.2.2 TB patients with known HIV status Indicator Value: Percent Numerator: Total number of all TB patients registered over a given time period who were tested for HIV (after giving consent) during their TB treatment Denominator: Total number of TB patients registered over the same given time period.	45%(66955/149508)	2010	90%	2015		Discussion underway with the NTP & HMIS team on how to address data Quality issue on TB & TB/HIV indicators.		
5.3 Improved treatment of TB/HIV co-infection	5.3.1 Registered HIV infected TB patients receiving ART during TB treatment Indicator Value: Percent Numerator: All HIV-positive TB patients, registered over a given time period, who receive ART (are started on or continue previously initiated ART) Denominator: All HIV-positive TB patients registered over the same given time period.	39%(3823/9809)	2010	100%	2015		Discussion underway with the NTP & HMIS team on how to address data Quality issue on TB & TB/HIV indicators.		
	5.3.2 HIV-positive TB patients who receive CPT Indicator Value: Percent Numerator: Number of HIV-positive TB patients, registered over a given time period, who receive (given at least one dose) CPT during their TB treatment Denominator: Total number of HIV-positive TB patients registered over the same given time period.	69%(6723/9809)	2010	100%	2015		Discussion underway with the NTP & HMIS team on how to address data Quality issue on TB & TB/HIV indicators.		

Technical Area 6. Health Systems Strengthening								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
		Data	Year	Data	Year	Y1		
6.1 TB control is embedded as a priority within the national health strategies and plans, with matching domestic financing and supported by the engagement of partners	6.1.1 TB care and control strategic plan embedded within national health strategies, including quantifiable indicators and budget allocations Indicator Value: Yes/No	No	2011	Yes	2012	Yes	TB care and control strategies embedded in the national health system development plan(2011-2015) and quantifiable indicators and budget allocated in the updated NTP M & E Plan in November 2011.	

Technical Area 7. M&E, OR and Surveillance								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
		Data	Year	Data	Year	Y1		
7.3 Improved capacity of NTPs to perform operations research	7.3.1 OR studies completed and results incorporated into national policy/guidelines Indicator Value: Number (of OR studies and instances reported separately)	1	2011	2	2012	1	Discussion underway to identify TB OR agendas. One thesis sponsored.	
	7.3.x Number of NTP staff trained on OR Description: NTP staff who will actively participate in training on OR on TB Indicator Value: Number Level: National Source: TB research advisory committee of MOH Means of Verification: Numerator: Number Denominator:	0	2011	25	2012		Ten day training on methods of Epidemiology for Operational research and ethics provided for 15(M=13 ; F=2) participants from Regions & FMOH. The main objective of the training was to capacitate health professionals and academicians with a skills of proposal development to further conduct a research on the area of TB, HIV, TBHIV and other related health issues. TB CARE I Ethiopia fully sponsored this training and acknowledged with certificate of	
7.2 Improved capacity of NTPs to analyze and use quality data for the management of the TB program	7.2.3 A data quality audit at central level has been conducted within the last 6 months Indicator Value: Yes/No	No	2011	Yes	2012	No	Planned to discuss with HMIS unit of FMOH on data quality issue; reporting system of MDR TB and status of TB, TB/HIV and MDR TB indicator revision and reporting formats.	

Technical Area 8. Drug supply and management								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
		Data	Year	Data	Year	Y1		
8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs	8.1.1 Quarterly national stock information available Indicator Value: Number (as months of stock for FLDs and SLDs separately)	NA	2011	6-12(FLDs)	2012		Discussions made with MOH. Agreed on the following points: - MOU to be signed before starting implementation of activities and to prepare draft action plan. Accordingly the action plan and MOU drafted. Based on the action plan, activity implementation will be started on January 16/2012 by conducting Joint supportive supervision.	
	8.1.2 Updated SOPs for selection, quantification, procurement, and management of TB medicines available Indicator Value: Yes/No	No	2011	yes	2012		Discussions underway with MoH	

