

**TO THE UNITED STATES AGENCY
FOR INTERNATIONAL DEVELOPMENT**

**FROM THE WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE**

THE PROJECT:

**INTENSIFIED ACTIONS TO SUSTAIN EVIDENCE-BASED TUBERCULOSIS (TB)
CONTROL POLICY DEVELOPMENT, CAPACITY BUILDING TO PREVENT AND
CONTROL TB, ESPECIALLY MULTIDRUG-RESISTANT AND EXTENSIVELY DRUG
RESISTANT TB (M/XDR-TB) AND TB/HIV CO-INFECTION IN THE RUSSIAN
FEDERATION**

AID-118-IO-11-00001

FINAL REPORT

30 September 2011 – 31 December 2012



April 2013

CONTENTS

ABBREVIATIONS.....	3
GENERAL INFORMATION.....	4
Title of the project.....	4
Time frame of the project	4
Project goal.....	4
Project objectives	4
EXECUTIVE SUMMARY	4
BACKGROUND INFORMATION	6
TB epidemiology in the Russian Federation	6
PROJECT ACTIVITIES	12
Strengthening the national TB Control Programme to prevent and control M/XDR-TB and TB/HIV	12
Development of relevant national guidelines and recommendations consistent with the international standards	12
Development of standard operating procedures for all levels of TB prevention, control and care services.....	14
Improvement for prevention and control of TB in HIV positive individuals.....	14
Improvement of infection control	15
Appropriate quality of laboratory network performance	16
Addressing gender- related barriers to improve access to TB diagnosis and care	17
Improving TB programme monitoring system as a process of mutual technical assistance and transfer of knowledge and expertise among professionals.....	17
Development of national standard tools and protocol for monitoring.....	17
Improvement of standardized methodology for TB monitoring and supervision with the emphasis of M/XDR-TB and TB/HIV cases as integral part of the national TB monitoring system	18
Human resource development (HRD) for TB control as an integral part of Human Resources for Health (HRH).....	18
Improvement of professional capacity and training programmes	18
Development of tools for staff retention and HRD planning.....	19
Classification of positions and development of terms of reference for different categories of health personnel	19
Strengthening the pool of Russian TB experts working at the local level and trained as international consultants (including exploring work with local medical academy staff as appropriate).....	19
Mainstreaming TB surveillance and recording and reporting documentation with a strong analytical component in cooperation with relevant research institutes.....	20
Development of the national drug resistance surveillance system	20
Publication of analytical reviews and annual national TB drug resistance reports	21
Provision of technical support for existing COE in Orel and Vladimir, affiliated with the WHO Collaborating Center at CTRI, also contributing to their advancement as international COE for the WHO European Region.....	21
Support to the COE on TB laboratory in Chuvashia	22
Establishing a new COE on laboratory diagnosis in collaboration with a federal TB research institute beyond the Ural Mountains.....	22

Development of a new COE on Extrapulmonary TB in St. Petersburg and a COE on TB Surveillance and Monitoring/MDR-TB in the Far East.....	22
Coordination of national and international TB partners	23
Support to the HLWG on TB and TWG, ICC and Interagency coordinating meetings	23
Promotion of WHO policies and international recommendations.....	27
Advocacy and promotion of innovative methods for the rapid diagnosis of TB and MDR-TB	28
WHO activities for untimely termination of USAID supported TB Control Project in the Russian Federation	29
PROJECT MANAGEMENT.....	30
MAIN PROJECT RESULTS	31
MAJOR DIFFICULTIES AND CHALLENGES AT THE FEDERAL/NATIONAL LEVEL.....	32
ACTIVITIES WHICH ARE CRUCIAL TO SUSTAIN ACHIVEMENTS WITHIN THE CURENT PROJECT.....	33

ABBREVIATIONS

AIHA	American International Health Alliance
CDC	United States Centers for Disease Control and Prevention
COE	Centre of Excellence and Training
CRIHOI	Central Research Institute for Organization of Health and Informatization
CTRI	Central Tuberculosis Research Institute of the Russian Academy of Medical Sciences
DOT	Directly observed treatment
	Directly observed treatment short course - internationally recommended strategy for tuberculosis control
DOTS	Directly observed treatment short course - internationally recommended strategy for tuberculosis control
DR-TB	Drug resistant tuberculosis
M/XDR-TB	Multidrug-resistant/extensively drug resistant tuberculosis
FCS	Federal Correctional Service (prison service)
FCTB-HIV	Federal Center for TB care of patients with HIV
Global Fund	Global Fund to Fight AIDS, Tuberculosis and Malaria
HIV	Human immunodeficiency virus
HRD	Human resource development
HRH	Human Resources for Health
HLWG	High Level Working Group
IFRC	International Federation of Red Cross and Red Crescent Societies
IC	Infection control
MSF	Medecins Sans Frontieres
MOHSD	Ministry of Health and Social Development of the Russian Federation
MOH	Ministry of Health of the Russian Federation (till 2012 part of MOH&SD)
MDR-TB	multidrug-resistant tuberculosis
NTRI	Novosibirsk TB Research Institute
PIH	Partner in Health
PLWHIV	People leaving with HIV
PMDT	Programmatic management of drug-resistant tuberculosis
RRC	Russian Red Cross
RAMS	Russian Academy of Medical Sciences
RIPP MMA	Research Institute of Phthisiopulmonology of the First Moscow Medical University
RF	Russian Federation
TB	Tuberculosis
TB/HIV	TB/HIV co-infection
TWG	Thematic working group
StPRIPP	Saint-Petersburg Research Institute of Phthisiopulmonology
USAID	United States Agency for International Development
WHO	World Health Organization
WHO CO in the RF	WHO Country Office in the Russian Federation
WHO CO TB Control Programme	WHO TB Control Programme in the Russian Federation

GENERAL INFORMATION

Title of the project

Intensified Actions to Sustain Evidence-based Tuberculosis (TB) Control Policy Development, Capacity Building to Prevent and Control TB, Especially Multidrug-Resistant and Extensively Drug Resistant TB (M/XDR-TB) and TB/HIV Co-infection in the Russian Federation.

