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TB CARE I

TB CARE I - Zimbabwe

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

January 30, 2012

Quarterly Overview

Reporting Country	Zimbabwe
Lead Partner	The Union
Collaborating Partner:	KNCV, WHO
Date Report Sent	30/01/2012
From	B Nyathi, Country Director
To	Ruth Bulaya Tembo
Reporting Period	October-December 2011

Technical Areas	% Completion
1. Universal and Early Access	8%
2. Laboratories	0%
3. Infection Control	0%
4. PMDT	6%
5. TB/HIV	0%
6. Health Systems Strengthening	22%
7. M&E, OR and Surveillance	5%
Overall work plan completion	6%

Most Significant Achievements

The following were the most significant activities:

1. Development of a human resources for health implementation plan for TB control (2012-2014). This followed a situation analysis, three-day stakeholders workshop to discuss vision, strategies and main activities for HR strategy and implementation plan.
2. Data verification was conducted in one district in each of the 5 provinces using funding from APA 1. The results showed that the quality of data varied extensively across the districts visited. A follow up meeting was held with all district TB Coordinators to discuss data collection, analysis and utilisation at local level. Regular verification exercises will continue.
3. Two health workers underwent training in advanced infection control in South Africa (APA1).
4. Two health workers underwent training in paediatric TB (APA1).

Overall work plan implementation status

The overall implementation status was at 6%. Only the HR development element of the plan was completed.

Technical and administrative challenges

The quarter came to an end before the plan was officially approved in January 2012. To make up for lost time a compressed annual schedule for the remaining nine months has been drawn up (see photo album), after consultation with the NTP as implementing partner. This has worked in the past.

In-country Global Fund status and update

The national TB programme has been advised to reapply for phase 2 of Round 8 (USD 25 million for three years) for July 2012. In the meantime a no cost extension of phase 1 has been granted until June 2012.

Quarterly Technical Outcome Report

Technical Area	1. Universal and Early Access						Highlights of the Quarter	Challenges and Next Steps to Reach the Target	
	Expected Outcomes	Outcome Indicators	Baseline		Target				Result Y2
			Data	Year	Data	Year			
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.2 Eligible children younger than 5 (contacts of ss+ adults) that were put on IPT Indicator Value: Percent Numerator: Number of eligible children younger than 5 (contacts of ss+ adults) who start (given at least one dose) IPT during the reporting period. Denominator: Total number of eligible children younger than 5 (contacts of ss+ adults) during the same reporting period.	Not available	2010	30%	2012	No data	Tools not yet ready	Initial drafts expected to be ready by end of February 2012.	
	1.2.5 Patients receiving community-based support by trained supporter during treatment Indicator Value: Percent Level: Provincial Source: TB register Means of Verification: Numerator: Number of TB patients receiving community-based support by trained supporter during treatment Denominator: Total number of patients notified	30% Numerator 6653 Denominator 22177	2010	50%	2012	No data	Data not yet available	Community based DOT is not yet fully launched. Preliminary activities in progress.	
	1.2.6 Proportion of sputum specimens and results transported to the laboratory by the sputum motorcycle system Indicator Value: Number Level: Provincial Source: TB suspect register Means of Verification: Numerator: Number of sputum specimens transported with results received through the motorcycle transport system Denominator: Total number of sputum specimens examined and results received	Not available	2010	20%	2012	0%	There has been delay in implementing activities that contribute towards this outcome in rural areas partly due to the prolonged preparation process.	Activities planned to start 2nd quarter	
1.3 Reduced patient and service delivery delays (Timing)	1.3.1 Patient Delay Indicator Value: Number (of days or weeks)	Not available	2010	N/A	2012	No data	Studies not commenced	Preparations involving the department of community medicine for the studies are in progress. Studies planned to commence 2nd quarter.	
	1.3.2 Provider Delay Indicator Value: Number (of days or weeks)	Not available	2010	N/A	2012	No data	Studies not commenced	Preparations involving the department of community medicine for the studies are in progress. Studies planned to commence 2nd quarter.	
	1.3.5 Encounters with a provider before diagnosis Indicator Value: Number of encounters	Not available	2010	N/A	2012	No data	Studies not commenced	Preparations involving the department of community medicine for the studies are in progress. Studies planned to commence 2nd quarter.	

