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**TB CARE I**

# **TB CARE I -Nigeria (OP)**

**Year 3  
Quarterly Report  
April - June 2013**

**July 30, 2013**

## Quarterly Overview

<b>Reporting Country</b>	<b>Nigeria OP</b>
<b>Lead Partner</b>	<b>KNCV</b>
<b>Collaborating Partners</b>	<b>FHI360, MSH, WHO</b>
<b>Date Report Sent</b>	30 July 2013
<b>From</b>	Tushar Kanti Ray
<b>To</b>	USAID Mission
<b>Reporting Period</b>	<b>April - June 2013</b>

<b>Technical Areas</b>	<b>% Completion</b>
1. Universal and Early Access	50%
2. Laboratories	47%
4. PMDT	58%
6. Health Systems Strengthening	33%
7. M&E, OR and Surveillance	6%
	89%
<b>Overall work plan completion</b>	<b>47%</b>

### Most Significant Achievements

TB CARE I provided national and international technical support in the mid-term evaluation of the Nigerian TB strategic plan covering the following thematic areas, PMDT, LAB, Human Resource Development and M&E. The evaluation identified issues such as low case detection, inadequate microscopic coverage to achieve case detection; weak childhood TB case management; low ART uptake among co-infected TB patients, weak PMDT (non implementation of ambulatory PMDT and the need to strengthen the M&E system). The final report was made available and utilized in APA 4 planning. The same report will be used for the review of the national TB strategic plan next quarter.

Other significant results was a 50% achievement in the establishment of PPM DOTS (60) centers in 6 states in collaboration with the NTP. So also during the quarter TB CARE facilitated the engagement of the Nigerian prison health services in strengthening TB screening among inmates by developing a draft health screening tool.

A total of 1946 sputa were tested by Gene Xpert of which about 2.9% (57 ) were indeterminate. Further analysis of the data by risk groups indicates that 83% (1, 614) of those tested were DR TB suspects irrespective of HIV status; smear negative PLHIVc constituted 14.1% (272) of total sputa tested and other AFB smaer negatives cases were 57. Of those total sputa tested about 207 (M=131; F=76) were MTB with RIF resistance. Patients support were also provided for 50 MDR TB patients enrolled during the quarter.

### Overall work plan implementation status

The overall work plan implementation during the quarter was 47% which is a significant achievement. However, other major activities are dependent on procurement and delivery of supplies (Gene Xpert machines, cartridges and Second Line drugs).

### Technical and administrative challenges

Major challenges remain the delay in the procurement system. Another challenge is the security issues in many of the states.

## Quarterly Activity Plan Report

1. Universal and Early Access			Activity Leader	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
1.1 Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided (Population/Patient Centered Approach)	1.1.1	Information dissemination (a)	FHI360	25.125	 25%	Sep	2013	The activity is ongoing, Production and distribution of advocacy kit and materials to States to be completed in the next quarter.
	1.1.2	Information dissemination (b)	FHI360	123.301	 25%	Oct	2013	Similar to the activity above, the radio jingles will run throughout the next quarter in the 5 States. Likewise TB messages. Process is ongoing for the identification of the network to run bulk SMS messages on TB. The Media consultant will also complete advocacy visits in the first month of the next quarter to the media houses.
	1.1.3	Information dissemination (c)	FHI360	670	 25%	Nov	2013	
	1.1.4	Training facility staff on PCA	KNCV	47.613	 0%	Aug	2013	The states have been identified with the NTP namely Borno, Kebbi, Ekiti, Niger, Akwa Ibom and Abia States. The Training of Trainers (ToT ) will take place next quarter (July 30th). Thereafter there will be step down trainings to the selected facilities.
	1.1.5	TA Support	KNCV		 0%			
	1.1.1(B)	Advocacy for sustainable financing	KNCV	45.415	 100%	Jun	2013	Technical assistance was provided by Bert Schreuder on sustainable financing from June 9-15, 2013. The meeting was attended by the NTP, TB CARE I consortium partners in addition to other TB stakeholders in the country (GF Partners and State program managers). The purpose of the mission was to assess the current financing mechanisms, to make a plan of action / strategy to make the financing of TB services in Nigeria more sustainable. At the end of the assessment, some of the strategies were proposed for the country- 1) advocate for more political commitment for financing of TB services; 2) develop cost and financing scenarios over a 10-15 years period, with clear benchmarks on what and how much will be covered by the GoN; 3) agree on a medium term counterpart financing strategy of the GF support, with clear benchmarks for an increasing level of public domestic funding, as part of the coming financing cycles under the NFM mechanisms so that GF can gradually be phased out.