Quarterly Activity Plan Report

1. Universal and Early Access									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date	
1.1 Increased demand for and use of high quality TB services and improve the satisfaction with the services provided (Population/Patient Centered Approach)	1.1.1	Workshop with mentee organization	KNCV	5,280	0%	Jul	2012	preparatory activities underway and the workshop scheduled in third Quarter.	
	1.1.2	Mentoring workshop	KNCV	921	0%	Sep	2012	See activity no 1.1.1	
	1.1.3	Stakeholders workshop	KNCV	1,620	0%	Aug	2012	See activity no 1.1.1	
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date	
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.1	Updated HEWs TB Reference Material	WHO	15,000	0%	Mar	2012	Since budget is not received, activities are not yet started	
	1.2.2	HEW Reference Material translated to local Language	WHO	12,000	0%	Mar	2012	this activity will be conducted after updating TB reference material	
	1.2.3	Update HEW Reference Material is printed	WHO	20,000	0%	Sep	2012	planned in forth quarter	
	1.2.4	TB Treatment supporters Training material Developed	WHO	33,000	0%	Mar	2012	discussion underway with NTP and planned to start in second quarter.	
	1.2.5	M& E tool for TTS is developed	WHO	10,000	0%	Mar	2012	discussion underway with NTP on the type of M&E tool to be developed	
	1.2.6	M& E tool for TTS is translated to 4 local Languages	WHO	10,000	0%	Jun	2012	The approved M & E tool will be translated in to four local language in the third Quarter	
	1.2.7	M& E tool for TTS is printed	WHO	30,000	0%	Sep	2012	will be printed on the forth quarter	
	1.2.8	International Travels Made	WHO	5,000	0%	Dec	2011	Activity rescheduled for third quarter	
	Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
1.3 Reduced patient and service delivery delays (Timing)	1.3.1	Consultative meeting on Child TB	KNCV	5,980	0%	Apr	2012	Planned for third quarter.	
	1.3.2	Protocol preparation	KNCV	2,980	50%	Jun	2012	In line with new WHO recommendation, management of pediatric TB included in the national TB leprosy guideline revision workshop	
	1.3.3	Provider support tool	KNCV	3,460	0%	Sep	2012	Planned for third quarter.	
					4%				

2. Laboratories									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date	
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	Revise/Develop manual/training module/ guideline for AFB or culture & DST	MSH	9,514	0%	Mar	2012	Discussion underway with EHNRI on tentative schedule of this activity and the actual date will be decided in the next meeting.	
	2.1.2	Training on TB Culture and DST	MSH	11,859	75%	Sep	2012	A 10 day training on TB culture and identification provided for 14(M=10;F=4) laboratory personnel in two rounds. This training will support the Regional laboratories to start the long awaited TB culture services and this in turn will strengthen the diagnostic capacity in the country.	
	2.1.3	Laboratory networking strengthening at supra national	MSH	3,889	0%	Jun	2012	Planned for next Quarter to discuss the issue in the Laboratory TWG meeting	
	2.1.4	Conduct supportive supervision to 5 Regional labs	MSH	1,920	0%	Jun	2012	Visit to Adama regional laboratory was conducted in the quarter. The aim of the visit was to assess the status of the regional laboratory and to identify gaps to initiate TB culture. The human resource, infrastructure and necessary materials are ready but few Lab supplies and culture media still lacking to start TB culture.	
	2.1.5	Support culture sample transportation from RRLs to EHNRI for EQA	MSH	100	0%	Jun	2012	waiting for regional laboratory to start TB Culture	
	2.1.6	Provide international TA to laboratory networking	MSH	7,481	0%	Jun	2012	Scope of work drafted and will be sent to the TA in January.	
	2.1.7	Procurement of Olympus microscope to EHNRI	MSH	46,000	0%	Mar	2012	Specification of the microscope done and discussion underway.	
	2.1.8	Support and participate the national Laboratory TWG	MSH		0%	Sep	2012	TB CARE I will participate in TWGs in the remaining Quarters.	
	2.1.9	Support oversee training on new diagnostics	MSH	4,490	0%	Jun	2012	planned for third Quarter	
	2.1.10	Preparation and transportation of cultures to 5 RRLs	MSH	900	0%	Jun	2012	waiting for regional laboratory to start TB Culture	
	2.1.11	Consultative meeting to define a national TB diagnostic strategy	MSH	2,915	0%	Mar	2012	planned for March 2012.	
					7%				

