



CHALLENGE TB



Challenge TB - Vietnam

Year 2

Quarterly Monitoring Report October-December 2015

Submission date: January 30, 2016

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Cover photo:

NTP and Challenge TB jointly organized the launching session on implementation of a new TB drug (Bedaquiline) and regimen (9 months) for treatment of drug resistant TB in Vietnam on 25 November 2015. At the event, USAID representative – Dr. John Eyres, Director of the Office of Public Health, USAID Vietnam - announced that Bedaquiline, the first new antibiotic to fight drug-resistant tuberculosis (TB) in over 40 years, is now available in Vietnam through a partnership between USAID and Janssen Therapeutics of Johnson & Johnson. This innovative partnership is a significant step forward in the global fight against the growing health threat of antibiotic-resistant bacteria.

Photo: KNCV \ Challenge TB Vietnam

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Disclaimer

The authors' views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

1. Quarterly Overview

| | |
|--------------------|-------------------------------|
| Country | Vietnam |
| Lead Partner | KNCV Tuberculosis Foundation |
| Other partners | WHO |
| Workplan timeframe | October 2015 – September 2016 |
| Reporting period | October - December 2015 |

The Challenge TB (CTB) Vietnam Year 2 workplan (APA2) was approved in early November 2015. However, the implementation of APA2 is pending due to a recent revision of the workplan according to the new PEPFAR guidance on Expenditure Analysis in 2015. This report is for the APA1 ongoing activities implemented in October – December 2015.

Most significant achievements:

Sub-Obj. 2. Comprehensive, high quality diagnostics

- Improved access to rapid drug resistance testing - In the first quarter of APA 2, 20 new GeneXpert systems were purchased with financial support of Global Fund's New Funding Mechanism (GF NFM), installed and made operational with technical support by the CTB country team. CTB has provided Technical Assistance (TA) to cartridge supply including quantification, forecasting, ordering, distribution, etc.
- Technical support in bio-safety for laboratory renovation (risk assessment, design, etc.) was provided to the three PMDT provinces; Ha Tinh, Quang Tri and Ba Ria – Vung Tau.

Sub-Obj. 3. Patient-centered care and treatment

- New TB drug Bedaquiline (BDQ) introduced in the country - NTP/MOH and CTB jointly organized the launching session of a new TB drug and regimen for treatment of drug resistant TB in Vietnam on 25th November 2015. The event was attended by about 100 participants including high ranking officials from Ministry of Health, NTP, National Lung Hospital, the National Center for Drug Information and Adverse Drug Reactions Monitoring, provincial Departments of Health, provincial TB hospitals, and representatives from international organizations including USAID, WHO, KNCV, CHAI and mass media agencies. At the workshop, USAID representative – Dr. John Eyres, Director of the Office of Public Health, USAID Vietnam - announced that Bedaquiline (BDQ), the first new medication to fight drug-resistant tuberculosis (DRTB), and is now available in Vietnam. The new drug and regimen is implemented in three provinces of Hanoi, Ho Chi Minh City and Can Tho for a total of 100 patients. In the workshop, MOH and NTP showed their strong commitment to introducing new drugs and treatment strategies and ensuring that the introduction of such drugs and regimens can maximize the benefits of patients, communities, and programs while minimizing the risks to these populations. As of December 31, 2015, 3 XDR-TB patients have been screened and enrolled on a BDQ containing treatment regimen.

Sub-Obj 5. Infection control

- Improved TB-IC measures in health facilities - In this quarter, training on TB-IC for NTP and NAP staff was conducted for 199 participants (87 male and 112 female) in 3 more provinces (Dong Nai, Ba Ria– Vung Tau, Thai Nguyen), where TB and HIV services will be integrated at district level. After the training, participants were asked to do a TB-IC assessment in their health facilities and develop TB-IC improvement plans based on the TB-IC assessment results.

Sub-objective 10. Quality data, surveillance and M&E

- In collaboration with VAAC and NTP, a needs assessment and situational assessment regarding functioning of the HIV, TB-HIV reporting and recording systems was conducted by CTB/KNCV consultant from 5-9 October 2015. This surveillance system assessment is a follow-up step after the recent

assessment of HIV/TB collaboration and identification of barriers to care and the identification of strategies for further development and strengthening of comprehensive HIV-TB case management and control. Three noteworthy models for the further development of the TB/HIV and HIV recording and reporting were presented and discussed as a basis for VAAC decisions and implementation planning.

Technical/administrative challenges and actions to overcome them:

The Year 2 workplan was approved in early November 2015, but implementation is delayed because of a recent revision of the workplan according to the new guidance in PEPFAR expenditure analysis report.