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	DOTS services in military and para military services	KNCV	42.415	 100%	Mar	2013	A stakeholder meeting was organized with military and para military health services to identify gaps for TB DOTS expansion. There were over 60 sites identified for expansion, however, 20 were prioritized and assigned to TB CARE I by the NTP. A total of 35 (M=27; F=8) para military health personnel were trained. All the facilities were linked to the state NTP of their respective states for the supplies of all program commodities for the commencement of TB services in their different health centers. These sites will be incorporated into the routine state /LG supervisory system.
	1.2.2	DOTS Expansion into PPM Sites	KNCV	243.970	 75%	Sep	2013	DOTS expansion training were conducted in 5 states during the quarter for both medical officers and GHC workers. The objectives of the training was to improve their skill and capacity for TB diagnosis and management. These facilities were linked to the NTP M&E supervisory system with the LG supervisors and state program Managers. Drugs and recording and reporting (R&R) tools were provided to the facilities by NTP through the state programs. In all 188 (M=105; F=83) health care workers were trained
	1.2.3	Guideline development for Childhood TB	WHO	58.795	 75%	Sep	2013	A stakeholder's meeting for the control of Childhood TB in Nigeria was held from the 28-31 May 2013 in Enugu. The participants for this meeting were drawn from Academia, FMoH (including the NTP, NASCAP, and Family Health), National AIDS Control Agency (NACA), GLRA and WHO. The objectives of the meeting include among others review the childhood TB component of the new workers' manual, develop and/or adapt national desk guide for the diagnosis and management of Childhood TB, discuss and adapt the challenges and recommendations of the mid-term review for childhood TB and define a clear roadmap for addressing the challenges of childhood TB in Nigeria. Key outcomes of the meeting included guidelines for childhood TB reviewed and updated in the national workers' manual, roadmap for addressing challenges of childhood TB in Nigeria developed, and desk guide for diagnosis and management of childhood TB in Nigeria developed and finalized. The next steps include the printing of the guideline, Organization of a trainers of trainees (ToT) workshop and development of training modules for the training of GHWs for the provision of TB services in children.

<b>1.2.4</b>	Training on Childhood TB	WHO	54.100	 0%	Aug	2013	This activity will be conducted after activity the planned ToT workshop and development of training modules have taken place in August 2013.
<b>1.2.5</b>	Engagement of pediatric professional bodies	WHO	24.009	 0%	Aug	2013	Same as above.
<b>1.2.6</b>	Maintain CTBC activities	FHI360	228.624	 50%	Sep	2013	Community mobilisation activities led by TB CARE umbrella and sub CBOs in Kano, Lagos & Cross River state held in 15 out of the 19 LGAs within the quarter. Referrals were a major focus within the quarter with notable improvements on number of referrals of TB suspects across the 15 LGAs. Other activities carried out include treatment support and home visits. Due to high Community Volunteer (CV) attrition new CVs who showed remarkable zeal and commitment towards CTBC interventions in their communities were identified and trained. The activation of new LGAs afforded the program an opportunity to select and engage innovative community resource persons with specialized skills such as Patent Medicine Vendors (PMVs) and Community Pharmacists (CPs) as CVs. Through the CVs and FHI360 Community Health Officers (CHOs) TB patients were tracked in the community and their progress monitored. In all, a total of 3,155 (M=1904; F=1251) TB suspects were referred during the quarter and of which 360 were TB positive for TB suggesting a slight increase of 7.5% over last quarters figure. Additionally, 290 (M=166; F=124)TB patients are currently receiving treatment with a community volunteer.
<b>1.2.7</b>	Support coordination meetings CTBC for expansion	FHI360	60.585	 75%	Sep	2013	Quarterly LGA committee meetings took place in 11 out of the 19 LGAs. The meetings could not be held in 4 of the LGAs (Girei, Demsa, Jada and Fufore LGAs) in Adamawa state due to the declaration of a state of emergency by the government. Inability to guarantee the safety of participants as a result of activities of insurgents led to the cessation of the activation process in Adamawa state. The meetings were also not held in Nassarawa and Ungoggo LGAs in Kano state as FHI 360 no longer supports these LGAs due to the splitting of Kano as a fallout of the USG rationalization. However, Monthly M&E meetings held 28 times out of the quarterly target of 57 times in 15 LGAs.

<b>1.2.8</b>	M&E Training for expansion	FHI360	40.859	 75%	Sep	2013	A One-day Monitoring and Evaluation tools training for Community Pharmacists , Patent Medicine Vendors, Community Volunteers and facility staff from the two newly activated LGAs implementing the TB CARE I-CTBC grant was held on the 13th of June 2013.The purpose of the training was to ensure participants understanding of the M&E community tools and to ensure accurate data recording and reporting. Participants were drawn from 12 communities in the Oredo (Evbuodia, Emwniyomwanru, Ekae, New Benin, Ikpema and Oredo) and Esan Central (Irrua, Ewu, Atuagbo, Ugbegun, Ibore and Eidenu) LGAs. The participants were the designated CTBC facility focal persons, LGA M&E officers, selected CVs, PMVs and CPs. A total of 63 persons (40 male and 23 females) were trained. The rest of the trainings will be completed next quarter
<b>1.2.9</b>	Community DOTS Training for expansion	FHI360	1.900	 100%	Jun	2013	Community DOTS training took place in 5 LGAs during the quarter. The participants were trained on community DOTS for improved service delivery . The trainings were aimed at providing participants with the basic knowledge of TB; How to identify a TB suspect in the community and how to make appropriate referrals. A total of 176 facility staff (38M, 138F) were trained.
<b>1.2.10</b>	Maintain CTBC activities	KNCV	121.266	 75%	Sep	2013	PLAN continued to maintain CTBC activities in 16 communities in Oyo state. During the quarter, sensitization and mobilization activities were carried out in communities. Advocacies were also conducted to garner the support of community leaders for CTBC activities in the various communities. Similarly 6 additional mentor/mentee organizations have been brought on board and the organizations have disbursed funds based on their approved workplan though activities are yet to kick up fully. In all, 385 TB suspects (M=235; F=190) were referred by the CV during the quarter and 104 (M=58; F=46) TB patients are managed by PLAN CVs.
<b>1.2.11</b>	Expand CTBC activities	KNCV	6.503	 50%	Sep	2013	

