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**CHALLENGE** > **TB**

## **Challenge TB - VIETNAM**

**Year 1**

**Quarterly Monitoring Report**

**April – June 2015**

**Submission date: July 30, 2015**

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### 3. Quarterly Overview

Country	Vietnam
Lead Partner	KNCV
Other partners	WHO
Workplan timeframe	January – September 2015
Reporting period	April – June 2015

#### **Most significant achievements:**

##### Sub-Obj 1. Enabling environment

To reduce the burden of TB among the poor, social support is as crucial as medical interventions. In each province in Viet Nam, the Department of Labor Invalids, and Social Affairs (DOLISA) has been established to provide necessary social support to the needy. Two such DOLISA offices in TB/MDR-TB high burden provinces (Ho Chi Minh City and Long An Province) have been approached to carry out a situation analysis to assess social support for the TB/MDR-TB patients. The study will continue in the future so that an appropriate and sustainable policy advice and revision could be materialized.

##### Sub-Obj 2. Comprehensive, high quality diagnostics

- With the successful introduction and roll-out of Xpert MTB\RIF under TB CARE I, Challenge TB continues providing technical support to NTP to roll out Xpert MTB\RIF in 41 PMDT provinces including forecast and distribution of Xpert MTB\RIF cartridges. Currently there is PMDT coverage of 41 provinces out of a total of 63 provinces. The roll-out of PMDT in all provinces is scheduled under NSP2016-2020, planned to be completed in 2018
- Based on TB CARE I work, Challenge TB\KNCV continued to provide technical support in improving bio-safety conditions for the labs - including sputum induction booths and TBIC condition in MDR treatment departments - in 4 PMDT provinces in this quarter.
- Improving TB-IC conditions in 4 selected prisons. The four prisons will be piloting the implementation of MDR-TB treatment inside the prison.

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

- Dr. Agnes Gebhard and Dr. Clemens Richter provided short-term technical assistance from 15-27 June 2015, supporting the NTP and Vietnam Administration for AIDS Control (VAAC) on strengthening TB/HIV collaborative activities. The team visited 5 HIV high burden provinces and assessed the current status of HIV/TB collaboration to identify barriers to care. A stakeholders workshop was organized to discuss the assessment results, barriers to access and identify the most appropriate interventions for planning under the current Global Fund grant and Challenge TB year 2.
- From 15-19 September 2014, Dr. Edine Tiemersma (KNCV senior research consultant) and a consultant data management and surveillance (Mr. Job van Rest) conducted an initial fact-finding mission to assess what was already in place concerning PV and cohort event monitoring (CEM) to be used as building blocks for the CEM project for new drugs, starting with bedaquiline. Under the TB CARE Core project, Dr. Edine Tiemersma conducted a short-term TA visit on 24-25 June to support the Vietnam PV team with finalization of the pharmacovigilance protocol including SOPs, and start with preparations for a training on implementation of pharmacovigilance for bedaquiline in the next quarter to all persons involved (staff of the NTP, staff of the National drugs information & ADR Center and staff of the three sites where bedaquiline-containing regimens will be introduced).

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

- From 29 June – 3 July, Dr. Edine Tiemersma (KNCV-HQ senior research consultant) and Mr. Job van Rest (KNCV-HQ senior TB surveillance consultant) carried out a STTA visit to support NTP in development of the 2nd national TB prevalence survey (TBPS) protocol and data management plan in collaboration with the prevalence survey coordinator, data manager and other stakeholders. Almost all related topics (sampling methodology and sampling frame; screening and diagnostics algorithms; digitalization of data collection and management processes; data management tools to be used (hardware and software); data management procedures for all levels involved, etc.) were discussed and finalized with NTP and other partners during the TA mission. The outline of the protocol and estimated budget for TBPS will be ready in early August for submission to the GFATM.