2. Year 2 activity progress

CTB workplan Year 2 (APA2) has not yet obtained final USAID approval and hence is not yet implemented. The below table is a report of APA1 ongoing activities based on the APA1 M&E.

| Sub-objective 1. Enabling environment | | | | | | | | |
|---|------------|--|--------------|--------------|----------|---|--|---|
| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| Policy discussion with MOLISA | 1.4.2 | Dissemination workshop and policy discussion | | | | Assessment result was disseminated with leaders of Social protection department of MOLISA | Met | |

| Sub-objective 2. Comprehensive, high quality diagnostics | | | | | | | | |
|--|------------|--|--------------|--------------|----------|--|--|---|
| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| Introduce a routine assessment of diagnostic effort: TA to chain analysis, monitoring and evaluation of diagnostic algorithms leading to the early diagnosis of TB, TB\HIV and MDR TB. | 2.1.1 | 3 TOT trainings in 3 regions and pilot in 3 provinces Assessment tools incorporated in NTP M&E guidelines | | | | The training on-the-spot on chain analysis of diagnostic efforts according to diagnostic algorithms was conducted in combination with #3.2.1 for NTP staff in 3 provinces of Hanoi, HCMC and Cantho in December 2015. The assessment method was reported to NTP for reviewing and incorporating in M&E activity. | Met | |

| | | | | | | | | |
|---|-------|---|--|--|--|---|------------|--|
| TA on implementation, monitoring and evaluation of advanced diagnostic algorithms (Xpert - SL Hain - conventional DST) | 2.3.1 | Evaluation of pilot and possible adjustment - advanced diagnostic algorithms incorporated in NTP guidelines | | | | The advanced diagnostic algorithms were developed and included in the SOP guidelines in introduction of new drugs (Bedaquiline) and new 9-month regimen for MDR-TB patients. | Met | |
| TA to roll out of GeneXpert in the country - Contribution by experts to NTP trainings on GXP implementation in TB & HIV settings; Provide TA on Xpert MTB\RIF cartridge supply: forecast, procurement, distribution and reporting | 2.4.1 | Local experts contribute to training in expansion provinces | | | | CTB staff contributed to the implementation training for 16/20 (80%) new Xpert sites under GFATM 2015 work plan. Training for the last 4 new sites will take place in January 2016. Frequent TA has been provided to cartridge supply chain from forecasting of the need for Q4 2015 and Q1 2016, ordering a shipment of 23.600 cartridges for the above-mentioned period, reviewing consumption data on monthly basis and distribution for use in Q4 2015. CTB also supported the NTP in planning and processing the procurement of replacement parts (module, CPU, warranty extension) for 8 partly/fully out-of-work Xpert | Met | |

| | | | | | | | | |
|---|-------|---|--|--|--|---|----------------------|--|
| | | | | | | systems and a number of modules for in-country stock to reduce trouble shooting down-time using GF 2015 funding. | | |
| TA to roll out of GeneXpert in the country - Supervision: Bi-annual supervision of Xpert sites; TA to monitoring and routine data collection (including revision of monitoring tools and HIV satellite sites): Monthly meeting with NTP GXP TWG | 2.4.1 | Supervision visit in selected Xpert sites | | | | Supervision visits were paid to 2 provinces (HCM city and Tien Giang) in November to assess the cartridge distribution and management capacity for south region and revise the process and possibilities of relevant party in terms of cartridge management at south region. Two monthly meetings of the GeneXpert TWG and PMDT were held on 14 October and 3 November. | Met | |
| Specimen referral system including OPCs | 2.6.1 | Follow-up of first M&E results | | | | Draft indicators and data collection form was developed. | Partially met | The indicators and data collection form will be discussed and finalized in the next quarter. This activity is less priority in this period since GeneXpert has been placed in all 45 PMDT provinces. |
| Local TA to lab biosafety improvement in support of recent legislation based on TB CARE I work and TB-IC improvement in PMDT provinces. | 2.7.1 | 9 PMDT provinces (Cumulative of Y1): Lab and MDR-TB treatment sites | | | | As per request from NTP for technical assistance, CTB\KNCV continued to provide technical support in improving bio-safety conditions for the labs | Partially met | |

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | renovation plans (designs and estimated budget) are ready for NTP/local authorities to provide financial support | | | | and TBIC condition in the MDR-TB treatment department in 2 PMDT provinces of Quang Tri and Ha Tinh in November and Ba Ria – Vung Tau in December 2015 made a total of 7/9 PMDT sites in 2015 | | |
|--|--|--|--|--|--|--|--|--|