Time frame of the project

30 September 2011 – 30 September 2015 (planned)

30 September 2011- 31 December 2012 (actual)

Reporting period:

30 September 2011 – 31 December 2012

Project goal

To strengthen the capacity of the Russian health system to effectively respond to TB, M/XDR-TB and TB/HIV epidemic by adequately addressing various TB-related challenges in line with the Stop TB Strategy.

Project objectives

1. Strengthening the national TB Control Programme to prevent and control M/XDR-TB and TB/HIV
2. Improving TB programme monitoring system as a process of mutual technical assistance and transfer of knowledge and expertise among professionals
3. Human resource development (HRD) for TB control as an integral part of Human Resources for Health (HRH)
4. Mainstreaming TB surveillance and recording and reporting (R&R) documentation with a strong analytical component in cooperation with relevant research institutes
5. Provision of technical assistance to and training at existing Centres of Excellence (COE) in order to advance them as international COE for the WHO European Region
6. Development of COE on TB control laboratory component in the Republic of Chuvashia and in at least one COE east of the Ural Mountains
7. Coordination of national and international TB partners
8. Advocacy and promotion of innovative methods for the rapid diagnosis of TB and MDR-TB
9. Work jointly and in collaboration with other partners to eradicate polio globally

EXECUTIVE SUMMARY

This report reviews the implementation of the USAID-supported WHO TB Control Project in the Russian Federation during the period from 30 September 2011 till 31 December 2012. It also contains the description of the Project's input into the development and strengthening of TB control in the Russian Federation, of the main activities, achievements and challenges of the Project implementation.

During the reporting period, the WHO TB Control Programme with technical and administrative support from the WHO Regional Office for Europe TB and M/XDR-TB Programme (Copenhagen) implemented the activities planned under the Grant Agreement with USAID No. AID – 118 -10 –

11-00001 “Intensified Actions to Sustain Evidence-based Tuberculosis (TB) Control Policy Development, Capacity Building to Prevent and Control TB, Especially Multidrug-Resistant and Extensively Drug Resistant TB (M/XDR-TB) and TB/HIV Co-infection in the Russian Federation” dated September 30, 2011 (further – the Project)

The WHO CO in the RF operated on the basis of the Agreement on Cooperation between WHO and the Government of the Russian Federation signed on 18 January 2009, Biennial Collaborative Agreement between the Ministry of Health and Social Development of the Russian Federation and the WHO Regional Office for Europe signed on 20 March 2012. Capacity-building and institutional support for the strengthening of the national TB control system based on WHO principles was pursued in cooperation with the Russian Government through the mechanism of the High Level Working Group (HLWG) on TB in the RF. A number of thematic working groups (TWGs) worked under the umbrella of the HLWG.

WHO CO TB Control Programme developed the activity plan for WHO assistance to MoH in the framework of the current Project implementation in 2012-2015.

WHO CO TB Control Programme focused on promotion of the Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015 to ensure of its objectives and target achievement.

Through HLWG and TWG mechanism WHO CO TB Control Programme promoted and supported the development and discussion of the draft of the new national regulations and guidelines to ensure implementation of WHO TB Control strategy in the country.

WHO CO TB Control Programme assisted the CTRI and NTRI (WHO Collaborating Centers in TB Control) in providing training in programmatic management of M/XDR-TB for TB doctors from civilian and prison sectors and TB infection control for TB doctors and managers from regional TB control programmes. Totally 66 TB doctors and TB managers were trained in the programmatic management of M/XDR-TB and 141 TB doctors, TB managers, engineers and lab technicians were trained in TB infection control.

WHO CO TB Control Programme coordinated activities of national and international partners to consolidate international efforts for improvement and strengthening of national TB control through regular ICC meetings.

Promotion of international principles of TB control was provided thought education and information events, including annual campaign dedicated to the World TB Day.

On 1 October 2012, the USAID mission in Russia sent a Grant termination letter to the WHO Regional Director on the Grant No. AID-118-10-11-00001 “Intensified Actions to Sustain Evidence-based TB Control Policy Development, Capacity Building to Prevent and Control Tuberculosis, Especially Multidrug-resistant and Extensively Drug-resistant TB and TB/HIV Co-infection in the Russian Federation”, effective 31 December 2012. WHO was requested to stop its activities under the USAID-funded project and began the closeout of the Project to be completed by 31 December 2012.

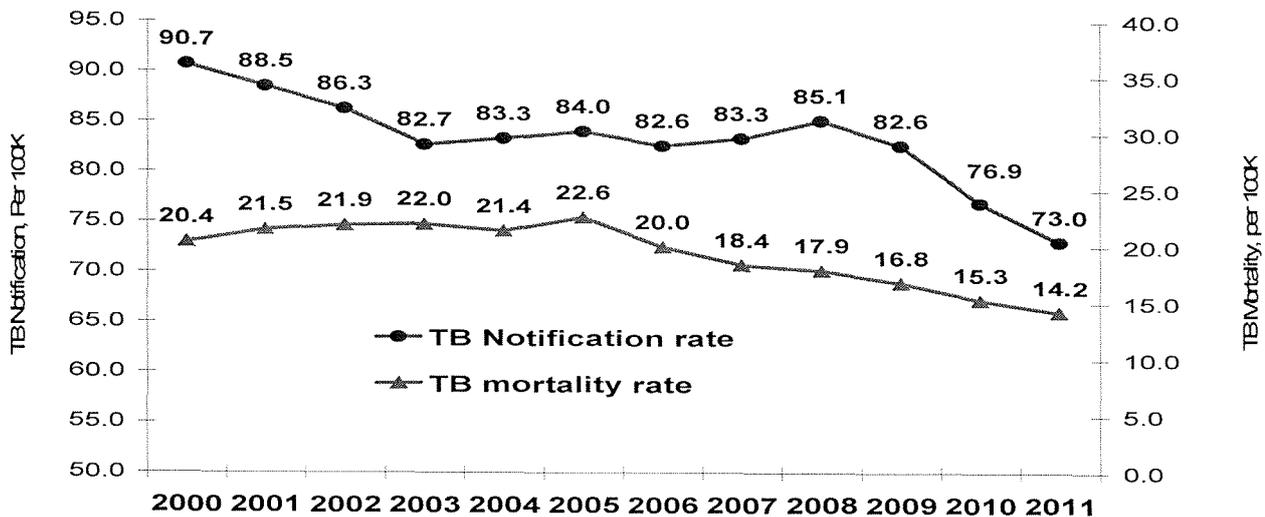
Due to the untimely termination of the USAID-supported TB Control project WHO elaborated an action plan for the closeout of the project and provided a number of meetings and consultations to secure WHO/MOH mutual collaboration in TB Control in the future.