Technical Area 2. Laboratories								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y2	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans	2.3.3 Rapid tests conducted Indicator Value: Number of tests Numerator: Annual number of tests (separately for GeneXpert MTB/RIF conducted <u>nationally</u>)	0	2010	500	2012	Data not yet ready	Nil remarkable	Zimbabwe will no longer be part of the multicountry study. NTP has requested that a national study be conducted instead, to inform the development of a national Gene Xpert use algorithm. There are currently no GeneXpert machines in the NTP.
	2.3.4 Rapid tests conducted Indicator Value: Number of tests Numerator: Annual number of tests for GeneXpert MTB/RIF conducted in TB CARE areas	0	2010	200	2012	Data not yet ready	Nil remarkable	Zimbabwe will no longer be part of the multicountry study. NTP has requested that a national study be conducted instead, to inform the development of a national Gene Xpert use algorithm. There are currently no GeneXpert machines in the NTP.

Technical Area 3. Infection Control								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y2	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
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 (37 district hospitals and 5 provincial hospitals) with all three (a+b+c) interventions in place.	Not available	2010	42 (100%)	2012	0%	Intervention a (ie focal persons) are in place in 37 out of 42 institutions. Interventions b and c (ie costed IC plans and monitoring system) not yet in place, but planned to be in place by end of 4th quarter	Infection control plans, budgets and monitoring will be incorporated in the provincial and district review meeting agendas.
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	No	2011	Yes	2012	Not yet		RR tools due to be appropriately revised by third quarter. This will be part of broader revision of tools indicators such as IPT, ART and IC.

Technical Area 4. PMDT								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y2	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
4.1 Improved treatment success of MDR	4.1.4 MDR TB patients who have completed the full course of MDR TB treatment regimen and have a negative sputum culture Indicator Value: Percentage Numerator: Number of MDR TB patients in a cohort who completed a course of MDR treatment and who fit the WHO criteria for cure or completed treatment Denominator: Total number of MDR patients who started treatment in the cohort	100% (1 out of 1)	2010	(24 out of 27) 87%	2012	No data yet	No patients have completed treatment yet.	Pending treatment completion of next cohort

Technical Area 5. TB/HIV								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y2	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
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.	Num = 3529 Deno = 12078 29%	2009	50%	2012	No data yet	Poor performance on this indicator was discussed with the provincial heads during the sensitisation meetings for APA 2 and all provinces are focusing on scaling up the proportion of HIV positive Tuberculosis patients on ART.	Generally the HIV Care is not integrated with TB care at most of the health facilities offering these services. The introduction of the PEPFAR funded integrated care is expected to set up model integrated TB/HIV care services and to facilitate stronger collaboration.
	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.	Num = 8918 Deno = 12078 74%	2009	95%	2012	No data yet	Limited barriers for example nurses can initiate CPT.	

Technical Area 6. Health Systems Strengthening								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y2	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	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	6.2.2 Status of HRD strategic plans implemented Indicator Value: Score (1-3) based on definition.	0	2010	2	2012	2	The development of costed HRD plans was completed during the quarter and the NTP is expected to start the implementation	Funding may not be adequate to implement some of the strategic areas in the plan as funding from Global Fund has been scaled down.
	6.2.3 People trained using TB CARE funds in year 2 Indicator Value: Number of people trained disaggregated by gender and type of training.	466 females 272 males 734 females	2011	550	2012	4	Two health workers were trained in paediatric TB management in South Africa (2 females) using APA1 funding. Two health workers were trained in advanced infection control in South Africa during the quarter using APA 1 budget.	Provinces are currently in the process of identifying untrained health workers to benefit from the planned general TB and TB/HIV training.
	6.2.1 Supervisory visits conducted according to country supervisory standards Indicator Value: Percent Numerator: Number of annual supervisory visits conducted disaggregated by two levels. Denominator: Number of annual supervisory visits planned disaggregated by two levels.	Province to district = 100% (Numerator = 5 visits done, Denominator = 5 planned) 100% District to primary care facility = 100% (Numerator = 37 visits done, Denominator = 37 planned visits)	2011		Province to district 100% (20 visits out of 20 planned) District 100% (148 visits out of 148 planned)	2012	0	This activity is yet to be implemented