3. Infection Control								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date
3.2 Scaled-up implementation of TB-IC strategies	3.2.1	Provider support tools	KNCV	4,480	0%	Feb	2012	Planned for second quarter.
	3.2.2	IEC materials on TB IC	KNCV	20,940	25%	Feb	2012	TB IC material drafted, stakeholder communication initiated and consultative meetings will be organized to finalize the document.
	3.2.3	Produce handkerchiefs	KNCV	3,363	0%	Sep	2012	design editing on progress
	3.2.4	Supportive supervision on TB IC	KNCV	11,745	25%	Sep	2012	To assess the outcome of TB IC training, three health centers were supervised in October 19 & 20/2011. The major finding of follow up supervision were: the health centers started practicing fast tracking mechanism for TB suspect, started practicing good alternative health care worker client sitting arrangement and one of the health center prepared TB suspect register. TB CARE I has a plan to arrange experience sharing follow up workshop after finalizing the follow up supervision for the remaining 10 health facilities participated in the TB
	3.2.5	Renovation of TB clinics	KNCV	60,000	25%	Jun	2012	Site selected, communication initiated with Gondar University Hospital and preparatory works are on progress.
	3.2.6	Prepare model design for sputum collection	KNCV	14,800	25%	Apr	2012	Discussion with the Architect initiated.
	3.2.7	National guideline on health facility design	KNCV	2,520	0%	Jun	2012	Discussion will start in second quarter
	3.2.8	Updating national guideline on TB IC	KNCV		100%	Sep	2012	conducted as part of revised national TB & TB/HIV guideline & training material
	3.2.9	Surveillance of TB among HCW	KNCV	1,503	50%	Sep	2012	Rapid assessment tool developed to collect data from health facilities of one Region and assessment underway.
	3.2.10	Equipment	KNCV	5,000	0%	Mar	2012	Planned for second quarter.
3.4 Improved TB-IC human resources	3.4.1	National training on TB IC	KNCV	25,400	0%	Sep	2012	Two day training on TB infection control provided for Gondar university hospital in October 17-18/2011 for 39(M=21 & F= 9) participants. The following action points were forwarded: Participants agreed to assess and improve their respective work place; the hospital IP/TB IC committee agreed to make the draft IP/TB IC plan. TB CARE I will continue technical support as per the gap in the area of TB IC and PMDT. along the
	3.4.2	Overseas training on TB IC	KNCV	8,900	0%	Jun	2012	Planned for third quarter
	3.4.3	Training for Architects	KNCV	5,313	0%	Mar	2012	communication initiated with MoH, tentative plan developed for the training
	3.4.4	TA on TB IC	KNCV	70,327	0%	Mar	2012	planned for second & third quarter
					18%			

4. PMDT								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date
4.1 Improved treatment success of MDR TB	4.1.1	Procure SLDs	KNCV	750,000	0%	Sep	2012	Planned for second quarter
	4.1.2	Procure ancillary drugs	KNCV	45,000	25%	Jun	2012	Communication for the procurement of pyridoxine started with FMOH and GDF considering the critical shortage of the drug in the country at all MDR TB sites. Besides, FMOH appreciated the donation of Streptomycin, the process completed and shipment will be done soon. TB CARE I will cover the shipment cost.
	4.1.3	International training on PMDT	KNCV	15,104	0%	Mar	2012	planned for second Quarter
	4.1.4	Local training on PMDT	KNCV	27,335	25%	Mar	2012	As part of start up of the MDR TB activity at ALERT center, a five day (Nov. 14-18, 2011) refresher training on PMDT and Basic TB IC was provided for 18 (M=9;F=9) health care workers of ALERT staff assigned to work at the MDR ward. Following full supports (renovation, furnishing and capacity building of staffs) by TB CARE I, the first MDR TB patient admitted to the unit on November 28, 2011. As of Dec. 31/2011 a total of 13(M=9;F=4) MDR TB patients were admitted and started treatment in the