<b>1.2.1(B)</b>	Strengthen TB screening in prisons	KNCV	35.982	 50%	Aug	2013	Stakeholders meeting was organized with senior health officials of the Nigerian prison health services and representatives of the Nigerian prisons from the 6 zones. Also in attendance were NTP, USAID and Global fund implementing partners. The purpose of the meeting was to discuss and develop a health screening tool inclusive of screening for TB. At the end of the three day meeting a draft screening tool was developed and pre-tested in 6 Nigerian prisons. Feedbacks were collated to be used in finalizing the tool next quarter and also to organize training for 50 health Care workers across the 37 states of Nigeria. In all, 30 persons (21M: 9F ) attended the training.
<b>1.2.2(B)</b>	Active TB case finding in Apapa Lagos	KNCV	24.585	 0%	Apr	2013	There was no activity this quarter. The project was approved to be shifted from Lagos state to Oyo State by TB CARE I because Lagos State the not approve the commencement of the project on time. The project site is a slum area in Ibadan North East Local Government in Oyo State. The activity will commence in earnest next quarter.
<b>1.2.3(B)</b>	Active TB case finding in 4 LGA's in Edo State	KNCV	29.038	 25%	Apr	2013	Preliminary activities like advocacy visits to the state and intervention LGAs as well as training of project staff, such as GHWs and lay workers took place in the quarter under review. Actual case finding activities just commenced in the current quarter 3 2013. The project is expected to begin to witness additionality in case finding henceforth.
<b>1.2.4(B)</b>	Active TB case finding in 3 LGA's in Niger State	KNCV	34.360	 25%	Apr	2013	As part of the activities embarked to ensure the effective engagement of the community in TB services through Support to TB screening and referral activities in 3 LGAs of Chanchaga, Bida and Suleja during the quarter; a one-day advocacy and sensitization visits were paid to 12 underserved communities feeding 12 HFs with TB case. 280 community volunteers (210 Males and 70 females) which include Key medicine vendors and church/mosques volunteers were recruited. These CVs were provided with orientation and tools provided to help them conduct TB symptomatic screening and referral of symptomatic to designated HFs for further diagnosis and subsequent treatment for those found to be TB patients. Three TB/HIV facilities were also supported to conduct referrals of people with current cough among PLHIV in the ART sites. The CV were able to refer about 100 of which 5 TB patients were notified through this intervention. This would improve subsequently in the next quarter.

<b>1.2.5(B)</b>	Active TB case finding in 5 LGA's in Katsina	KNCV	34.721	 50%	Apr	2013	Training of Laboratory staff from 7 Private outfits in Katsina state was conducted as part of the intensified case findings in Katsina. In all, 14 laboratory staff (11M; 3F) were trained on AFB microscopy. The laboratory site should be provided microscopes. It is expected that as an outcome that there would be an increase in the number of smear positive TB cases in the state.
				 50%			

<b>2. Laboratories</b>					<b>Cumulative Technical 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>Activity Leader</b>	<b>Approved Budget</b>		<b>Month</b>	<b>Year</b>	
2.1 Ensured capacity, availability and quality of laboratory testing to support the diagnosis and monitoring of TB patients	<b>2.1.1</b>	Training on AFB/iLED Microscopy	KNCV	166.867	 25%	Jun	2013	This activity is scheduled for next quarter. However, in collaboration with NTP and State program managers have identified sites for expansion are currently being assessed.
	<b>2.1.2</b>	Procurement of Light/iLED microscopes	KNCV	92.722	 100%	Jun	2013	TB CARE I took delivery of the 50Light and 20 iLed microscopes. The microscopes will only be supplied to facilities after the trainings are conducted.
	<b>2.1.3</b>	Support development lab policy document	KNCV	23.090	 25%	Jun	2013	Currently NTP and other stakeholders are working on the existing strategic plan with the aim of finalizing it next quarter with a TA support from Valentina.
	<b>2.1.4</b>	TA Support lab policy	KNCV	24.298	 0%	Jun	2013	Planned for next quarter.