Sub-objective 3. Patient-centered care and treatment

| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (<i>reason for not meeting milestone, actions to address challenges, etc.</i>) |
|---|------------|--|--------------|--------------|----------|---|--|--|
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| TA (international and local) and supportive supervision to roll out childhood TB policies in other provinces with GF funds; TA to measuring effect of new national childhood TB strategy on notification of childhood and treatment results in children | 3.1.2 | Data collection, analysis and report writing | | | | The data have been collected from 701 communes of 37 districts of 4 pilot provinces. Data were entered, cleaned and analyzed. Report will be written. | Partially met | The report will be prepared and finalized in the next quarter |
| Improvement of MDR-TB treatment quality: | 3.2.1 | QICA applied in all NTP M&E visits in PMDT sites | | | | On the spot training on Quarterly Interim Cohort Analysis (QICA) was conducted for PMDT provincial staff in Hanoi, HCMC and Can tho in December 2015. QICA is being applied first in 3 selected provinces for introduction of new | Met | |

| | | | | | | | | |
|--|-------|--|--|--|--|---|------------|--|
| | | | | | | drug and regimen and will be rolled out to other PMDT provinces in 2016. | | |
| TA to introduction of new drugs, M&E, OR and pharmacovigilance | 3.2.2 | | | | | <ul style="list-style-type: none"> • NTP/MOH and CTB jointly organized the Workshop on implementation of new TB drug and regimen for treatment of drug resistant TB in Vietnam on 25 November 2015. • USAID representative – Dr. John Eyres, Director of the Office of Public Health, USAID Vietnam – attended and delivered the remarks • The new drug and regimen is implemented in 3 provinces of Hanoi, Ho Chi Minh City and Can Tho for a total of 100 patients. • MOH and NTP showed their strong commitment to introducing new drugs and treatment strategies • As of December 31, 2015, 3 XDR- | Met | |

| | | | | | | | | |
|---|-------|-----------------|--|--|--|--|------------|--|
| | | | | | | TB patients have been screened and enrolled in BDQ pilot project. | | |
| Monitoring and assessment of palliative care/end of life care (focus on MDR-TB/TB/HIV patients) | 3.2.4 | Monitoring done | | | | Monitoring done in 3 provinces of Hanoi, HCMC and Can tho. The findings and recommendations for improvement of this activity were discussed with local staff and NTP at central level. | Met | |

| Sub-objective 5. Infection control | | | | | | | | |
|--|------------|--|--------------|--------------|--|--|--|---|
| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| Improvement of TB-IC measures in HIV/AIDs and TB/HIV facilities at district levels for TB\HIV collaborative activities | 5.1.1 | | | | For milestones, see sub-activity 5.1.1.1 – 5.1.1.3 | | Choose an item. | |
| a) Three-day trainings on TB-IC for TB and HIV staff at provincial and district levels in 4 selected provinces implementing TB/HIV collaborative activities at District Health Centers | 5.1.1.1 | Trainings on TB-IC organized in 4 selected provinces | | | | In this quarter, training on TBIC were conducted for 199 NTP and NAP staff (87 male, 112 female) in 3 provinces made a total of 4 provinces in APA1: i) in Ba Ria – Vung Tau province on 14-16 October with 51 participants (20 male, 31 female), ii) in Dong Nai province on 19-21 October with 63 participants | Met | |

| | | | | | | | | |
|---|---------|--|--|--|--|--|------------|--|
| | | | | | | (35 male, 28 female), iii) in Thai Nguyen province on 4-6 Jan with with 85 participants (32 male, 53 female). Participants are asked to do TBIC facility assessment and develop TBIC improvement plan in their locations. | | |
| b) TB-IC facility assessment and development of TB-IC facility plans will be conducted by trainees (DTU and OPC staff) with TA by local consultants (KNCV, NTP (national and local) and National Institute of Hygiene and Epidemiology (NIHE) in selected District Health Centers where TB/HIV collaborative activities implemented | 5.1.1.2 | TB-IC facility assessment conducted in 4 selected and TB-IC facility plans developed in 4 provinces (2districts each province) | | | | In collaboration with NTP and NAP staff at provincial level, TB-IC facility assessment was conducted in 8 districts in 3 provinces of Dong Nai (2 districts, on 22-23 October), Ninh Binh (3 districts on 11-13 November) and Ba Ria – Vung Tau (3 districts, on 28-31 December) with TA by CTB team. The results of TB-IC facility assessment were used for TB-IC facility improvement planning. The TB-IC facility improvement plans have been developed by district and provincial level and will be approved by NTP and CTB. | Met | |
| c) Implementation of TB-IC facility improvement plans by District TB Units, monitoring by the KNCV | 5.1.1.3 | TB-IC facility improvement plans implemented | | | | TB-IC facility improvement plan were implemented in 2 districts of Dong Nai | Met | |

| | | | | | | | | |
|---|-------|--|--|--|--|--|---|------------|
| country office, in collaboration with national partners | | d in 2 selected districts | | | | | | |
| TB-IC surveillance implementation and roll out | 5.2.1 | Data from 67 national and provincial TB Units and 700 DTU collected and analyzed | | | | | In this quarter, the TB-IC data collection sheets from 67 national and provincial TB Units and more than 700 DTUs were collected, cleaned and analyzed. | Met |

Sub-objective 7. Political commitment and leadership

| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
|--|------------|--|--------------|--------------|----------|------------------|--|---|
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| TA for development of rational funding mechanism for TB control during transitional period (shifting from National target program to health insurance and donor exit duration) | 7.2.2 | Roadmap of rational funding for TB control developed | | | | | The final draft was developed and circulated to MoH's departments for comments | Met |