	4.1.5	Provider support tools	KNCV	5,025	50%	Feb	2012	Four provider tools on MDR TB were prepared and commented on; designing finalized and printing in progress. An additional provider tool addressing MDR TB patients (what they needs to know) was prepared, translated to local language and circulated for comment.
	4.1.6	Support MDR technical working group	KNCV	5,640	25%	Sep	2012	Participation and contribution in the TWG group continued to address national issues: finalization of the MDR implementation plan to scale up the MDR program nationally, and the ALERT MDR unit start up activities were among the major discussion points addressed in the reporting quarter.
	4.1.7	Orientation on PMDT	KNCV	19,440	25%	Mar	2012	A two day (Nov.26 -27, 2011) orientation workshop on MDR TB Specimen Management & Referral System was provided for 19 (M=10; F=9) ALERT laboratory staff. Additionally, the ALERT MDR ward supportive staff and paramedical staff of the hospital were orientated on MDR TB and TB IC on November 18 and December 17, 2011 respectively. A joint press release (FMOH, ALERT and TB CARE I) was organized and conducted on December 13,2011 at ALERT MDR activity launching; more
	4.1.8	Supportive supervision	KNCV	7,830	25%	Sep	2012	From October 16-19, 2011, a TA visit was made to Gondar University Hospital for MDR activity including follow up to Health Centers and patients were interviewed. An action plan was developed, communicated to the MDR TB team members and the Chief Executive Officer (CEO) and tried to address some of the issue like PMDT training, orientation to the staff, and renovation in the reporting Quarter. Support (technically and financially)
	4.1.9	International conference	KNCV	18,640	100%	Oct	2012	A representative of NTP and TB CARE I staffs attended the international Union conference from October 25-31,2011
	4.1.10	TA on PMDT	KNCV	65,179	0%	Sep	2012	two TA will be provided in the reporting year.
	4.1.11	Socio-economic support	KNCV	18,000	0%	Sep	2012	Being provided to newly open MDR TB unit at ALERT Center
	4.1.12	Nutritional support	KNCV	10,500	0%	Sep	2012	Being provided to newly open MDR TB unit at ALERT Center
	4.1.13	Update PMDT guideline	KNCV	4,400	0%	Sep	2012	
	4.1.14	Equipment for MDR ward	KNCV	31,000	50%			Equipment necessary for MDR TB service were purchased and handed to ALERT center during the reporting period.
	4.1.15	National protocol on application of Genxpert	KNCV	8,720	0%	Feb	2012	Discussion underway to organized a two day National consultative meeting workshop on MDR TB in Feb/2012.
	4.1.16	Data management	KNCV	8,044	25%	Mar	2012	Preparation initiated to establish electronic data base system for MDR TB program
	4.1.17	Procurement of respirators	KNCV	6,000	0%	Aug	2012	Planned for second quarter
	4.1.18	Procurement of surgical masks	KNCV	4,000	0%	Mar	2012	Planned for second quarter
	4.1.19	Vehicles	KNCV	60,000	0%	Jun	2012	Planned for second quarter
	4.1.20	TA on laboratory for PMDT	KNCV	44,167	0%	Jun	2012	Planned for second quarter
	4.1.21	Dissemination of experience	KNCV	951	0%	Sep	2012	planned for fourth quarter
	4.1.22	Training material	KNCV	2,520	25%	Mar	2012	Preparation of training material on PMDT for middle level workers started with FMOH
	4.1.23	Renovation	KNCV	84,184	25%	Sep	2012	Renovation of staff duty room of ALERT MDR unit done.
	4.1.24	Sensitization workshop	KNCV	7,032	0%	Mar	2012	Planned for second quarter
					17%			