BACKGROUND INFORMATION

TB epidemiology in the Russian Federation

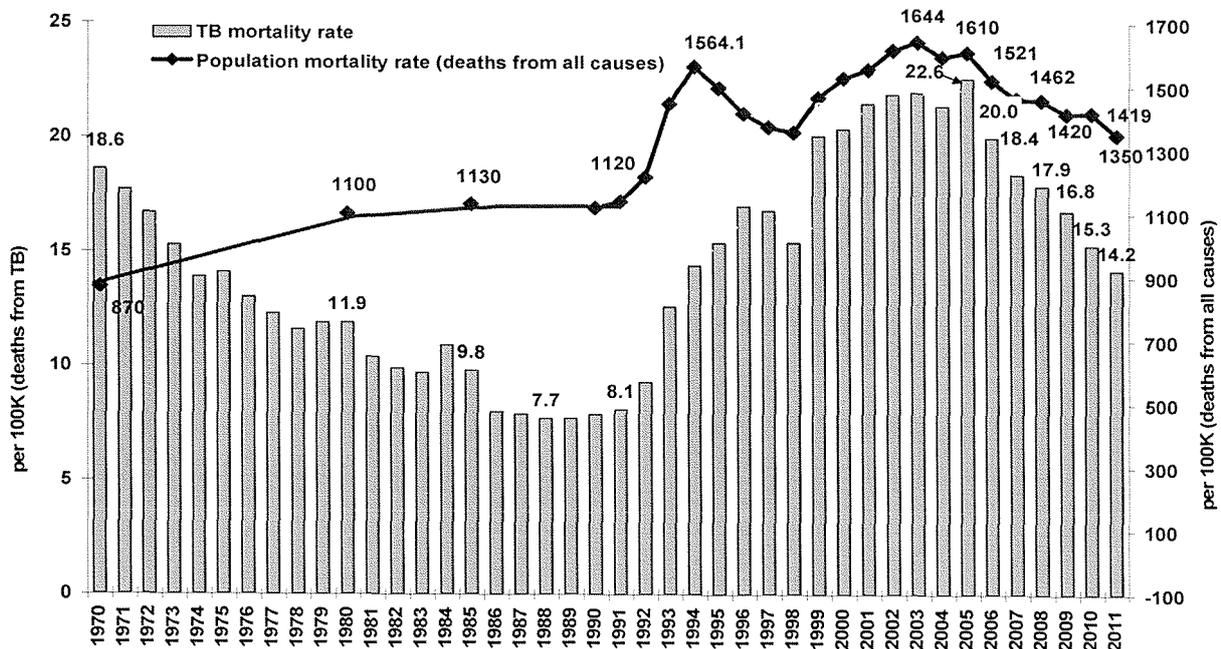
TB notification rate in the Russian Federation showed fast-moving growth during the 1990s after a long time gradual decreasing in 1970-80s (See Fig.1). This rate achieved its maximum in 2000 and demonstrated stabilization on a very high level in 2001–2008. In 2009–2011 TB notification rate showed a sustainable decreasing trend and from 2000 to 2011 it dropped down by 17.7 points (from 90.7 to 73.0 per 100.000 population).

Fig. 1 TB notification and TB mortality rates in the Russian Federation, 1985 – 2011
(Source: “Tuberculosis in the Russian Federation, 2012)



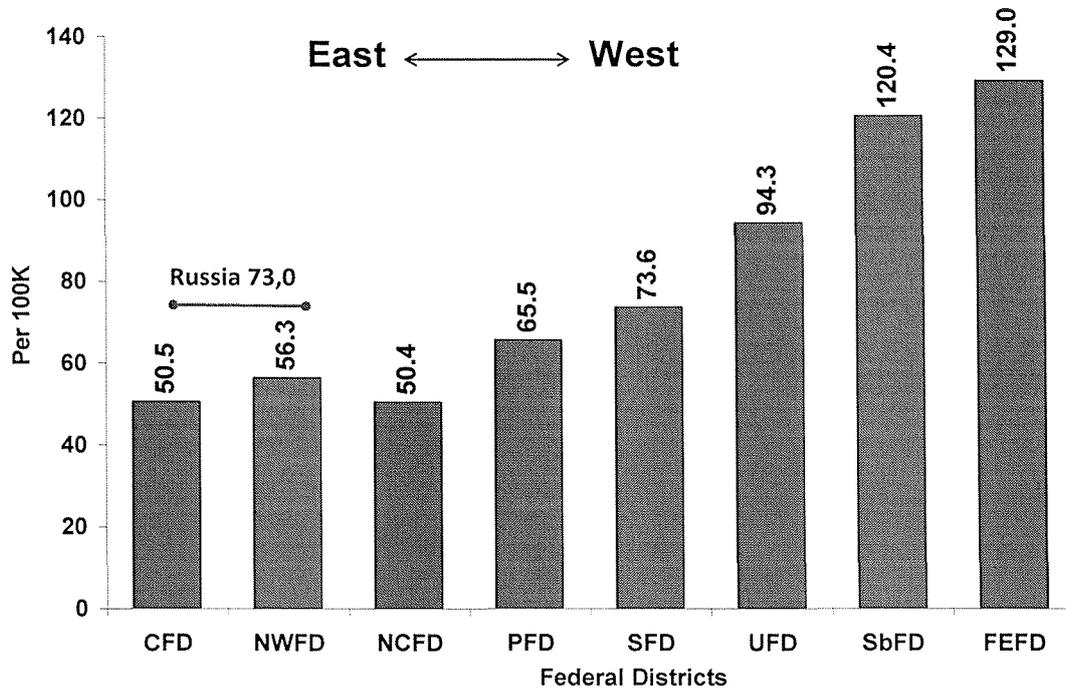
CRIHOI experts predicted the TB notification rate continuing decline by at least 5% in 2012. TB mortality rate has been declining since 2006 and in 2011 it comprised 14.6 per 100.000 population. TB mortality rate shows faster decrease than mortality rate due to all causes (See Fig.2). This fact demonstrates the improving of effectiveness of TB control in the country.