Technical Area 7. M&E, OR and Surveillance								
Expected Outcomes	Outcome Indicators	Baseline		Target		Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
		Data	Year	Data	Year			
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	National to province = 5	2011	National to province = 20	2012	0	Draft data collection, analysis and utilisation guidelines were developed to facilitate quality data analysis and use at local level, using APA1 funds. Three pilot districts were identified and sensitisation meetings were conducted with provincial health executives and district health executives. The guidelines were designed to facilitate feedback.	Data collection, Analysis and Utilisation Guidelines are expected to be rolled out to all other provinces in the country if the pilot is successful.
7.3 Improved capacity of NTPs to perform operational research	7.3.1 OR studies completed and results incorporated into national policy/guidelines Indicator Value: Number (of OR studies and instances reported separately)	0	2010	3	2012	0	Provinces have been sensitised and they are already working on research topics and proposals	More basic training in OR is planned in order to facilitate implementation of OR activities

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
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.1	Continue to support the transport system for sputum specimens	The Union	121,562	25%	Sep	2012	Continued to support the three largest cities. Rural districts have been selected and the partner, "Riders" is in the process of mapping out the routes. An evaluation of the sputum transport system in the three cities showed an increased notification rate in Harare and Bulawayo, the percentage of patients with a diagnosis of pulmonary TB without a smear result is much lower in the three cities than in the provinces.
	1.2.2	Strengthen community involvement through community TB treatment supporters.	The Union	55,187	25%	Sep	2012	TB CARE and NTP have engaged selected districts to map out existing community DOT models in different districts, with a view to standardisation and to provide a basis for guidelines.
	1.2.3	Provide supplies and incentives for community TB treatment supporters (as part of 1.2.2 above)	The Union	12,008	25%	Sep	2012	Identified DOT supporters have been issued with sunhats, note books, pens, and T-shirts.
	1.2.4	Facilitate screening for TB at community level	The Union	4,124	0%	Mar	2012	This activity will be piloted in one province (Midlands) and the province has already been sensitised
	1.2.5	Facilitate patient education and community awareness	The Union	6,065	0%	Mar	2012	Adaptation, translation and printing of pamphlets has not yet commenced
	1.2.6	Printing of job aides for paediatric TB management	The Union	6,065	0%	Mar	2012	Preparations are in progress
	1.2.7	Conduct a national training on Paediatric TB	The Union	17,655	0%	Jun	2012	This activity is planned for 3rd quarter
	1.2.8	Development tools for recording and reporting IPT activities in children under 5 years of age	The Union	364	0%	Jun	2012	This activity is planned for 3rd quarter together with other tools
	1.2.9	Strengthen TB case finding in health facilities	The Union	7,277	0%	Mar	2012	The planned reprinting of more TB screening tools are yet to be implemented
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	Conduct 3 studies in 3 provinces to determine: 1. the number of encounters with a health worker before TB diagnosis is made 2. the number of days or weeks from onset of symptoms to first encounter with a qualified health worker 3. the number of days or weeks from sputum collection to initiation of treatment	The Union	4,803	0%	Jun	2012	Working with NTP and the Department of Community Medicine of the University of Zimbabwe to select suitable provinces and MPH students
					8%			

2. Laboratories								Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	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	Participate in a multi - country GeneXpert evaluation in collaboration with other local partners partners in Zimbabwe	The Union	36,387	0%	Sep	2012	Zimbabwe will no longer participate in the multicountry study. However the NTP is keen to conduct national studies to inform the development of algorithms for the use of the Xpert MTB/RIF. The unit will be based in the national reference laboratory, where it will continue to be used for routine work after the completion of the studies.		
					0%					

3. Infection Control								Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year			
3.2 Scaled-up implementation of TB-IC strategies	3.2.1	Strengthen IC human resource capacity	The Union	10,375	0%	Sep	2012	The course is not yet due. Two health workers were trained in advanced infection control during the quarter, using the APA 1 budget.		
3.3 Strengthened TB IC Monitoring & Measurement	3.3.1	Develop recording and reporting tools to capture infection control data including health care workers acquiring TB disease	The Union	1	0%	Dec	2011	This is running late and now planned for 2nd quarter, together with 5.3.2 and 5.3.3		
					0%					