5. TB/HIV									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date	
5.1 Strengthened prevention of TB/HIV co-infection	5.1.1	Organize MOST for TB/HIV workshop	MSH	30,838	0%	Jun	2012	planned for third Quarter	
	5.1.2	Support FMOH HMIS activities	MSH		0%	Sep	2012	will be supported as per the need of the NTP	
	5.1.3				0%				
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date	
5.2 Improved diagnosis of TB/HIV co-infection	5.2.1	Participate in the national TB/HIV TWG meetings	MSH		25%	Sep	2012	Participated in a national TBL TWG meeting: selecting of core group to draft the TBL and TB/HIV guideline, and deciding the date and venue of the guideline revision consultative workshop were the main agendas of the meeting. Outcomes: the guideline drafted and consultative workshop conducted. TB CARE I experts attended the workshop and technically assisted the guideline revision	
	5.2.2	Pilot TB/HIV SOPs	MSH	25,133	0%	Sep	2012	Discussion underway with Head quarter experts.	
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date	
5.3 Improved treatment of TB/HIV co-infection	5.3.1	Revision and printing of the national TBL and TB/HIV guidelines	MSH	5,000	25%	Mar	2012	TBL and TB/HIV Guideline revised and first draft produced. Waiting for the FMOH go ahead to organize a national consensus workshop to get inputs from larger group of stakeholders including RHBS	
	5.3.2	Organize TB/HIV TOT	MSH	22,714	0%	Jun	2012	To be done after the guideline is finalized	
	5.3.3	Follow-up of TB case detection SOPs pilot program	MSH	24,211	25%	Mar	2012	TB case detection SOP follow up SS conducted in 28 pilot HFs by West Arsi Zonal experts from Nov. 15-Dec. 08 2011 Summary of Findings: the case detection SOPs are showing results as per the set targets and indicators. E.g TB suspect identification from all OPD attendants improved from 2.9% in last quarter to 7.3% in this Quarter. The total number of cases notified is	
	5.3.4	Support the national EH-RH regimen shift initiative	MSH	7,914	0%	Sep	2012	Need based support for NTP will continue through out the year	
					8%				

6. Health Systems Strengthening									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date	
6.1 TB control is embedded as a priority within the national health strategies and plans, with matching domestic financing and supported by the engagement of partners	6.1.1	TA on HSS	KNCV	34,979	0%	Jun	2012	scheduled to be in May 2012.	
	6.1.2	Participate in the national TWGs	MSH		25%	Sep	2012	will continue through out the year	
	6.1.3	TB messages broadcasting	MSH	35,000	25%	Sep	2012	A total of 12 TB messages aired during the reporting quarter.	
	6.1.4	TB message disseminated via Print media	MSH		0%	Sep	2012	In connection with the start of the 3rd MDR TB unit, a total of six printing medias cover the news.	
	6.1.5	WTD commemoration	MSH	17,700	0%	Mar	2012	In connection with the start of 3rd MDR TB unit, a total of six printing medias covered the news.	
	6.1.6	Support other TB event	MSH	16,114	25%	Sep	2012	Awareness rising panel discussion on TB prevention was held under the theme of "Simple Precaution saves lives" on Dec.3/2011. The discussion was attended by 80(M=66 & F=14) participants from faith based organizations, educational institutes, prisons and government & private media organizations.	
	6.1.7	Support TB Media Forum quarterly meeting	MSH	12,795	0%	Sep	2012	the first support will be conducted on January 28/2012	
	6.1.8	Support STOP TB partnership	MSH	3,920	0%	Sep	2012	Planned for second Quarter	
	6.1.9	MOST for TB Follow up workshop	MSH	10,300	0%				
	6.1.10	Support the JSSV	MSH	17,600	0%	Sep	2012	Discussion underway with MoH	
	6.1.11	Union conference participation	MSH	9,678	100%	Oct	2011	The annual lung conference in Life/France was attended by TB CARE I & EHNRI staff	
					16%				

7. M&E, OR and Surveillance								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date
7.2 Improved capacity of NTPs to analyze and use quality data for the management of the TB program	7.2.1	Registers and formats	KNCV	12,000	25%	Jun	2012	Discussion initiated with HMIS unit of FMOH to assist printing of the revised version of recording and reporting formats.
	7.2.2	Supportive supervision	KNCV	3,915	0%	Jun	2012	planned in February before the data Quality training
	7.2.3	Training on data quality	KNCV	8,870	0%	May	2012	Preparation underway to assess training need of the TB coordinators of the regions before organizing the training.
	7.2.4	International TB conference	KNCV	4,660	100%	Oct	2011	The annual lung conference in Lille/France was attended by MOH staff
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
7.3 Improved capacity of NTPs to perform operations research	7.3.1	Operational research agenda	KNCV	3,250	0%	Feb	2012	Discussion will start on January 2012.
	7.3.2	TA on Operational research	KNCV	33,421	0%	Jun	2012	Planned for third quarter
	7.3.3	Training on operational research	KNCV	11,000	100%	Dec	2011	A ten day training on methods of Epidemiology for Operational research and ethics was provided for 15(M=13 ; F=2) participants from regions through the Federal Ministry of Health. The main objective of the training was to capacitate health professionals and academicians with a skills of proposal development to further conduct research on the area of TB, HIV, TBHIV and other related health issues. TB CARE I Ethiopia fully sponsored this training.
	7.3.4	Sponsor researches	KNCV	6,000	25%	Sep	2012	One thesis was sponsored and in discussion to support other student thesis
	7.3.5	Conduct operational research	KNCV	20,350	0%	Sep	2012	Discussion underway with AHRI to identify TB Operation research agendas. The list of research topics will be finalized in Quarter Two.
	7.3.6	TB prevalence survey	KNCV	4,020	100%	Dec	2011	National prevalence survey final result dissemination workshop conducted and TB CARE I sponsored this event in addition to technical and financial support provided during the survey period. TB CARE I was awarded a certificate of recognition. (See photo Album)
	7.3.7	TB conference	KNCV	16,287	50%	Mar	2012	The seventh TB Research Advisory Committee (TRAC) conference will be held between March 21- 23/2012. Preparation underway and TB CARE I contributed 16,287 USD for this event and will technically support the event.
						36%		