Fig. 2 TB mortality rate and mortality due to all causes in the Russian Federation in 1970 – 2011.
(Source: “Tuberculosis in the Russian Federation, 2012)



The notification rate gradually increases from Western to Eastern regions of Russia. In 2011 the minimal level of the rate was calculated in the Central Federal district (okrug) (50.5 per 100.000 population) and the maximum level – in the Far Eastern Federal district (okrug) (129.0 per 100.000 population). (See Fig.3).

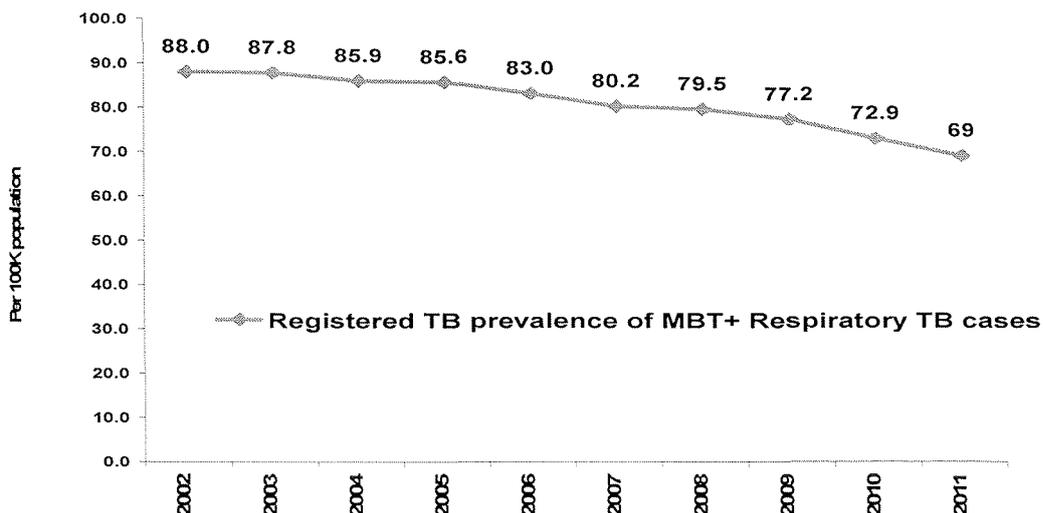
Fig.3 TB notification rates in Federal districts (okrug) of the Russian Federation in 2011.*
 (Source: “Tuberculosis in the Russian Federation, 2012)



* CFD- Central Federal district (okrug); NWFD - North Western Federal district (okrug); NCFD - North Caucasus Federal district (okrug); PFD - Privolzhsky Federal district (okrug); SFD- Southern Federal district (okrug); UFD - Ural Federal district (okrug); SbFD - Siberian Federal district (okrug); FEFD- Far Eastern Federal districts.

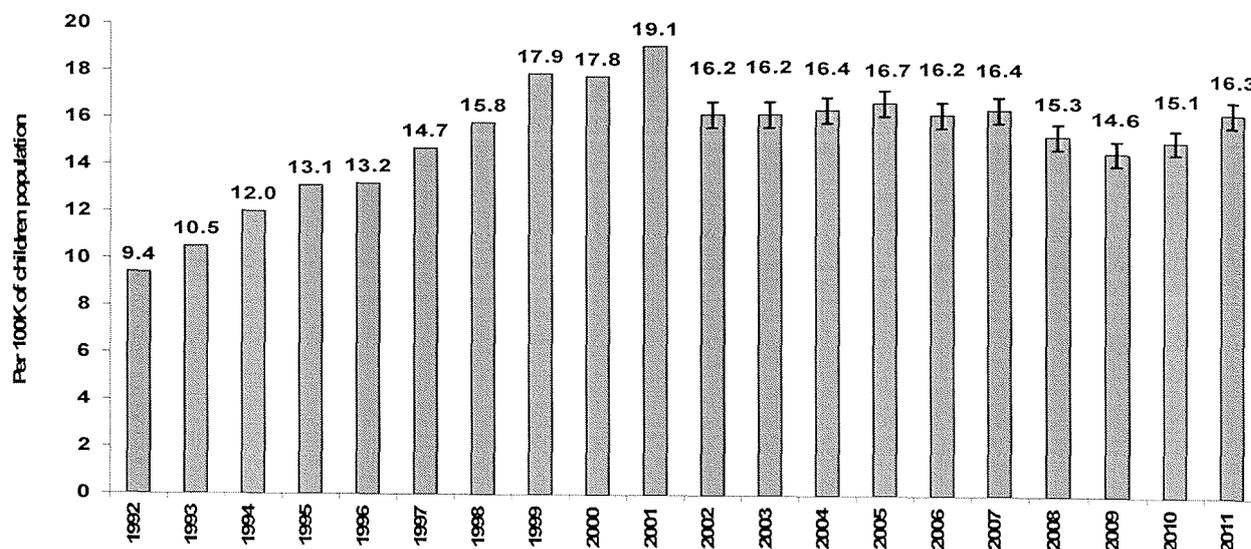
The registered prevalence of bacteriologically positive TB cases has been sustainably decreasing since 2005 and in 2011 it comprised 69.0 per 100.000 population (See Fig.4).