2.1.5	Support lab supervision and linkages	WHO	19.847	75%	Jun	2013	WHO supported supervision and monitoring visits to the national reference laboratories from the 16-22 June 2013. Teams visited 6 reference laboratories including reference laboratories in Jos University Teaching hospital, Amino Kano University Teaching Hospital, Zankli Medical Centre, University College Hospital, Ibadan, University of Port Harcourt Teaching hospital and Lawrence Henshaw Memorial Hospital, Calabar. Some of the salient findings include an average turn around time (TAT) for sputum AFB microscopy examination of 48-72 hours, completion of infrastructural development for Xpert MTB/RIF, culture services as well as PCR suites with the support of GF Round 9 MDR-TB grant in JUTH and AKTH. Though the equipment and consumables have been supplied to these they are yet to commence culture and DST services. Biosafety and IC measures have been put in place. The labs in Port Harcourt and Calabar are functioning suboptimally. There is adequate human resources trained for culture and DST service provision in all these labs.
2.1.6	TA Support SNRL Linkage	WHO	4.803	100%	Apr	2013	WHO lab consultant from Supranational Reference Lab (SRL), Milan provided technical assistance to the National as well as zonal reference laboratories during the Mid-term Review (MTR) of the National TB Strategic Plan 2010-2015 from the 8-19 April 2013. The findings and recommendations were presented to the NTP.
2.1.7	Expand GeneXpert services	KNCV	253.620	25%	May	2013	Still awaiting procurement and delivery from HQ
2.1.8	Installation GeneXpert machines	KNCV	July 30, 20	25%	Jun	2013	States were identified and selected. Site assessments were conducted. Awaiting installation next quarter.
2.1.9	Training / supervision GeneXpert	KNCV	35.741	50%	Feb	2013	A total of 12 sites were visited during the quarter based on priority and analysis of previous quarters report. Challenges still remain on completeness of report; error rates, electricity and commodity management. The TB CARE I lab staff will continue to work with the various sites to bring about an improvement on the identified issues. In all 33, visits have been conducted.
				47%			

4. PMDT			Activity Leader	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	

4.1 Improved treatment success of MDR TB	<b>4.1.1</b>	Procurement SLDs	KNCV	322.848	25%			Procurement process at advanced stage. There was a challenge with Kalamycin which has been addressed with additional using MoT. Currently awaiting delivery.
	<b>4.1.2</b>	Patient support	KNCV	113.013	75%	Apr	2013	During the quarter, TB CARE I provided feeding support for 50 patients admitted throughout the quarter based on the capacity of the ward ( this also include 1 PRE XDR Patient). Additionally, ancillary drugs provided for patients that needed them and baseline investigations were carried out for all the patients on admission/intensive phase while some patients had repeat investigations including CXR, serum K Cr Fasting Blood Sugar and when indicated (This also included 1 Pre XDR TB patient ). Furthermore, 5 patients benefitted from the monthly sputum sample sent to lab for smear and culture, Serial CXR and abdominal ultrasound done for 1 patient while on treatment (Weekly FBC PCV done PRE XDR patient). similarly, 7 patients were provided with hearing aid devices during the quarter.
	<b>4.1.3</b>	Training PMDT	KNCV	238.614	100%	May	2013	Training on basic Gene Xpert utilization for DR-TB and TB diagnosis among PLHIV was conducted for 4 high burden facilities with the 36 states and FCT. The training was aimed at improving knowledge and skills of clinical staff in identifying DR suspects and the utilization of Gene Xpert algorithms for PLHIV and other reporting tools. Referrals and linkages with PMDT services were equally emphasized during the trainings. In all, a total of 300 (M=130; F=170) GHCW were trained.
	<b>4.1.4</b>	Refresher training PMDT	FHI360	41.832	100%	Jun	2013	The two (2 )day refresher training of doctors and nurses from the kano, Cross River and Lagos State MDR-TB treatment centres on PMDT had a total of 25 participants. (10M, 15F). The objective of the refresher training on PMDT was to further increase the knowledge and skills of the health care workers in the clinical management of the MDR-TB patients in the treatment centers and also in the management of the DR-TB Program generally. Another objective was to cross fertilize ideas between the participants from the various participating States (Lagos, Cross River and Kano). This exchange program also served as a motivational factor for the health care workers.
	<b>4.1.5</b>	Training Community DR TB	FHI360	66.349	25%	Jul	2013	The dates have been scheduled and awaiting confirmation from NTP of availability of facilitators for those dates. The Lagos community MDR-TB training for GHCWs and TBLS will commence (10/7/13)

<b>4.1.6</b>	e-TB Manager finalization	MSH	48.880	50%	May	2013	Customization of e TB Manager is ongoing and the Nigerian version is expected to be finalized in September/October 2013. The STTA on e TB Manager implementation planned for September, 2013
<b>4.1.7</b>	Maintenance/expansion e-TB Manager	MSH	52.570	50%	Jun	2013	One computer was delivered to UPTH with e-tb Manager installed. Expansion of e-TB Manager system to other sites will follow the demand from NTP as they open new DR-TB treatment centres. Two DR TB treatment sites are expected to take off in Q4, 2013.
<b>4.1.8</b>	TA e-TB Manager implementation	MSH	78.656	50%	May	2013	Customization of e TB Manager is ongoing and when Nigerian version is finalized in September/October 2013, this activity will follow.
<b>4.1.9</b>	Support mentoring visits e-TB Manager	MSH	26.880	100%	Jun	2013	A total of 4 mentoring visits to support health workers in the use of e-TB manager has been carried to UCH, Ibadan DR-TB treatment centre, Government Chest hospital Ibadan DR-TB treatment centre, Mainland Hospital Lagos and NIMR Lagos. The purpose of the visit was to follow -up to ensure the progress and effectiveness of the Health workers in the use of e-tb manager at the various centres and; to provide on-the -job training for e-TB manager users. Further mentoring will be done through phone calls. E-tb manager was also installed at UPTH during the quarter.
<b>4.1.10</b>	TA PMDT	KNCV	11.915	0% 58%	Jul	2013	Scheduled for early July