Sub-objective 8. Comprehensive partnerships and informed community involvement

| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
|--|------------|---------------------|--------------|--------------|----------|------------------|---|---|
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| Project monitoring and supervision for CTB country staff | 8.1.3 | Project supervision | | | | | In this quarter, the CTB team carried out 6 monitoring visits and trainings in Nam Dinh, Ninh Binh (5-7 October 2015), Ba | Met |

| | | | | | | | | |
|---|-------|---------|--|--|--|--|------------|--|
| | | | | | | Ria, Vung Tau and Dong Nai (13-23 October 2015); Hung Yen and Ninh Binh (10-13 November 2015); Quang Tri and Ha Tinh (17-20 November 2015); HCMC (20-21 December 2015); Lam Dong and Ba Ria Vung Tau (23-31 December 2015); For GenXpert support, CTB team carried out 3 field trips in this quarter: HCMC and Tien Giang (11-12 November) Hue (15-17 December 2015); Hung Yen (28-30 December 2015) | | |
| International meeting/workshop (WHO-WPR, Union, etc.) | 8.1.4 | Meeting | | | | CTB staff participated in the UNION Word Conference on Lung Health in Cape Town, SA in Nov-Dec | Met | |

Sub-objective 10. Quality data, surveillance and M&E

| Planned Key Activities for the Current Year | Activity # | Planned Milestones | | | | Milestone status | Milestone met? (Met, partially, not met) | Remarks (reason for not meeting milestone, actions to address challenges, etc.) |
|---|------------|--|--------------|--------------|----------|---|--|---|
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Year end | Oct-Dec 2015 | | |
| TA for NTP to have ownership of finalizing eTBM upon NTP's needs, system maintenance and data management. | 10.1.1 | NTP central can revise/editing the system based on their needs | | | | The updated version is accomplished and has been tested in HCMC and Nam Dinh by NTP IT focal person | Met | eTBM Vietnamese version will be updated regularly in line with required updates from PMDT group |

| | | | | | | | | |
|--|--------|---|--|--|--|---|----------------|---|
| TA to further development of VITIMES | 10.1.2 | 1 TA mission visit | | | | This activity was canceled | Not met | The mission was canceled as act. 10.1.3 was given higher priority |
| Needs assessment and situational assessment regarding the TB and HIV surveillance and program information management systems, analysis of the functioning of the current reporting/recording system, and the set of requirements from the TB and HIV sides for the combined system(s). | 10.1.3 | Assessment done Assessment report available. The assessment mission will result in an overview of the current status of the eRR systems and the options for development towards interoperability or (partial) integration, in line with the set of requirements | | | | In collaboration with VAAC and NTP, a needs assessment and situational assessment regarding functioning of the HIV, TB-HIV reporting and recording systems was conducted by CTB/KNCV consultant from 5-9 October 2015. This surveillance system assessment is a follow-up step after the recent assessment of HIV/TB collaboration and identification of barriers to care and the identification of strategies for further development and strengthening of comprehensive HIV-TB case management and control. Three noteworthy models for the further development of the TB/HIV and HIV recording and reporting were presented and discussed as a basis for VAAC decisions and implementation planning. | Met | |

| | | | | | | | | |
|---|---------------|--|--|--|--|--|-----------------------|--|
| <p>Technical support to writing a development plan for the HIV, TB/HIV electronic surveillance/program management system with clear steps, timelines, milestones and benchmarks</p> | <p>10.1.4</p> | <p>Plan is ready for the development of an eR&R for HIV and TB/HIV</p> | | | | <p>This activity was postponed to APA2</p> | <p>Not met</p> | <p>The needs assessment and situational assessment regarding functioning of the HIV, TB-HIV reporting and recording systems (10.1.3) was delayed and conducted in October (APA2) consequentially this activity was postponed to APA2 from Q2 to Q4</p> |
|---|---------------|--|--|--|--|--|-----------------------|--|

3. Challenge TB's support to Global Fund implementation in Year 2

Current Global Fund TB Grants

| Name of grant & principal recipient (i.e., TB NFM - MoH) | Average Rating* | Current Rating | Total Approved Amount | Total Disbursed to Date | Total expensed (if available) |
|---|-----------------|----------------|-----------------------|-------------------------|-------------------------------|
| The GFATM Round 9 for Tuberculosis Control in Vietnam (MoH) | A1 | A | US\$41,896,473 | US\$41,896,473 | US\$38,729,862 |
| Scaling up MDR TB Control and Prevention in Vietnam | n/a | n/a | US\$39,434,456 | US\$10,821,606 | n/a |
| | | | | | |

* Since January 2010

In-country Global Fund status - key updates, current conditions, challenges and bottlenecks

Key updates:

- 1st September, 2015: Completing the signing of an Aid Commitment between the Global Fund and National Lung Hospital;
- 5th November, 2015: The Prime Minister approved the project content "Strengthening and scaling up MDR-TB in Vietnam" (NFM Period 7/2015-2017);
- 18th November, 2015: The Ministry of Health approved the project content "Strengthening and scaling up MDR-TB in Vietnam" (NFM Period 7/2015-2017).