Fig.4 Trend of registered prevalence of bacteriologically positive respiratory TB cases (all methods), Russian Federation).
 (Source: “Tuberculosis in the Russian Federation, 2012)



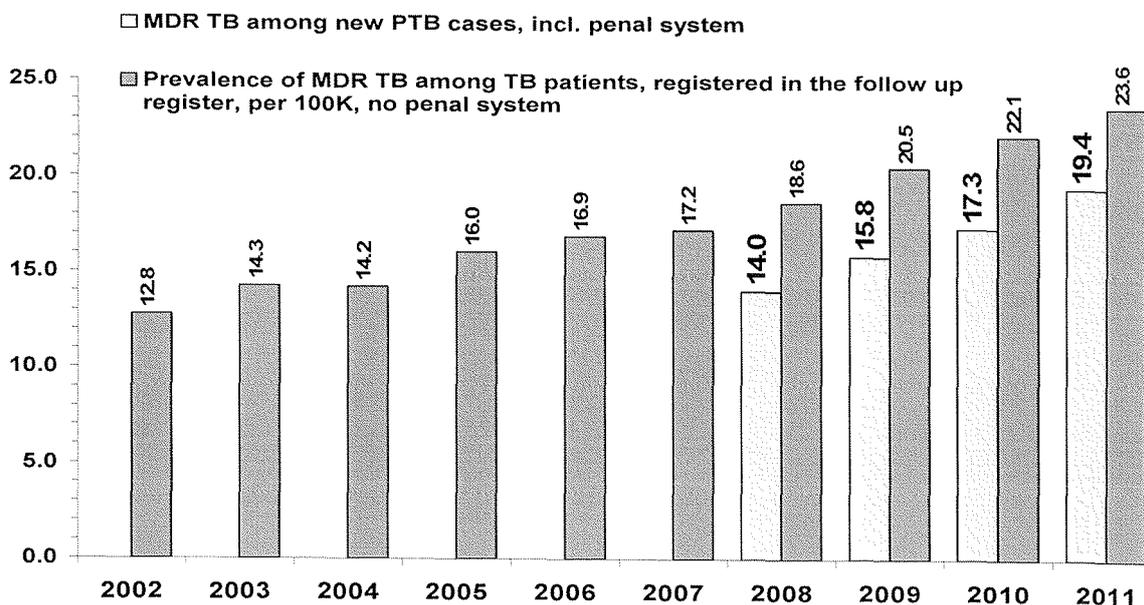
Despite to positive trend of the above mentioned TB rates some indicators show the remaining challenges of the national TB control. The rate of TB notification rate among children after the growth in the 1990s, and having reached its maximum in 2001 (19.1 per 100.000 children population) had a trend to stabilization and decreased to 14.7 per 100.000 children population in 2009. Nevertheless during the last three years the rate showed a moderate growth mainly due to intensification of children population testing. (See Fig. 5).

Fig. 5 TB notification rate among children 0 – 14 years old 1992 – 2011.
(Source: “Tuberculosis in the Russian Federation, 2012)



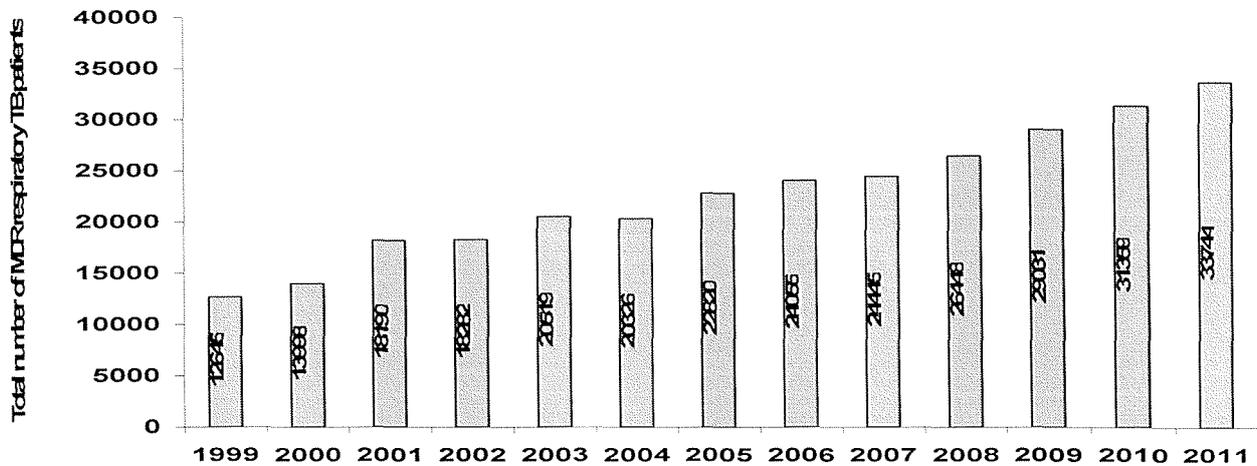
The trend of MDR-TB rates is unfavourable. WHO headquarters estimates that the RF has the highest MDR-TB burden in Europe and the third highest one in the world. In accordance with the national statistics (national TB reporting form # 33) the prevalence of MDR-TB among TB patients in civilian sector increased from 12.8 in 2002 to 23.9 per 100.000 population in 2011. The proportion of MDR-TB among new pulmonary TB cases increased from 14.0 in 2008 to 19.4 in 2011 (See Fig. 6.)