<b>6. Health Systems Strengthening</b>			<b>Activity Leader</b>	<b>Approved Budget</b>	<b>Cumulative Technical 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 (drug supply and management, laboratories, community care, HRD and M&E) form an integral part of national plans, strategies and service delivery	<b>6.2.1</b>	Support NTBLCP coordination meetings	KNCV/WHO	140.125	 75%	Apr	2013	The National PPM meetings were held on 4 April and 6 June 2013. Issues with respect to finalization and printing of the revised of the PPM guidelines, designing a system of motivation including incentives and enablers for all private practitioners involved in PPM DOTS provision were discussed. Other issues include poor linkages of newly opened PPM DOTS facilities with the state programme as well as inadequate supervision at the states and LGAs. As part of the immediate next steps, NTP is to introduce a proposal for printing of the finalized copy of the national PPM guidelines to strengthen supervision of PPM DOTS activities at the states and LGAs; Plan and organize a meeting of all key stakeholders to discuss and agree on realistic and sustainable incentives for PPM providers and ; Involve members of the National PPM committees in supervision and monitoring of PPM DOTS activities across the country. However the lab meeting is postponed until the assessment visit to the reference laboratories is completed so as to provide information on the current status of the labs for meaningful discussions during the meeting. The activity is now planned for first week of August 2013.
	<b>6.2.2</b>	Support CGAT coordination meetings	KNCV	10.886	 25%	Mar	2013	TB CARE I is planning with the NTP to convene the meeting in July 2013.
	<b>6.2.3</b>	Scale up SOPs on increased case detection	MSH	67.164	 0%	Jun	2013	STTA planned for August, 2013 to conduct survey on SOP implementation and document best practices.
	<b>6.2.4</b>	Finalization of SOP Tools	MSH	45.312	 0%	Jun	2013	One workshop out of the 2 workshop on SOP finalization will be carried out between July- Sept , 2013. The second workshop will be re-programmed into APA 4
	<b>6.2.5</b>	TOT Master Trainers on SOP usage	MSH	95.933	Cancelled	Jun	2013	Re-programmed to APA 4
	<b>6.2.6</b>	TA SOPs	MSH	27.500	Cancelled	Jun	2013	Re-programmed to APA 4
	<b>6.2.7</b>	Supportive supervision to sites implementing SOPs	MSH	67.200	 50%	Jun	2013	A total of 102 supportive supervisory visits to sites were conducted by MSH staff and local consultants :The purpose of the visits were to meet with TBHIV teams in ten facilities, conduct service delivery and well as data quality check; distribute SOPs to sites visited, meet with the state TB team and consultant to discuss challenges and proffer solution. MSH will continue to engage with the local consultants to provide regular mentorship to the facilities implementation SOPs for increase TB case detection



1.1 Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided (Population/Patient Centered Approach)	1.1.1	Regional workshop PCA	KNCV	4.933	 100%	Mar	 2013	<p>TB CARE I M&amp;E staff participated in the endline workshop for PCA activities in Maputo, Mozambique from March 4-8th, 2013. Four countries namely Nigeria, Mozambique, Indonesia and Zambia took part. The workshop was aimed at synthesizing the outcomes of the testing of PCA in the 5 countries. At the end of the workshop, each country was able to develop &amp; identify themes for the development of abstracts to be submitted for the Union conference. Some results from the baseline study show that (71%) of respondents have not heard nor seen the Patients Charter on Tuberculosis Care; 76% indicated that they did not pay for services relating to the received care. 97.2% reported respectful and dignifying treatment by TB workers. For 60% of TB patients, the health facility was the place they first learnt about TB. The Quality Impact score using the QUOTE TB Light tool indicated areas need improvement. Areas identified include patients support (food, transportation); stigma was not an issue in the sites; delay in the diagnosis was also an issue.</p>
		PCA Endline survey	KNCV		 100%	May	 2013	<p>TB CARE I also facilitated the endline survey for PCA activities in three states where PCA implementation took place during the quarter. The endline survey will provide a measure of the effectiveness of the implementation of the various tools in the states and also it will help inform the NTP and other relevant stakeholders of the cost of TB services borne by patients. Similarly TB CARE I also conducted the qualitative researches in two of the states on patient centered approaches. The report is however yet to be finalized.</p>
		Mid-term Evaluation of NTP strategic Plan 2010-2015	KNCV		 100%	Apr	 2013	<p>TB CARE I participated in the mid-term evaluation of the NTP 2010-2015 Strategic plan which took place from April 8-18, 2013 with the sponsorship of about 7 international TA from the KNCV HQ as well as local staff. The technical assistance provided during the review spanned PMDT, Lab, M&amp;E and Human resource Development. Some of the outcome of the review, noted the low case detection rate and the need for the implementation of childhood TB strategies amongst others.</p>