Challenges and bottlenecks:

- Program management:
 - Slow process for approving the project and annual plan influences on the implementation progress, especially the procurement;
 - Reducing training/workshop budget which helps for the learning and experience-sharing purposes while extending the scope of project implementation and applying new techniques are expected.
- Procurement: harmonize between the policies of Global Fund and Vietnamese government
- Finance management: Changes in financial regulations / policies of the sponsors

Challenge TB & Global Fund - Challenge TB involvement in GF support/implementation, any actions taken during this reporting period

TB joint Program Review 2011-2015 was conducted between 19-30 October 2015 by an independent group of international consultants and experts from WHO, GDF, USAID and the Global Fund. Challenge TB staff (WHO) was a member of the review team. The result was disseminated to MoH and all partners of the Viet Nam Stop TB Partnership.

The review team showed key challenges and recommendations for NTP in 2016-2020, and especially pointed out the opportunities and challenges in NTP financing when shifting from a National Target Program to health insurance coverage and ending of donor support. The review team also urged NTP to advocate MoH and engage other sectors than health in TB control.

4. Success Stories – Planning and Development

| | |
|---|--------------------------------------|
| Planned success story title: | |
| Sub-objective of story: | |
| Intervention area of story: | |
| Brief description of story idea: | |
| Status update: | |
| | No success story for APA 2 Quarter 1 |

5. Quarterly reporting on key mandatory indicators

Table 5.1 MDR-TB cases detected and initiating second line treatment in country (national data)

| Quarter | Number of MDR-TB cases detected | Number of MDR-TB cases put on treatment | Comments: |
|--------------|---------------------------------|---|--|
| Total 2010 | 202 | 97 | 3 XDR-TB patients were screened and enrolled in 2015 for BDQ containing treatment regimen. |
| Total 2011 | N/A | 578 | |
| Total 2012 | 774 | 713 | |
| Total 2013 | 994 | 957 | |
| Total 2014 | 1,702 | 1,522 | |
| Jan-Mar 2015 | NA | 379 | |
| Apr-Jun 2015 | NA | 514 | |
| Jul-Sep 2015 | NA | 529 | |
| Oct-Dec 2015 | NA | 608 | |
| Total 2015 | NA | 2,030 | |

Table 5. 2 Number and percent of cases notified by setting (i.e. private sector, prisons, etc.) and/or population (i.e. gender, children, miners, urban slums, etc.) and/or case finding approach (CI/ACF/ICF)

| | | Reporting period | | | | | Comments | |
|--|--|--|--------------|--------------|---------------|-------------------|--|--|
| | | Oct-Dec 2015 | Jan-Mar 2016 | Apr-Jun 2016 | Jul-Sept 2016 | Cumulative Year 2 | | |
| Overall CTB geographic areas | TB cases (all forms) notified per CTB geographic area <i>(List each CTB area below - i.e. Province name)</i> | | | | | | NTP data of Q4 2015 (Oct – Dec) is not yet available in the NTP RR system. It takes time to collect the quarterly reports from district level: Districts submit the report to provinces and from provinces to national. Not all districts implemented e-surveillance (Vitimes) | |
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| | | | | | | | | |
| | | TB cases (all forms) notified for all CTB areas | | | | | | |
| | | All TB cases (all forms) notified nationwide (denominator) | | | | | | |
| | % of national cases notified in CTB geographic areas | | | | | | | |
| Intervention (setting/population/approach) | | | | | | | | |
| Choose an item. | CTB geographic focus for this intervention | | | | | | | |
| | TB cases (all forms) notified from this intervention | | | | | | | |
| | All TB cases notified in this CTB area (denominator) | | | | | | | |
| | % of cases notified from this intervention | | | | | | | |
| Choose an item. | CTB geographic focus for this intervention | | | | | | | |
| | TB cases (all forms) notified from this intervention | | | | | | | |
| | All TB cases notified in this CTB area (denominator) | | | | | | | |
| | % of cases notified from this intervention | | | | | | | |
| Choose an item. | CTB geographic focus for this intervention | | | | | | | |
| | TB cases (all forms) notified from this intervention | | | | | | | |
| | All TB cases notified in this CTB area (denominator) | | | | | | | |
| | % of cases notified from this intervention | | | | | | | |