Fig. 6 MDR-TB cases in the Russian Federation 2002 – 2011
(Source: “Tuberculosis in the Russian Federation, 2012)



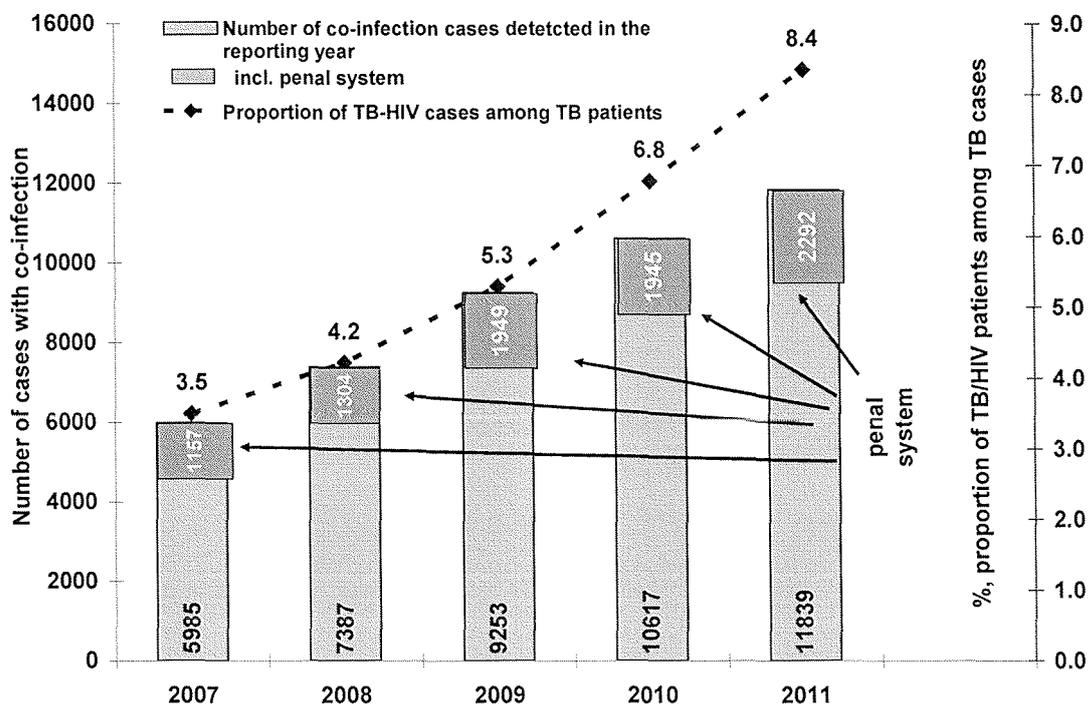
The total number of the registered MDR-TB patients has been increasing since the end of the 1990s and in 2011, according to CRIHOI calculations, the number of MDR-TB patients with respiratory TB reached 33.744 (See Fig 7).

Fig. 7 Total number of MDR pulmonary TB patients in the Russian Federation
(Source: "Tuberculosis in the Russian Federation, 2012)



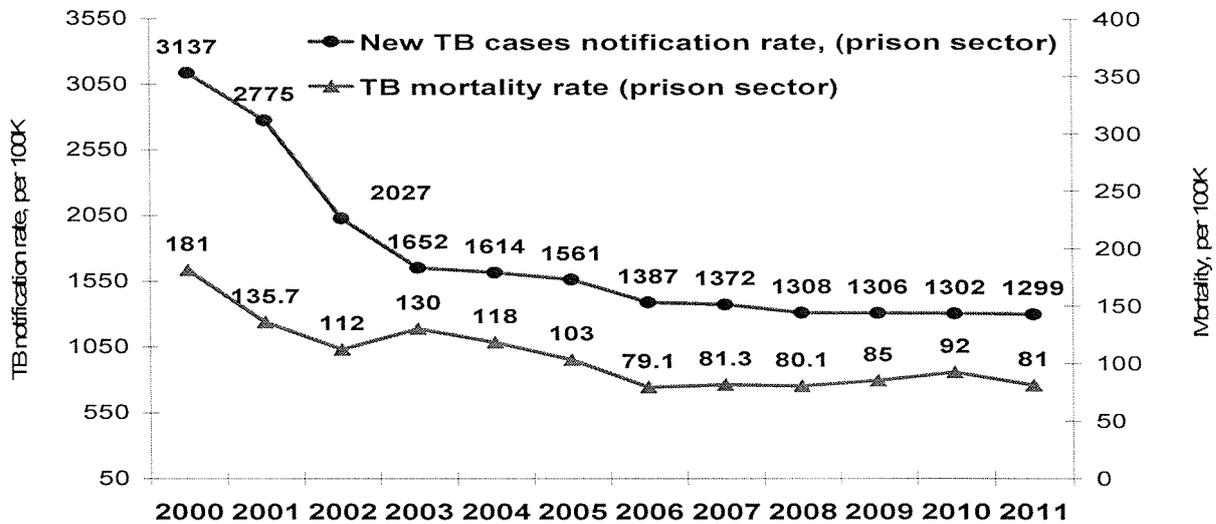
Another challenge for the Russian TB control is the rising of TB/HIV co-infection rate and its potential impact on TB epidemic. The RF started to officially register HIV cases in 1987 and TB/HIV cases - in 1999. According to the Federal AIDS Centre report the cumulative number of HIV-infected people was 650.100 by the end of 2011 including 5.882 children. In 2011, TB/HIV cases among new TB cases in civilian sector comprised 9.5%. The proportion of TB/HIV cases among TB patients increased from 3.5 in 2007 to 8.4 in 2011, and the total number of TB/HIV cases in 2011 comprised 11.839 including 2.292 patients in prison sector (See Fig.8).

Fig. 8 TB/HIV co-infection in the Russian Federation
(Source: "Tuberculosis in the Russian Federation, 2012)



TB notification rate and TB mortality rate in the FCS settings steadily declined between 2000 and 2006 due to the changes in the criminal law and consequent decrease of the prison population, improvement of living conditions and strengthening of TB control in Russian prisons. Since 2007 these rates showed some stabilization and in 2011 TB notification rate comprised 1.299 per 100.000 prisoners and TB mortality rate 81 per 100.000 prisoners (See Fig.9).

Fig. 9 TB notification and mortality rates in Federal Correctional Service facilities
(Source: Federal Correctional Service statistic, form 4-TUB)



The absolute number of TB patients in FCS settings was decreasing since 2001 and in 2011 35.040 TB patients were registered in prison sector (See Fig.10). During 10 years the number of TB patients in FCS settings declined by 2.8 times.