	<b>1.1.3</b>	Quote Light Tool	KNCV	18.147	 100%	Feb	 2013	A one day training was held for 6 data collectors and 2 persons from the state NTP in Ogun and Osun states on TB QUOTE Light questionnaire administration. The TB QUOTE Light tool was administered to 190 TB patients drawn from a total of 12 facilities in the 2 states. Additionally, Focus group discussions were held with TB patients in selected urban (2) and rural facilities in the two states. The reports have been imputed, analyzed and shared with the NTP.
	<b>1.1.5</b>	Patients Charter	KNCV	30.060	 100%	Sep	 2012	A total of 15, 000 copies of the adopted TB patients charter were printed during the quarter. 3,000 copies were printed each in Igbo, Hausa and Yoruba languages and 6,000 copies were made in English. Furthermore a one day training was held for government health workers in the selected 12 facilities in Ogin and Osun states on the patients charter. Participants were taken through the aim of the charter as well as the rights and responsibilities of TB patients. In all, 20 persons were trained (M=11 20;F=9)
	1.3.7.1	Training of health staff on improved case detection practices	MSH		 100%	Mar	 2013	A total of 59 health care providers (13 females and 46 males) from 10 health facilities in Taraba were trained on SOP-approach for improving TB case detection. The objectives of the training were to: To discuss and understand the SOP-approach for improving TB case detection; To discuss the understand the SOPs used at various units for improving TB case detection and; To develop the framework for improving TB case detection in each facility. The facilities have commenced implementation of the SOP-approach for improving TB case detection.
4.1 Improved treatment success of MDR	<b>4.1.1</b>	Renovation National Reference Laboratory (NIMR)	FHI	684.912	 75%	Mar	 2013	FHI 360 within the APA 2 extension period sustained progressive works at NIMR to upgrade the facility to bio – safety level 3 (BSL 3). Installation of the HVAC equipment which marks the final stages of engineering works commenced in earnest within the reporting quarter and is scheduled for completion in the next quarter.
	<b>4.1.2</b>	Renovation Zonal Reference Laboratory (UPTH)	FHI	260.000	 75%	Feb	 2013	Also within the APA 2 extension period, renovation works at the University of Port Harcourt Teaching hospital (UPTH) laboratory to upgrade it to BSL 2 laboratory with BSL 3 capacity was successfully completed. Test run of the installed equipment has begun to certify its functional state before final hand over to the National Program and commencement of operations as a full capacity MDR-TB zonal reference laboratory.

	<b>4.1.5</b>	Contact tracing & patient tracking for TB & MDR-TB	FHI	15.588	75%	Mar	2013	Three (3) Contact tracing and patient tracking for TB and MDR-TB clients were carried out within this reporting quarter by the tracking team in Kano State. 7 patients were traced to their base in Kano, Katsina and Gombe States. The tracking team on reaching the patients carried out on the spot assessment of their progress to determine their consistency and response to treatment or recommendation to the LGA TBLS for referral to a treatment site for reassessment.
	<b>4.1.10</b>	TA MDR	FHI	50.228	75%	Mar	2013	The monthly MDR-TB Expert Team Management meeting held 3 times in the quarter under review at the DR-TB treatment facility in Mainland Hospital, Lagos. The objectives of the meetings were to bring all the experts together to carry out joint clinical reviews of the patients on admission in the wards, make decisions on the management of difficult cases and to address any challenges that the clinicians/patients might have faced during the month.
<b>Outcome</b>	<b>Activity #</b>	<b>Activity</b>	<b>Activity Leader</b>	<b>Approved Budget</b>	<b>Cumulative</b>	<b>Month</b>	<b>Year</b>	<b>Cumulative Progress and Deliverables up-to-date</b>
Improved TB service delivery	<b>6.2.1</b>	Training of TBLs on leadership and management: 60 TBLS	MSH		75%	Mar	2013	40 (F=11) Local Government TBL Supervisors from 2 States TB control programs where SOPs will be scaled up were trained on L&M which was the last part of the APA 2 activity. The objective was to build the skills of TB supervisors in program planning, monitoring and evaluation and use of data in evidence-based decision making. Participants were also taught the skills of supportive supervision, mentoring, delegation and motivation of project teams. As a follow on to the trainings, the State teams will ensure that action plan developed is implemented and also follow up on challenges affecting effective supportive supervision such as logistics.
					89%			
	Total Approved Staffing & Operations Budget				2.090.345			
Grand Total Approved Project Budget				6.000.000				

## Quarterly MDR-TB Report

Country	Nigeria OP
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Period	April - June 2013
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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	Comments:
Total 2010		23	
Total 2011	92	61	
Jan-Mar 2012	54	21	
Apr-Jun 2012	77	56	
Jul-Sep 2012	54	36	
Oct-Dec 2012			
Total 2012	185	113	
Jan-Mar 2013			
Apr-Jun 2013		75	
To date in 2013	0	75	