6. Challenge TB-supported international visits (technical and management-related trips)

The information in the table is the international technical visits in the approved Challenge TB Year 1

| # | Partner | Name of consultant | Planned quarter | | | | Specific mission objectives | Status (cancelled, pending, completed) | Dates completed | Duration of visit (# of days) | Additional Remarks (Optional) |
|---|---------|---|-----------------|-----|-----|-----|--|--|-----------------|-------------------------------|-------------------------------|
| | | | Q 1 | Q 2 | Q 3 | Q 4 | | | | | |
| 1 | KNCV | Agnes Gebhard, KNCV senior consultant | | | | | Provide TA for PMDT policy, development, implementation and roll out with aims to support NTP\PMPT to improve MDR-TB patient management and PMDT data quality and supportive systems | Complete | 21 March 2015 | 5 days | |
| 2 | | Agnes Gebhard (KNCV TB senior consultant) | | | | | Situational assessment of access to prevention, diagnosis and care for TB for PLWH | Complete | 27 Jun 2015 | 12 | |
| 3 | | Clemens Richter (KNCV HIV consultant) | | | | | Situational assessment of access to prevention, diagnosis and care for TB for PLWH | Complete | 27 Jun 2015 | 12 | |
| 4 | | Edine Tiemersma (KNCV senior research consultant) | | | | | Prevalence survey: TA to design, including innovative techniques, study of risk factors, SES data; Quality assurance of data collection; TA to analysis | Complete | 3 Jul 2015 | 5 | |
| 5 | | Job van Rest (KNCV surveillance consultant) | | | | | Prevalence survey: TA to design, including innovative techniques, study of risk factors, SES data; Quality | Complete | 3 Jul 2015 | 5 | |

| | | | | | | | | | | |
|----|------|--|--|--|--|--|-----------|-------------|--------|--------------------------------------|
| | | | | | | assurance of data collection; TA to analysis | | | | |
| 6 | KNCV | Agnes Gebhard, KNCV senior consultant | | | | Provide TA for PMDT policy, development, implementation and roll out with aims to support NTP\PMDT to improve MDR-TB patient management and PMDT data quality and supportive systems | Complete | 21 Aug 2015 | 5 days | |
| 7 | KNCV | Steve Graham, Associate Professor of International Child Health, University of Melbourne Department of Paediatrics - Chair of WHO Childhood TB sub-group | | | | Provide TA in evaluation of new strategy and updated policies for management of TB in children | Complete | 18 Sep 2015 | 5 | |
| 8 | KNCV | Agnes Gebhard, KNCV senior consultant | | | | TA to planning workshop on TB-HIV collaborative | Complete | 21 Aug 2015 | 5 days | Combined with TA mission visit in #6 |
| 9 | KNCV | Job van Rest - TB surveillance consultant - KNCV | | | | TA to assessment of the functioning of the current reporting and recording systems for TB and HIV and conduct an assessment of TB/HIV surveillance activities at national, provincial and district level | Complete | 9 Oct 2015 | 5 days | |
| 10 | KNCV | Job van Rest - TB surveillance consultant - KNCV | | | | TA to further development of Vitimes (fully patient based, interoperable with e-TB manager), system | Cancelled | | | |

| | | | | | | | | | | | |
|----|------|---|--|--|--|--|--|-----------|--|--|------------|
| | | | | | | | maintenance and implementation, data management capacity building; surveillance analysis capacity building; joint TB\HIV surveillance analysis capacity building | | | | |
| 11 | WHO | Ricardo Memoria (TA mission 1) | | | | | TA for NTP to have ownership of editing/revising eTBM upon NTP's needs | Cancelled | | | Distant TA |
| 12 | WHO | Ricardo Memoria (TA mission 1) | | | | | TA for NTP to have ownership of editing/revising eTBM upon NTP's needs | Cancelled | | | Distant TA |
| 13 | KNCV | Edine Tiemersma (KNCV senior research consultant) | | | | | DRS or other operation research: TA to design, new techniques; Quality assurance of data collection; TA to analysis | Cancelled | | | |
| 14 | KNCV | Edine Tiemersma (KNCV senior research consultant) | | | | | Provide TA to introduction of new drugs, regimens, and PV | Cancelled | | | |
| 15 | KNCV | HIV surveillance consultant TBD | | | | | TA to assessment of the functioning of the current reporting and recording systems for TB and HIV and conduct an assessment of TB/HIV surveillance activities at national, provincial and district level | Cancelled | | | |
| 16 | KNCV | Job van Rest - TB surveillance consultant - KNCV | | | | | Planning workshop on development of TB and | Cancelled | | | |

| | | | | | | | | | | |
|---|------|---------------------------------|--|--|--|--|-----------|--|--|--|
| | | | | | | HIV surveillance system | | | | |
| 17 | KNCV | HIV surveillance consultant TBD | | | | Planning workshop on development of TB and HIV surveillance system | Cancelled | | | |
| Total number of visits conducted (cumulative for fiscal year) | | | | | | | 9 | | | |
| Total number of visits planned in approved work plan | | | | | | | 17 | | | |
| Percentage of planned international consultant visits conducted | | | | | | | 53% | | | |