4. PMDT								Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year			
4.1 Improved treatment success of MDR	4.1.1	Strengthen hospital management and care of people with drug resistant TB	The Union	34,082	0%	Sep	2011	This activity is yet to be implemented		
	4.1.2	Provide support for the Drug Resistance Survey (DRS) - part 1	KNCV	34,599	25%	Sep	2012	This is a continuation of assistance provided in APA1, and is ongoing. However the planned piloting exercise has not yet commenced.		
	4.1.3	Provide support for the Drug Resistance Survey (DRS) - part 2	KNCV	6,164	0%	Sep	2012	This is about monitoring of the DRS process by an external consultant and has not yet commenced.		
	4.1.4	Provide support for the Drug Resistance Survey (DRS) - part 3	KNCV	18,700	0%	Mar	2012	Backup services by the KNCV head office is ongoing.		
	4.1.5	Provide support for the Drug Resistance Survey (DRS) - part 4	WHO	8,362	25%	Sep	2012	Field technical support WHO is ongoing		
	4.1.6	Complete development of MDR training materials	WHO	14,210	0%	Jun	2012	This is a continuation of work commenced in APA1 and is yet to be implemented.		
	4.1.7	Training of health workers participating in the DRS	WHO	40,341	0%	Sep	2012	This activity is yet to be implemented		
	4.1.8	Provide support supervision during DRS	WHO	5,407	0%	Sep	2012	This activity is yet to be implemented		
					6%					

5. TB/HIV									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date	
						Month	Year		
5.3 Improved treatment of TB/HIV co-infection	5.3.1	Support the revision and update of the TB/HIV guidelines	The Union	25,228	0%	Mar	2012	Terms of reference being developed	
	5.3.2	Support the revision of TB/HIV collaboration recording and reporting tools to facilitate the inclusion of key indicators on TB/HIV and IPT (quarterly notification summaries); and Infection Control tools	The Union	3,396	0%	Dec	2011	Linked to 3.3.1 above and 5.3.3 and now planned for 2nd quarter	
	5.3.3	Support the finalisation of the TB/HIV collaboration and Infection Control recording and reporting tools	The Union	4,852	0%	Mar	2012	Linked to 3.3.1 above and 5.3.2 and planned for 2nd quarter	
	5.3.4	Conduct a study to determine barriers for ART uptake among HIV positive TB patients	The Union	13,039	0%	Jun	2012	This activity is yet to be implemented. Principal investigator has been identified.	
					0%				

6. Health Systems Strengthening								
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
						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	Conduct support supervision from province to districts	The Union	91,877	0%	Sep	2012	This activity is yet to be implemented. A schedule for all five provinces has been developed
	6.2.2	Conduct supervision from districts to peripheral health facilities	The Union	532,873	0%	Sep	2012	This activity is yet to be implemented
	6.2.3	Support production of training materials for recording and reporting	The Union	37,297	0%	Jun	2012	This activity is yet to be implemented
	6.2.4	Train health workers in PMDT	The Union	45,417	0%	Jul	2012	MDR course planned for 30 July - 3 August 2012
	6.2.5	Train health workers in TB related management (IMDP)	The Union	56,739	0%			Course planned for 20-25 August 2012
	6.2.6	Facilitate regular report - back for TB CARE implementation progress	The Union	11,607	0%	Sep	2012	First meeting planned for 2 February 2012
	6.2.7	Facilitate access to latest TB information	The Union	11,326	50%	Sep	2012	Receipt of the IJTLD by provinces and cities has commenced. Arrangements in progress for the AIDS journal
	6.2.8	Support general TB management training	The Union	318,381	0%	Sep	2012	Schedules have been drawn up for the training of health workers not trained before
	6.2.9	Facilitate a platform for expert TB input into policy formulation	The Union	7,763	0%	Sep	2012	Terms of reference and membership of the TB expert committee being revised
	6.2.10	Provide regular international technical support to the TB CARE team	The Union	10,516	25%	Sep	2012	Ongoing services of The Union HIV coordinator
	6.2.11	Provide overall program technical oversight	The Union	42,283	25%	Sep	2012	Ongoing services of The Union TB and HIV Director. Country visit planned for 3rd quarter
	6.2.12	Facilitate external technical assistance for programme management	The Union	32,760	0%	Sep	2012	First country visit planned for 2nd quarter
	6.2.13	Improved training capacity at national level	The Union	8,891	0%	Sep	2012	Work in progress to identify suitable course
	6.2.14	Participate in international TB control review meeting	The Union	29,110	0%	Sep	2012	Logistics for the The Union conference to be completed in 4th quarter