July 30, 2013

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

#	Partner	Activity Code	Name	Purpose	Planned month, year	Status	Dates completed	Additional Remarks (Optional)
1	KNCV		Sanne van Kampen and Remi Verduin	To support the Nigerian National TB and Leprosy Control Program (NTBLCP) to monitor and evaluate the impact of Xpert MTB/RIF on case detection and treatment of TB cases among people living with HIV (PLHIV) and of (multi)drug resistant ((M)DR)-TB cases.	Mar 3-9, 2013	Completed	Mar-13	
2	KNCV	C 5	Katja Brenninkmeijer	HRM	Nov	Completed	Jan-13	
3	KNCV	C 3	Ellen-Jane Burgrust	Finance	June		Mar-13	
4	KNCV	C2	Nathalia Andreeva	Project support	Feb			Not available
5	KNCV	C1	Rene' l'Herminez	Project support	Jan	Completed	Oct-12	
6	KNCV	C1	Victor Ombeka	Project support	Feb	Completed	Apr-13	
	KNCV		Jeroen Van Gorkom	Mid term Evaluation	April	Completed	Apr-13	
	KNCV		Ineke Huitema	Mid term Evaluation	April	Completed	Apr-13	
	KNCV		Manuela Rehr	Mid term Evaluation	April	Completed	Apr-13	
			Lynne Elson	Mid term Evaluation	April	Completed	Apr-13	
			Henk Eggens	Mid term Evaluation	April	Completed	Apr-13	
			Bert Schreuder	Sustainable Financing	May/June	Completed	Apr-13	
7	MSH	4.1.11	Luis Gustavo Bastos	Support SOP'sdevelopment	Dec/Jan		Apr-13	
8	MSH	4.1.9	Luis Gustavo Bastos	Finalisation of e-TB manager	Dec/Jan		Apr-13	
9	MSH	4.1.9	UtikarshSrivastava	Finalisation of e-TB manager/integration of Gx Alert with e-tb manager	hune	Completed	Jun-13	
10	MSH	6.2.7	Samuel Kinyanjui	Finalization of e-tb manager	June	Completed	Jun-13	
11	MSH	6.2.8	Eliud W	Finalisation of SOP tools	Jan/Feb		Apr-13	
12	MSH	6.2.9	Pedro Suarez	TOT on SOP's	Feb/March		Apr-13	
13	MSH	6.2.10	Samuel Kinyanjui	Orientaton for MSH staff/assess pilot phase of e-tb manager	Feb/March	Completed	Apr-13	
14							Apr-13	
Total number of visits conducted (cumulative for fiscal year)							13	
Total number of visits planned in workplan							19	
Percent of planned international consultant visits conducted							68%	

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

## Quarterly Report on Global Fund Engagement

<b>Country</b>	<b>Nigeria OP</b>	<b>Period</b>	<b>April - June 2013</b>
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<b>Current Global Fund TB Grants</b>				
<b>Name (i.e. Round 10 TB)</b>	<b>Average rating*</b>	<b>Current rating</b>	<b>Total approved amount</b>	<b>Total dispersed to date</b>
SSF/TB (1)	B1	A1	\$9.2M	\$5.6M
SSF/TB (2)	B1	B1	\$56.3M	\$39.5M

\*Since January 2010

### **In-country Global Fund status - key updates, challenges and bottlenecks**

The major recipients for Global Fund grant in Nigeria are ARFH and IHVN with current rating of B1 and A respectively. Currently the partners are supporting the NTP in DOTS expansion inclusive of microscopy and logistic management systems. The GF is also supporting the PMDT roll out plan with about 8 MDR treatment centers. However, the major challenges are 1) delay in the disbursement of funds with very high rate of activities yet to be implemented. The amount disbursed to date for IHVN PMDT grant is 60% and while that of ARFH is 48%.

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

TB CARE I provide technical support to through some of the thematic areas especially PMDT, DOTS expansion and through the technical advisory committee. TB CARE I activities are complementary/ in alignment with the current Global Fund plan. TB CARE I is complementing PMDT activities with patient support and second line drugs for 80 patients.

## Inventory List of Equipment - TB CARE I



**USAID**  
FROM THE AMERICAN PEOPLE

**TB CARE I**

<b>Organization:</b>	<b>TB CARE I</b>
<b>Country:</b>	<b>Nigeria OP</b>
<b>Reporting period:</b>	<b>April - June 2013</b>
<b>Year:</b>	<b>APA 3</b>