7. Quarterly Indicator Reporting

The table below is prepared for APA2 and it is not reported since no APA2 activity was yet implemented.

| Sub-objective: | 2. Comprehensive, high quality diagnostics | | | | | |
|--|--|-------------------------|---|--------------------|------------------------|-------------------------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 2.1.2. A current national TB laboratory operational plan exists and is used to prioritize, plan and implement interventions. | NTP | annually | 2 - NTP NSP 2015-2020 including lab component available and approved in Mar 2014 (includes a detailed budget) | NA | 'Measured annually'. | |
| 2.1.3. VIETNAM SPECIFIC: Number of provinces providing full information on the completeness and yield of their diagnostic algorithms | NTP, Challenge TB (pilot) | annually | 0 province (2015) | 3 provinces (2016) | Data not available yet | Will be reported next quarter |
| 2.2.6. Number and percent of TB reference laboratories (national and intermediate) within the country implementing a TB-specific quality improvement program i.e. Laboratory Quality Management System (LQMS). | NTP, Challenge TB (pilot) | annually | 0% (0/2) Out of 2 TB Reference laboratories, 0 are performing lab quality management system | NA | 'Measured annually'. | |
| 2.2.7. Number of GLI-approved TB microscopy network standards met | NTP, Challenge TB (pilot) | annually | Not evaluated (2015) | NA | 'Measured annually'. | |
| 2.3.1. Percent of bacteriologically confirmed TB cases who are tested for drug resistance with a recorded result. | NTP, Challenge TB (pilot) | annually | 3% (1,702/58,880; NTP 2014) | NA | 'Measured annually'. | |
| | | | | | | |

| Sub-objective: | 2. Comprehensive, high quality diagnostics | | | | | |
|---|---|--------------------------------|---|---|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 2.4.1. GeneXpert machine coverage per population (stratified by Challenge TB, other) | Public health/all | annually | 1.4M/GeneXpert (2014) | 1.0M/1GeneXpert | 'Measured annually'. | |
| 2.4.2. #/% of Xpert machines that are functional in country (stratified by Challenge TB, other) | Public health/all | annually | 100% (2015, 56 machines) | 100% (2016, 76 machines) | 'Measured annually'. | |
| 2.6.4. # of specimens transported for TB diagnostic services | NTP | quarterly | NA (2015) | ??? (2016) | Data not available yet | |
| 2.6.5. #/% of TB cases detected through a specimen transport system | NTP | quarterly | NA (2015) | ??? (2016) | Data not available yet | |
| 2.7.1. #/% of laboratories implementing (internationally recommended) national biosafety standards (stratified by laboratories performing culture, DST and Xpert) | NTP | annually | 20 TB laboratories in PMDT provinces (2015, cumulative) | 25 TB laboratories in PMDT provinces (APA2, cumulative) | 'Measured annually'. | |

| Sub-objective: | 3. Patient-centered care and treatment | | | | | |
|---|---|--------------------------------|--|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 3.1.1. Number and percent of cases notified by setting (i.e. private) | NTP | Quarterly and annually | 102,070 (NTP, 2014) The data by settings is | NA | Data not available yet | |

| Sub-objective: | 3. Patient-centered care and treatment | | | | | |
|---|--|-------------------------|---|---|------------------------|----------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| sector, pharmacies, prisons, etc.) and/or population (i.e. gender, children, miners, urban slums, etc.) and/or case finding approach | | | not applicable in the NTP surveillance system | | | |
| 3.1.4. Number of MDR-TB cases detected | NTP | Quarterly and annually | 1,702 (NTP, 2014) | NA | Data not available yet | |
| 3.1.7. Childhood TB approach implemented | NTP | annually | 2 (2014, childhood TB is an integral part of the NTP strategic plan and regular activities in selected provinces) | 3 (2015) | 'Measured annually'. | |
| 3.1.5. #/% health facilities implementing intensified case finding (i.e. using SOPs) | NTP, CTB (WHO) | annually | NA | 5 (in pilot area) | 'Measured annually'. | |
| 3.1.20 % of occupational health referrals that reach the health facility and are screened for TB Numerator: # of miners that have been referred for TB screening that arrive at the health facility and are screened for TB Denominator: # of miners that have been referred for TB screening | NTP, CTB (WHO) | annually | NA | >95% referrals received and screened for TB | 'Measured annually'. | |
| 3.2.1. Number and percent of TB cases successfully treated (all forms) by setting (i.e. private sector, pharmacies, prisons, etc.) and/or by population (i.e. | NTP | annually | 91% (NTP, cohort 2013) | NA | 'Measured annually'. | |