Entry screening in the pre-trial prisons detects about 40% of all new TB cases registered in FCS settings and about 60% of the new TB cases were detected in prison settings after trial (See Fig.11). MDR-TB rates in FCS settings exceed the same rates in civilian sector and the proportion of MDR-TB patients among new TB cases in 2011 comprised 23.8% (See Fig.12). During the last three years FCS reported stabilisation of PLWHIV number in penal settings. Nevertheless, the proportion of TB/HIV co-infection in FCS still grows (See Fig. 13).

Fig.10. Number of registered TB patients in FCS settings
(Source: Form № 1-MED, FCS).

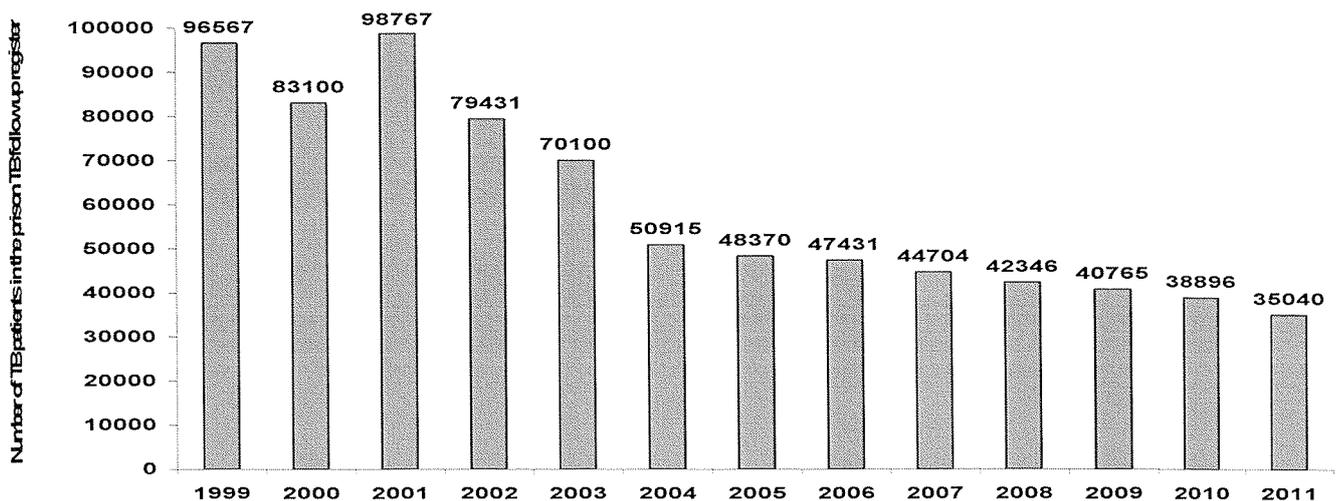


Fig.11 Proportion of new TB cases detected in pre-trial prisons and correctional settings
(Source: "Tuberculosis in the Russian Federation, 2012")

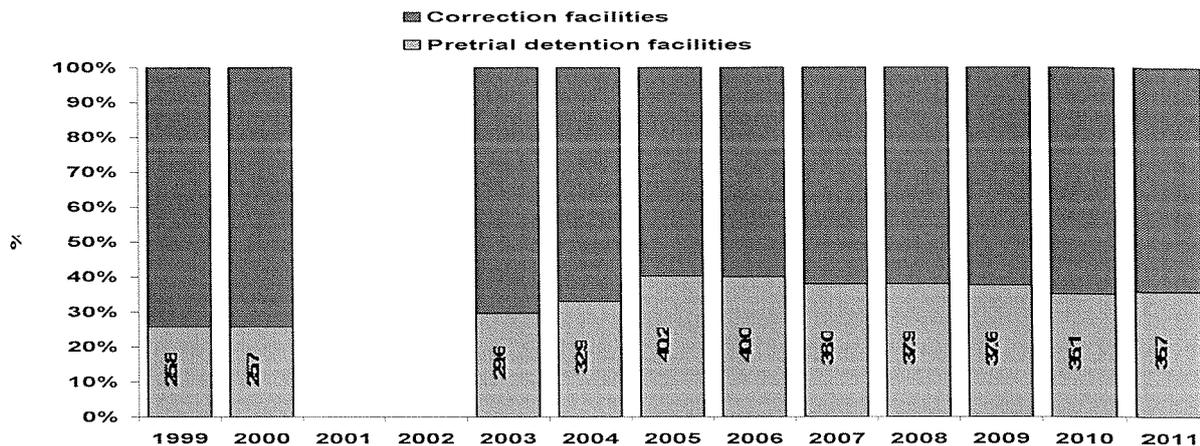


Fig.12 MDR TB among new TB cases in FCS settings
(Source: "Tuberculosis in the Russian Federation, 2012, in press")