Description (1)	ID numbers (2)	Acquisition date (3)	Acquisition cost (4)	V.A.T (5)	Location (6)	Condition (7)	Disposition date (8)	Title held by (9)	Insurance Policy #
Laser Printer	VNC3VI5706	5-Dec-11	30.000		Lagos	Good			
Laser Printer	VNC3VI4193	5-Dec-11	30.000		Lagos	Good			
Laser Printer	VNC3309678	5-Dec-11	30.000		Abakaliki	Good			
Laser Printer	VNC3310465	5-Dec-11	30.000		Benin City	Good			
Laser Printer	VNC3VI3641	5-Dec-11	30.000		Gombe	Good			
Laser Printer	VNC3VI3655	5-Dec-11	30.000		Zaria	Good			
Laser Printer		5-Dec-11	30.000		Abuja	Good			
Laser Printer		5-Dec-11	30.000		Office	Good			
Laser Printer		5-Dec-11	30.000		Office	Good			
Blackberry	358966045377009	19-Dec-11	2.800		Office	Good			
Cupboard		14-Mar-12	177.200		Office	Good			
Cupboards & repairs furniture		24-Apr-12	218.350		Office	Good			
Binding machine		25-May-12	20.000		Office	Good			
Office Camera	40019613	16-Jul-12	506		Office	Good			
Dell Latitude Laptop S6420 Dr Gidado		28-Feb-12	175.000		Office	Good			
Hard disc		09-Aug-12	15.000		Office	Good			
Laptop Mrs Jumoke	27554205 5000048	30-Aug-12	755,46		Office	Good			
Laptop Mr Johan	27553820 5000011	02-May-12	1.241,77		Office	Good			
GeneXpert machine	CN-O7TKK5- 72875-ICV-CUAI	20-Jun-12	17.000		Birin Kebbi	Good			

Laser Jet Printer	VNC3V17878	14-Sep-12	30.000		Birin Kebbi	Good		
Microscope	OL81161	28-Aug-12			Kano	Good		
Microscope	OK87369	28-Aug-12			Kano	Good		
Microscope	OK87403	28-Aug-12			Kano	Good		
Microscope	OK87406	28-Aug-12			Kano	Good		
Microscope	OK87611	28-Aug-12			Kano	Good		
Microscope	IC89816	28-Aug-12			Kano	Good		
Microscope	IC89805	28-Aug-12			Kano	Good		
Microscope	OF82397	28-Aug-12			Kano	Good		
Microscope	OF82390	28-Aug-12			Kano	Good		
Microscope	OK87588	28-Aug-12			Kano	Good		
Split Air Conditioner	004 NLXZ000810	31-Jan-11			Office	Good		
Split Air Conditioner	009HATH00673	31-Jan-11			Office	Good		
Split Air Conditioner	006NLYX001074	31-Jan-11			Office	Good		
Split Air Conditioner	006NLEK001300	31-Jan-11			Office	Good		
Split Air Conditioner	009HAWS00729	31-Jan-11			Office	Good		
Split Air Conditioner	006HAXC00058	31-Jan-11			Office	Good		
Split Air Conditioner	009HAUJ00486	31-Jan-11			Office	Good		
Split Air Conditioner	009HAQV00644	31-Jan-11			Office	Good		
GeneXpert machine	CN-07TKK5-72875-ICV-CU71	20-Jun-12	17.000		Uyo	Good		
Laser Jet Printer	VNC3V16395	14-Sep-12	30.000		Uyo	Good		
GeneXpert machine	CN-07TKK5-72872-22B	20-Jun-12	17.000		Akure	Good		
Laser Jet Printer	VNC3V13616	14-Sep-12	30.000		Akure	Good		
GeneXpert machine	CN-07TKK5-7287213-2HZ1	20-Jun-12	17.000		Katstina	Good		
Laser Jet Printer	VNC3V13649	14-Sep-12	30.000		Katstina	Good		
GeneXpert machine	CN-07TKK5-72872-ICV-CT21	27-Aug-12	17.000		Gusau	Good		
Laser Jet Printer	VNC3309656	14-Sep-12	30.000		Gusau	Good		
Microscope + cases	1E83374	2-Aug-12			Osun	Good		
Microscope + cases	1E83301	2-Aug-12			Oyo	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		

Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
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Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases		2-Aug-12			DFB	Good		
Microscope + cases	OK87591	29-Aug-12			Benue	Good		
Microscope + cases	OK87601	29-Aug-12			Benue	Good		
Microscope + cases	OK87454	29-Aug-12			Benue	Good		
Microscope + cases	OF82409	29-Aug-12			Benue	Good		
Microscope + cases	OK87355	29-Aug-12			Benue	Good		
Microscope + cases	OK87775	29-Aug-12			Benue	Good		
Microscope + cases	IC89820	29-Aug-12			Benue	Good		
Microscope + cases	IC89808	29-Aug-12			Benue	Good		
Microscope + cases	IC89818	29-Aug-12			Benue	Good		
Microscope + cases	OH89588	29-Aug-12			Benue	Good		
Microscope + cases	OH89575	17-Sep-12			GLRA	Good		
Microscope + cases	OK87838	17-Sep-12			GLRA	Good		
Microscope + cases	OL81155	17-Sep-12			GLRA	Good		
Microscope + cases	OK87606	17-Sep-12			GLRA	Good		
Microscope + cases	IC89823	17-Sep-12			GLRA	Good		
GeneXpert machine		27-Aug-12	17.000		Office	Good		
Laser Jet Printer		14-Sep-12	30.000		Office	Good		