| Sub-objective: | 3. Patient-centered care and treatment | | | | | |
|---|---|--------------------------------|-----------------------------|---|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| gender, children, miners, urban slums, etc.). | | | | | | |
| 3.2.4. Number of MDR-TB cases initiating second-line treatment | NTP | Quarterly and annually | 1,562 (NTP, 2014) | 2,030NA | | |
| 3.2.7. Number and percent of MDR-TB cases successfully treated | NTP | annually | 70% (NTP, cohort 2012) | NA | 'Measured annually'. | |
| 3.2.14. % of health facilities with integrated or collaborative TB and HIV services | NTP, VAAC | annually | 0 districts (APA1) | 12 districts (APA2) | 'Measured annually'. | |
| 3.2.24. % MDR patients who receive social or economic benefits | NTP, CTB (WHO) | quarterly | N/A | 80% patients in need in intervention area | Data not available yet | |

| Sub-objective: | 5. Infection control | | | | | |
|--|-----------------------------|--------------------------------|---|--|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 5.1.2. #/% of health facilities implementing TB IC measures with Challenge TB support (stratified by TB and PMDT services) | NTP, CTB | annually | 20 MDR treatment departments in PMDT provinces (2015, cumulative) | 25 MDR treatment departments (cumulative) in PMDT provinces and 12 TB-HIV district facilities in TB-HIV integrated area (APA2) | 'Measured annually'. | |
| 5.2.1. Status of TB disease monitoring among HCWs | NTP | annually | 2 (2014) | 3 (2015) | 'Measured annually'. | |
| 5.2.3. Number and % of health care workers diagnosed with TB during reporting period | NTP | annually | 23/7779 (0.3%) (NTP, 2013) | TBD | 'Measured annually'. | |

| Sub-objective: 6. Management of latent TB infection | | | | | | |
|--|-------------------------|--------------------------------|--|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 6.1.11. Number of children under the age of 5 years who initiate IPT | NTP | annually | 2,134 (2014) (NTP Annual report 2014) | NA | 'Measured annually'. | |

| Sub-objective: 7. Political commitment and leadership | | | | | | |
|--|-------------------------|--------------------------------|-----------------------------|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 7.2.3. % of activity budget covered by private sector cost share, by specific activity | | annually | NA | NA | 'Measured annually'. | |
| 7.2.13. SOP for implementation of funding for transitional period is developed | NTP, CTB (WHO) | annually | No | Yes | 'Measured annually'. | |

| Sub-objective: 8. Comprehensive partnerships and informed community involvement | | | | | | |
|---|-------------------------|--------------------------------|--------------------------------|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 8.1.3. Status of National Stop TB Partnership | NTP | annually | 3 (NTP Annual report, 2014) | NA | 'Measured annually'. | |
| 8.1.4. % of local partners' operating budget covered by diverse non-USG funding sources | NTP, Challenge TB | annually | NA | NA | 'Measured annually'. | |
| 8.2.1. Global Fund grant rating | NTP, Challenge TB | annually | A2 (GF, 2014) | NA | 'Measured annually'. | |

| Sub-objective: | 9. Drug and commodity management systems | | | | | |
|--|---|--------------------------------|-------------------------------|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 9.1.1. Number of stock outs of anti-TB drugs, by type (first and second line) and level (ex, national, provincial, district) | NTP, Challenge TB | Quarterly and annually | 0 (NTP Annual report 2014) | NA | Data not available yet | |

| Sub-objective: | 10. Quality data, surveillance and M&E | | | | | |
|---|---|--------------------------------|---|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 10.1.4. Status of electronic recording and reporting system | NTP, Challenge TB | annually | 3 (2014) | NA | 'Measured annually'. | |
| 10.2.1. Standards and benchmarks to certify surveillance systems and vital registration for direct measurement of TB burden have been implemented | NTP, Challenge TB | annually | Yes (2013) (3 standards were met, 2 were partially met, 6 were not met, and 2 need further assessment) | NA | 'Measured annually'. | |
| 10.2.6. % of operations research project funding provided to local partner (provide % for each OR project) | NTP, Challenge TB | annually | NA | NA | 'Measured annually'. | |
| 10.2.7. Operational research findings are used to change policy or practices (ex, change guidelines or implementation approach) | NTP, Challenge TB | annually | NA | NA | 'Measured annually'. | |
| 10.2.6. % of operations research project funding provided to local partner | NTP, Challenge TB | annually | NA | NA | 'Measured annually'. | |

| Sub-objective: | 10. Quality data, surveillance and M&E | | | | | |
|---------------------------------|---|--------------------------------|-----------------------------|---------------------------|------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| (provide % for each OR project) | | | | | | |

| Sub-objective: | 11. Human resource development | | | | | |
|---|---------------------------------------|--------------------------------|-----------------------------|---------------------------|-------------------------|-----------------|
| Performance indicator | Disaggregated by | Frequency of collection | Baseline (timeframe) | End of year target | Results to date | Comments |
| 11.1.3. # of healthcare workers trained, by gender and technical area | NTP, Challenge TB | Quarterly and annually | NA | 200 | Data not available yet. | |
| 11.1.5. % of USAID TB funding directed to local partners | NTP, Challenge TB | annually | NA | NA | 'Measured annually'. | |