On June 15-19, 2015, KNCV-HQ consultant (Mrs. Marleen Heus) conducted a STTA visit in Vietnam to have insight into main success/ risk factors, and necessary conditions for local ownership of 3 activities: management of TB in children implementation, GeneXpert implementation, and Vietnam TB Information Management Electronic System (Vitimes) - the internet based TB surveillance tool for susceptible TB - that were supported by the TB CARE I project. This mission was part of the TB CARE I core project Locally Owned Initiatives (LOI), including desk review, field visits and a publication with lessons learned. The consultant had 16 in-depth interviews with relevant stakeholders at national, provincial and district level: NTP staff (3), Thai Binh TB&LD Hospital (3) and district general hospital (2), Hanoi Lung Hospital (3) and district health center (3), National Reference Laboratory and the IT company that developed the Vitimes software. In the debriefing with the NTP, the major interview results were presented and discussed:

- “local ownership” is more a concept of policy makers than a concept of implementers at central, provincial and district level. Implementers talk about practical solutions, how they can get things done, what resources are needed.
- Main success factors identified for local ownership are: a strong TB program, staff commitment at all levels, technical and managerial capacity of staff and the opportunities for learning, teamwork and staff support by higher levels, information about the project, access to own funding sources and the facilitating role of TB CARE I.
- Main risk factors identified for local ownership are: insufficient delegation of tasks and (financial) responsibilities to the NTP, a high workload at the NTP due to a need to focus on additional priority areas.

The interview results will be used for the publication with lessons learned on locally owned initiatives. A discussion will take place with Challenge TB partners on how to use these lessons to build locally owned initiatives in the specific countries.

#### **Technical/administrative challenges and actions to overcome them:**

Administratively, the main challenge has been the transition from TB CARE I to Challenge TB and moving from one technical framework to another. However, the Challenge TB team is successfully managing the project as expected.

Technically, for the establishment of the patient-centered TB services, both medical services and social support are crucial in order to detect infectious cases and put them under appropriate care as early as possible. Although the importance in collaboration between cross-cutting sectors is well recognized amongst all stakeholders, coordination between the different ministries can be challenging.

#### 4. Year 1 activity progress

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		
Assessment of social support needs for TB, DR-TB and TB/HIV patients	1.4.1	TOR developed and finalized	Start consultancy work		A local consultant participated in the field visits to HCMC and Long An with WHO's staff in order to get an overview of the social support needs. The consultancy started with the development of an assessment tool	<b>Met</b>	
Policy discussion with MOLISA	1.4.2		Dissemination workshop and policy discussion		This activity has not yet started.	<b>Not met</b>	Waiting for the assessment results of activity 1.4.1

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 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	Assessment tools developed	3 TOT trainings in 3 regions and pilot in 3 provinces	Assessment tools incorporated in NTP M&E guidelines	In this quarter, the tool to chain analysis, monitoring of diagnostic algorithms has been adjusted and finalized by Dr. Agnes after the workshop in March.	Not met	The tool has been finalized in June. TOT training is scheduled in the next quarter
TA on implementation, monitoring and evaluation of advanced	2.3.1	Advanced diagnostic algorithms	Pilot started in 3 selected	Evaluation of pilot and possible		<b>Not met</b>	The consultant (Dr. Agnes Gebhard) suggested postponing

diagnostic algorithms (Xpert - SL Hain - conventional DST):		developed	provinces	adjustment - advanced diagnostic algorithms incorporated in NTP guidelines			this activity to her 2nd STTA mission in August.
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	Local experts contribute to training in expansion provinces	Local experts contribute to training in expansion provinces	TA has been provided to NTP on oversight of cartridge supply from UNITAID funding. The first shipment of 12.500 cartridges is to be used up by middle of August. Review of consumption, quantification for the second shipment was conducted and order/import procedures are in process with expectation for new cartridges to be available in country at the beginning of August.	Partially met	TA to GeneXpert training has not been carried out as the NTP\GF budget for 2015 for procurement of GeneXpert hasn't been approved yet in this quarter
TA to roll out of GeneXpert in the country - Supervision: Bi-annual supervision of GXP 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 GXP sites	Supervision visit in selected GXP sites	Supervision visit in selected GXP sites	In this quarter, monthly meetings with NTP GXP TWG were conducted on 29 April and 29 May. These meetings focused mostly on the monthly consumption of Xpert MTB\RIF cartridges and the needs for distribution/reallocation of cartridges to ensure constant availability of cartridges over the 37 GeneXpert sites. CTB\KNCV supported NTP in establishing and coordinating the GeneXpert technical team to handle technical problems and maintain well-functioning Xpert systems. In this quarter, Challenge TB (KNCV) carried out supportive supervision in improvement of Xpert MTB\RIF uptake in 4 provinces (Tay ninh (2 districts), An giang (3 district), Hai phong (1 district) and Nghe an (1 district)	Met	