8. Drug supply and management								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion Month	Year	Cumulative Progress and Deliverables up-to-date
8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs	8.1.1	Follow up of IPLS implementation .	MSH	12,960	0%	Sep	2012	discussion held with MOH to continue the activities starting from Quarter Two
	8.1.2	Introducing proper DSM system of SLDs in all MDR sites	MSH	7,560	0%	Jul	2012	Planned for Quarter Four
	8.1.3	Support the integration of TB pharmaceuticals distribution with ARV drugs.	MSH	15,120	0%	Sep	2012	Planned for Quarter Four
	8.1.4	Support national review meeting on the implementation of IPLS and TB DSM.	MSH	18,078	0%	Jun	2012	Planned for Quarter Three
	8.1.5	Support national TB DSM assessment.	MSH	30,110	0%	Jan	2012	Preparation underway to start TB DSM assessment on January 16/2012.
	8.1.6	Support EH/RH regimen shift.	MSH		25%	Sep	2012	activity ongoing
	8.1.7	Support MDR TB DSM training.	MSH	10,875	0%	Feb	2012	Planned for Quarter Two
	8.1.8	Assess the feasibility of introducing patient kits in Ethiopia	MSH	8,511	0%	Apr	2012	Planned for Quarter Three
	8.1.9	Support national Logistics / IPLS related TWGs	MSH		0%	Sep	2012	Planned for Quarter Four
	8.1.10	Oversees training on DSM	MSH	9,810	0%	Aug	2012	Planned for Quarter Four
	8.1.11	Support national forecasting and quantification of anti-TB drugs.	MSH	11,875	0%	Jun	2012	Planned for Quarter Three
					2%			

Quarterly MDR-TB Report

Country	Ethiopia
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Period	October-December 2011
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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	140	85
Jan-Sep 2011	109	139
Oct-Dec 2011	27	75
Total 2011	136	214

Quarterly GeneXpert Report

Country	Ethiopia
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Period	October-December 2011
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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-Sep 2011	Oct-Dec 2011	Jan-Dec 2011		
# 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

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) ¹	Partner/ Implementing Organization; Additional Comments
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				

¹ 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) ¹	Comments
	1				
	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)

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.

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



Certificate of Appreciations



Practical exercise of Laboratory on TB culture and identification



The first admitted patient of ALER T MDR TB Unit renovated by full support of TBCAP/TB CARE



Participants of Operational research training

Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
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Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	
Bed Pan Stainless Steel	Model 19-11747	19/12/2011	\$17.56	-	ALERT	New	19/12/2011	ALERT	

- (1) Description of equipment: transportation (vehicles), administration (computers, faxes), laboratory equipment or others
- (2) Identification number (eg Manufacturer's serial number, model number, Federal stock number, national stock number)
- (3) Date of invoice
- (4) Total price including any sales tax paid. Use currency on invoice
- (5) Note any sales tax charged
- (6) Address
- (7) Good/fair or bad
- (8)+(9) Ultimate disposition data, (in the case of a vehicle) including date of disposal and sales price or the method used to determine current fair market value. where a recipient compensated TB CARE I for its share. Attach supplementary info