6.2.15	Support development of Global Fund Round 11 proposal	WHO	11,227		0%	Dec	2011	Global Fund Round 11 shelved. The GF has also postponed the start of GF R8 Phase II to July 2012. NTP has crucial activities that need to be supported before then. It is proposed that funds for this activity be utilized instead to support these crucial activities. Decision on specific activities will be made in consultation with the NTP and will be shared soon.
6.2.16	Support the development of a human resource strategic plan and implementation plan	KNCV	29,254		100%	Mar	2012	Activity completed ahead of time. Document awaits printing
6.2.17	Support HRD strategic plan write up workshop	WHO	5,226		100%	Mar	2012	Activity completed ahead of time, with Global Fund support. Funds still required for printing HRD plan
6.2.18	Support costing of the HR plan & development of HR annual implementation plan	KNCV	16,027		100%	Mar	2012	Activity completed ahead of time
6.2.19	Conduct administrative and financial support, including 2 country visits, by The Union head office	The Union	9,824		25%	Sep	2012	Ongoing
					22%			

7. M&E, OR and Surveillance									
Outcome	Activity #	Activity	Activity Leader	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date	
7.2 Improved capacity of NTPs to analyze and use quality data for management of the TB program	7.2.1	Facilitate data analysis, report writing and feedback at national level	The Union	1,128	0%	Sep	2012	Quarterly meetings of a small group at national level to analyse TB data from the provinces, draft quarterly reports and provide feedback to the provinces, will commence in the 2nd quarter.	
	7.2.2	Support biannual data verification (audit) exercise	The Union	30,626	25%	Sep	2012	Data verification was conducted in one district in each of the 5 provinces using funding from APA 1. The results showed that the quality of data varied extensively across the districts visited. A follow up meeting was held with all district TB Coordinators to discuss data collection, analysis and utilisation at local level. Regular verification exercises will continue.	
	7.2.3	Facilitate district annual performance review and planning meetings	The Union	284,522	0%	Sep	2012	This activity is yet to be implemented, but time schedules have been drawn up	
	7.2.4	Conduct provincial biannual Performance and planning meetings	The Union	143,729	0%	Aug	2012	This activity is yet to be implemented, but time schedules have been drawn up	
	7.2.5	Facilitate feedback and information sharing through printing of reports	The Union	2,729	0%	Sep	2012	Funding to print national, provincial and district quarterly reports will be made available from the 2nd quarter	
	7.2.6	Facilitate national TB programme performance review	The Union	28,564	0%	Sep	2012	The annual national TB review meeting is planned for the 4th quarter	
	7.2.7	Conduct 2 regional meetings to launch the Data Collection, Analysis and Utilisation Guidelines (82 people for 1.5 days - 1 person per district, 1 per province, 5 facilitators)	The Union	30,534	0%	Sep	2012	Planned for the 3rd quarter	
	7.2.8	Print 5000 copies of the Data Collection, Analysis and Utilisation Guidelines	The Union	10,613	0%	Sep	2012	Planned for the 3rd quarter	
	7.2.9	Conduct a 3 day workshop for 15 people to develop training materials for recording and reporting Conduct a pilot Training of Trainers (TOT) workshop for 30 people for 5 days for the recording and reporting and local use of data for decision making	The Union	37,297	0%	Jun	2012	Planned for the 3rd quarter	
	7.2.10	Develop and print 300 copies of the Union/TB CARE Zimbabwe Annual Report	The Union	2,911	25%	Sep	2012	Planned for the 3rd quarter	
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 operational research	7.3.1	Support operations research training	The Union	10,004	0%	Sep	2012	Planned for the 4th quarter	
	7.3.2	Facilitate continuing medical education in TB including presentation of research findings from local and international TB researchers as well as developing the national research agenda	The Union	11,535	0%	Sep	2012	Planned for the 4th quarter	
	7.3.3	Facilitate conduct of operations research	The Union	14,676	25%	Sep	2012	APA 1 activities ongoing Provinces sensitised on cotinuing support in APA2	
	7.3.4	Conduct 3 meetings for Operations Research for 16 people (11 participants & 5 facilitators) for a total of 7 days	The Union	27,174	0%	Sep	2012	Planned for the 3rd quarter	
					5%				

Quarterly MDR-TB Report

Country	Zimbabwe
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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	40	27
Jan-Sep 2011	47	25
Oct-Dec 2011	20	15
Total 2011	67	40

Quarterly GeneXpert Report

Country	Zimbabwe
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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	1	Jul-12
# Cartridges	0	0	0	0	Jul-12

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
Planned	1	4	Reference laboratory, Bulwayo	TB CARE	The Union, NTP

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)

Cartridges are planned to be provided by other partners

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.