Specimen referral system including OPCs	2.6.1	Monitoring indicators developed	Monitoring indicators included in NTP M&E update	Follow-up of first M&E results	N/A	Not met	The plan for the development of the monitoring indicators and data collection has been discussed with NTP\NRL and the monitoring indicator will be developed in next quarter.  The delay is due to limited human resource availability in the NTP\National Reference Laboratory.
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	3 PMDT provinces: Lab and MDR-TB treatment renovation plans (designs and estimated budget) are ready for NTP/local authorities to provide financial support	6 PMDT provinces (Cumulative ): Lab and MDR-TB treatment renovation plans (designs and estimated budget) are ready for NTP/local authorities to provide financial support	9 PMDT provinces (Cumulative ): Lab and MDR-TB treatment renovation plans (designs and estimated budget) are ready for NTP/local authorities to provide financial support	As per request from NTP for technical assistance, CTB\KNCV continued to provide technical support in improving bio-safety conditions for the labs. This includes sputum induction booths and TB-IC conditions in 4 selected prisons piloting where MDR-TB treatment in prisons is piloted (Thanh phong, Thanh lam, Thanh cam and Trai 5).  Initial risk assessments have been done in 4 prisons and 4 provinces on 21-24 April. The proposed plans for renovation are based on the risk assessment results and have been discussed and finalized with NTP	Met	

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 (reason for not meeting milestone or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		

<p>TA to roll out childhood TB policies and evaluation of updated childhood TB policies (based on TB CARE I work):</p>	<p>3.1.1</p>	<p>5 provinces</p>	<p>5 provinces</p>	<p>5 provinces</p>	<p>Challenge TB provided TA to support NTP to implement childhood TB in 1 province and provided TA on the community-based contact screening intervention nationwide (guidelines, register, training materials)</p>	<p>Met</p>	<p>GFATM focuses on PMDT activities. In the GF NFM concept note, the NTP revised its target of 15 provinces to 3 provinces. Therefore, in the GF work plan, only 3 provinces (Hai duong, Bac giang and Da nang) are included for the roll out of a childhood TB management strategy for 2015. The target for the first 6 months of the GFATM Round 9 Project thus includes 1 province.</p> <p>We therefore have to revise our targets from 15 provinces (with 5 provinces for each quarter) to 3 provinces (with 1 province for each quarter)</p>
<p>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</p>	<p>3.1.2</p>	<p>Evaluation protocol developed and approved by NTP</p>	<p>Evaluation protocol developed and approved by NTP</p>	<p>Data collection, analysis and report writing</p>	<p>The SOPs for data collection in 4 pilot provinces have been developed. The meeting with key staff in 4 provinces to discuss and finalize the SOPs on data collection was organized on 4 May 2015. The SOPs on data collection have been finalized and sent to 4 pilot provinces (provincial, district and commune level) in June. Childhood data collection from commune, district level to provincial level will be conducted in the period of July-September 2015. Data analysis and report writing will be take place in September 2015. Supportive supervision in collaboration with NTP is scheduled in the next quarter.</p>	<p>Met</p>	

TB/HIV situational assessment and analysis with a focus on screening for opportunistic infections, specifically TB, TB/HIV referral system and IPT for PLHIV	3.1.3		Assessment report on situation of TB/HIV screening and referral available for developing TB/HIV collaborative plan.	An agreed action plan for improvement of TB/HIV services delivery	<p>From 15-27 June, Dr. Agnes Gebhard (KNCV-HQ senior TB and PH consultant) and Dr. Clemens Richter (KNCV-HQ senior HIV consultant) carried out TA on the strengthening of TB/HIV collaborative activities.</p> <p>5 HIV high burden provinces (Bac Giang, Hai Phong, Nghe An, Tây Ninh and Kiên Giang) were visited and the system of HIV/TB collaboration was assessed to identify barriers to care.</p> <p>Stakeholder's workshop was organized and the situational assessment and barriers to access were discussed. Also, the most appropriate interventions were identified for planning for the Global Fund and Challenge TB.</p>	Met	
Improvement of MDR-TB treatment quality:	3.2.1	Quarterly interim cohort analysis method for PMDT guidelines developed	2 Trainings for NTP M&E staff in NLH and PNTN	QICA applied in all NTP M&E visits in PMDT sites	In this quarter, the QICA training materials have been adjusted and finalized by Dr. Agnes after the workshop in March.	Not met	The training materials were finalized in June. The training is scheduled to take place in the next quarter
TA to introduction of new drugs, M&E, OR and pharmacovigilance	3.2.2	1 TA mission visit conducted			The preparation for this TA mission under Challenge TB in the next quarter is underway. However, in this quarter, under the TB CARE Core project, Dr. Edine Tiemersma (KNCV senior research consultant) conducted a short-term TA visit on 24-25 June to support the Vietnam PV team with finalization of the pharmacovigilance protocol including SOPs, and start with	Not met	NTP suggested to re-schedule this TA mission visit in August 2015 in combination with training on BDQ implementation and training on pharmacovigilance for 3 pilot provinces.

					preparations for a training on implementation of pharmacovigilance for bedaquiline. The training is scheduled to take place in the next quarter for all persons involved (staff of the NTP, staff of the National drugs information & ADR Center and staff of the three sites where bedaquiline-containing regimens will be introduced).		
Training for palliative care/end of life care at provincial level.	3.2.3	Training started			The training plan has been developed and the training material is available	<b>Not met</b>	The training will be organized in early September
Monitoring and assessment of palliative care/end of life care (focus on MDR-TB/TB/HIV patients)	3.2.4		Monitoring		This activity will be carried forward to year 2	<b>Not met</b>	The CTB funding for WHO was transferred in July 2015 and thus the activity could not yet be completed.

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 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	For milestones, see sub-activity 5.1.1.1 – 5.1.1.3		Choose an item.	This activity falls under the Challenge TB APA 1-b workplan which was approved on June 10. We will report on the activity in Q4.
a) Three-day trainings on TB-IC for TB and HIV staff at provincial and district levels in 4 selected provinces implementing TB/HIV	5.1.1.1			Trainings on TBIC organized in 4 selected provinces		Choose an item.	

collaborative activities at District Health Centers							
b) TB-IC facility assessment and development of TBIC 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 (2 districts each province)		Choose an item.	
c) Implementation of TB-IC facility improvement plans by District TB Units, monitoring by the KCNV country office, in collaboration with national partners	5.1.1.3			TB-IC facility improvement plans implemented in 2 selected districts		Choose an item.	
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, NTP sent the TB-IC data collection sheet to 67 national and provincial TB Units and more than 700 DTUs. TB-IC data sheets from TB units have been collected and cleaned. TB-IC data will be analyzed in next quarter.	Choose an item.	

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		
Develop financial assessment tool and manual	7.2.1	TA carried out	Training conducted and pilot started	Tool is finalized and ready for expansion		<b>Not met</b>	This activity is proposed to be carried over to Year 2. The CTB funds were transferred to WHO the first week of July and thus the milestones have not yet been met under the reporting period.
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				Potential candidates for this TA have been invited. The TOR has been developed and finalized.	<b>Partially met</b>	
Situation analysis of current funding mechanism for TB control	7.2.2.1	Consultancy started			Potential candidates for this TA have been invited. The TOR has been developed and finalized.	<b>Met</b>	
Making recommendation for policy discussion	7.2.2.2		Policy discussion			<b>Not met</b>	This will be delivered after the assessments results are received. It is planned for September 2015.

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		
Annual project review and planning meeting	8.1.1			Annual CTB review meeting		Choose an item.	<b>Planned for Quarter 4</b>
Annual meetings at KNCV-HQ/Challenge TB	8.1.2	KNCV\CTB Meeting			The Vietnam Country Director attended the Challenge TB Country Director meeting held from 1-5 June in the Netherlands	Met	
Project monitoring and supervision for CTB country staff	8.1.3	Project supervision	Project supervision	Project supervision	In this quarter, the CTB team carried out four monitoring mission visits in An Giang (15-18 April), Tay Ninh (5-8 May), Hai Phong (17-19 June) and Nghe An (22-23 June). The monitoring team provided support on different technical and operational issues of GeneXpert implementation, MDR management, specimen transportation.	Met	
International meeting/workshop (WHO-WPR, Union, etc.)	8.1.4		Meeting	Meeting		Choose an item.	This activity is scheduled in the next quarter

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 or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		
TA for NTP to have ownership of finalizing eTBM upon NTP's needs, system maintenance and data management.	10.1.1	Consultancy started (TA mission + distant support)	NTP central can revise/editing the system based on their needs		The TOR for October – March was revised due to new requirements provided by NTP Management. The new requirements include the need to apply e-TBM for notification of SLD to GDF through the internet.	<b>Not met</b>	The CTB funds were transferred to WHO the first week of July. The milestones have not yet been met under the reporting period.
TA to further development of VITIMES	10.1.2		1 TA mission visit		Preparations were made for this TA mission.	<b>Not met</b>	The NTP requested to reschedule this TA mission visit to September 2015.
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			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	Preparations were made for this TA mission.	Choose an item.	
Technical support to writing a development plan for the HIV,TB/HIV electronic	10.1.4			Plan is ready for the development of an eR&R	The preparation for this TA mission for the next quarter is underway	Choose an item.	

surveillance/program management system with clear steps, timelines, milestones and benchmarks				for HIV and TB/HIV			
TA to prevalence survey	10.2.1	1 TA mission visit		1 TA mission visit	From 29 June – 3 July, Dr. Edine Tiemersma (KNCV-HQ senior research consultant) and Mr. Job van Rest (KNCV-HQ senior TB surveillance consultant) carried out the combined TA mission visits to support NTP in development of the 2 <sup>nd</sup> national TB prevalence survey (TBPS) protocol and data .  The draft detailed protocol including all SOPs for TBPS will be available for discussion and finalization in the next TA mission visit in Q1/CTB APA2 (Oct-Dec 2015)	<b>Met</b>	
TA to DRS or other operation research	10.2.2			1 TA mission visit	The preparation for this TA mission in next quarter is underway	Choose an item.	

Sub-objective 11. Human resource development							
Planned Key Activities for the Current Year	Activity #	Planned Milestones			Milestone status	Milestone met? (Met, partially, not met)	Remarks (reason for not meeting milestone or other key information)
		Oct 2014-Mar 2015	Apr-Jun 2015	Jul-Sep 2015	April – June 2015		
Capacity building on operational research in support of epidemiological surveys and OR topics	11.1.1	1 training			This activity has been completed in the last quarter. The milestone was met in March 2015.	<b>Met</b>	

### Current Global Fund TB Grants

<b>Name of grant &amp; principal recipient</b> (i.e., Tuberculosis NFM - MoH)	<b>Average Rating*</b>	<b>Current Rating</b>	<b>Total Approved Amount</b>	<b>Total Disbursed to Date</b>	<b>Total expensed</b> (if available)
The GFATM Round 9 for TB Control in Vietnam (2011-2015)	A2	A2	51,206,435 USD	41,896,4731 USD	Data is not available as of 30/6/2015

\* Since January 2010

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

For 2015, the GFATM project contained two periods: the first one started from 1 January - 30 June with the continued implementation of Phase 2, Round 9 activities. The 2nd period started from 1 July with the beginning of the activities under the Concept Note, New Funding Mechanism (NFM)

- 1st period (1 January – 30 June): 5,504,924 USD
- 2nd period (1 July – 31 December): 11,358,823 USD

The work plan for the first 6 months of 2015 was approved by the GFATM on 17 Mar 2015 with the main activities being focused on Preventive treatment and TB treatment, TB/HIV, TB in congregate settings, MDR TB, health information system, M&E and strengthening community network. There were 9 implementing partners, which included PATH, Center for Community Health Development (CCHD), Farmers Union (FU), Military Medical University (MMU), Ministry of Public Security (MOPS), FIND, KNCV Tuberculosis Foundation and Center for Health Studies, Consultation and Support (RDH).

Until 30 June 2015, most activities have been completed as per the work plan and several activities encountered delay. These included procurement activities (only when procurement plan was approved by the MOH on 26 June 2015 could the following procedures be processed) and several activities taken by new partners (contract negotiation and signing took a long time), etc.

Regarding the 1 July – 31 December 2015 period, the final versions of all required documents has been submitted to the GFATM and the proposal for budget supplement and reallocation has been submitted to the Ministry of Planning and Investment. At present, the Cooperation Framework Agreement is expected to be signed between GFATM and the Government of Vietnam, granting the budget for the coming 6 months.

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

No specific activity were implemented in this quarter

### 3. Success Stories – Planning and Development

<b>Planned success story title:</b>	
<b>Sub-objective of story:</b>	Choose an item.
<b>Intervention area of story:</b>	Choose an item.
<b>Brief description of story idea:</b>	<p>It is too early into the Challenge TB implementation to claim success from the project.</p> <p>One success story from earlier USAID funded KCNV led support, impacting on the current project is the incorporation into national legislation of the standards on infection control that were developed between 2008 and 2011, which since January 2015 have the force of law. This causes many demands on the TA local partners ( NIHE, in charge of biosafety , trained under the TBCAP and TBCARE projects) and on the Challenge TB project to provide TA for TB IC assessments and support to the development of facility TB IC plans</p> <ul style="list-style-type: none"> <li>• MOH's decree No. 25/2012/TT-BYT dated 29 November 2012 on the national technical standards on laboratory practices and biosafety</li> <li>• MOH's decree No 29/2012/TT-BYT dated 04 December 2012 on procedures for certificate and renewal of laboratory with biosafety standard</li> </ul>
<b>Status update: N/A</b>	

#### 4. MDR-TB cases detected and initiating second line treatment in country

Quarter	Number of MDR-TB cases detected	Number of MDR-TB cases put on treatment	Comments:
Total 2010	202	97	The number of MDR-TB cases detected for January-March 2015 and the data for April-June are not available in NTP's recording/reporting system yet.
Total 2011	N/A	776	
Total 2012	774	713	
Total 2013	994	943	
Total 2014	1,702	1,562	
Jan-Mar 2015	NA	370	
Apr-Jun 2015			
Jul-Sep 2015			
Oct-Dec 2015			
Total 2015			

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

#	Partner	Activity Code	Name	Purpose	Planned month, year	Status (cancelled, pending, completed)	Dates completed	Duration of the visit (# of days)	Debrief presentation received	Summary report received	Final report received	Additional Remarks (Optional)
1	KNCV	3.2	Agnes Gebhard (KNCV TB senior consultant)	PMDT policy, development, implementation and roll out to support NTP\PMDT to improve MDR-TB patient management, PMDT data quality and supportive systems	Q2	Complete	21 Mar 2015	5	Yes	Yes	Yes	The final TA mission report was circulated to NTP, PMU and related partners
2	KNCV	3.2	Clemens Richter (KNCV HIV consultant) and Agnes Gebhards (KNCV TB consultant)	Situational assessment of access to prevention, diagnosis and care for TB for PLWH	Q3	Complete	27 Jun 2015	12	Yes	Yes	No	The mission was just complete recently
3	KNCV	10.2	Edine Tiemersma (KNCV senior research consultant) and Job van Rest (KNCV surveillance consultant)	Prevalence survey: TA to design, including innovative techniques, study of risk factors, SES data; Quality assurance of data collection; TA to analysis	Q3	Complete	3 Jul 2015	5	Yes	No	No	The mission was conducted on 29 June – 3 July.
Total number of visits conducted (cumulative for fiscal year)							3					
Total number of visits planned in approved work plan (13 TA mission visits and 2 managerial visits)							15					
Percent of planned international consultant visits conducted							20%					