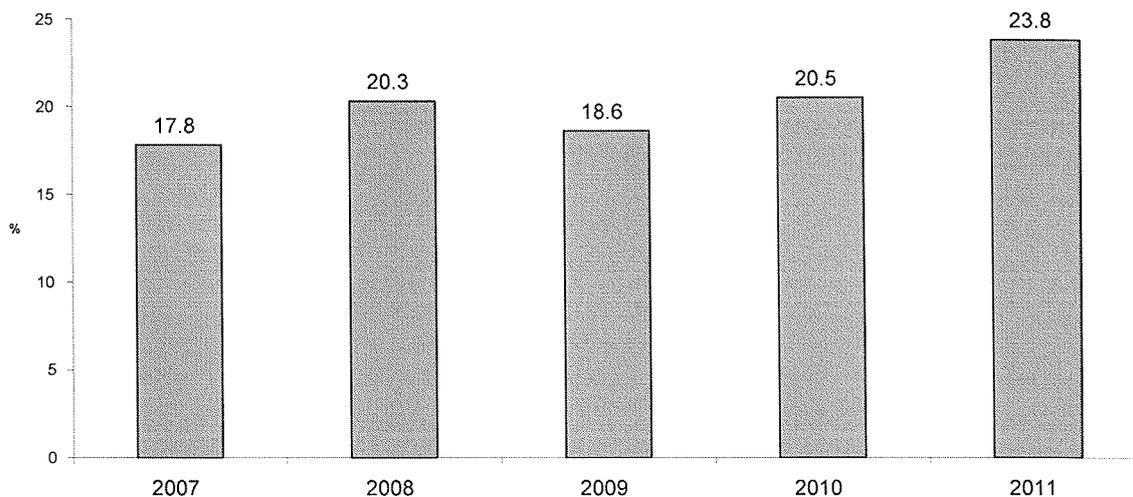
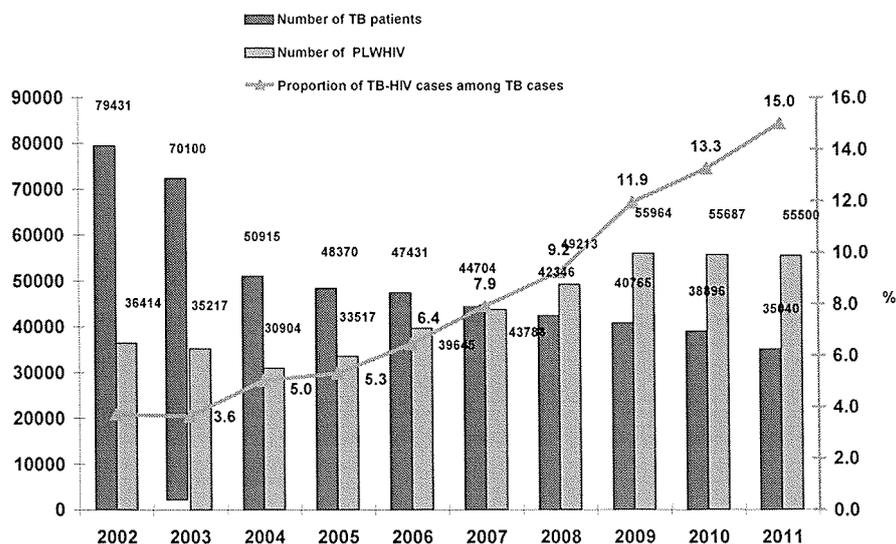
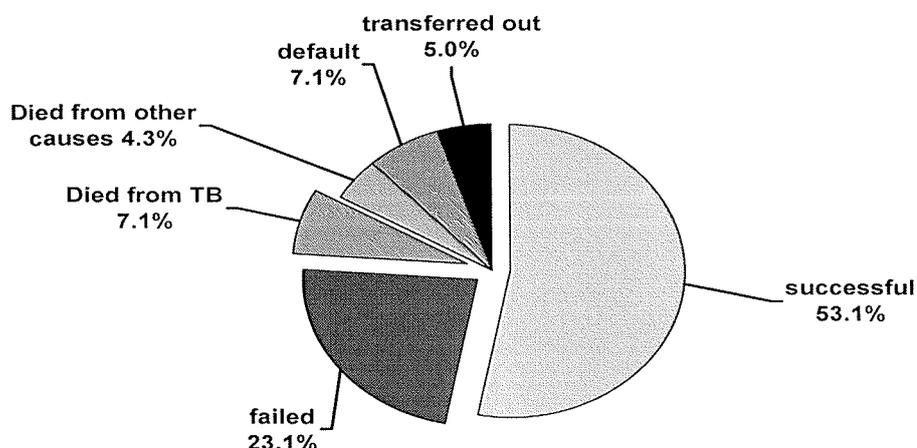


Fig.13 The number of TB cases, PLWHIV, and the percentage of patients with HIV/TB co-infection in FCS facilities, the Russian Federation
(Source: Forms No. 4-tub and No. 1-MED)



Treatment success rate for 2010 cohort of new smear positive patients remains low – 53.1% (See Fig.14.) (cohort 2009 of new smear positive patients – 55.3%). The high level of treatment failure (23.1%) and defaulters (7.1%) resulted in insufficient treatment success rate.

Fig.14. Treatment outcomes in cohort 2010 of new smear positive TB cases
(Source: form #8-TB MoHSD and FCS)



To date, at the federal level, there has been no cohort analysis or reporting on treatment outcomes for MDR-TB cases. WHO CO TB Control Programme acted as technical assistant for implementation of GF Round 4 TB Control project in the Russian Federation. In this regards WHO CO TB Control Programme in collaboration with its partners has been monitoring treatment outcomes of MDR-TB cohorts 2007-2010 that were enrolled for treatment within GF 4 project. Treatment success rate: for 190 MDR-TB patients included in cohort 2007 it comprised 47.4%, for 1.352 MDR-TB patients included in cohort 2008 – 52.2%; for 3.146 MDR-TB patients included in cohort 2009 – 48.7%. Cohort 2010 includes 1.831 MDR-TB patients and more than 20% of this amount was still on the treatment to the end 2012.

There are two opposite trends of TB epidemiology indexes in the Russian Federation. TB notification and TB mortality rates demonstrate sustainable decreasing during the last years but TB notification rate in children; MDR-TB rates and the number TB/HIV co-infection show the growth.

PROJECT ACTIVITIES

Strengthening the national TB Control Programme to prevent and control M/XDR-TB and TB/HIV

Development of relevant national guidelines and recommendations consistent with the international standards

The Consolidated Action Plan to Prevent and Combat M/XDR-TB in the WHO European Region 2011-2015 (endorsed by the 61st Regional Committee), was officially launched during the MDG-6 Forum in Moscow, the Russian Federation, on 10 October 2011.

In accordance with the resolution of the World Health Assembly WHA 62.15 and 61st Session of the WHO Regional Committee, the Russian Federation as TB and MDR-TB high burden country assumed the preparation and the presentation of the WHO EURO National MDR-TB Response plan. MoH&SD sent to WHO the first short draft plan in 2011 but due to reforming and separation

of the Ministry the completion of the plan was suspended. To facilitate the completion of the plan, WHO CO TB Control Programme elaborated a comprehensive draft National MDR-TB Response plan based on the first MOHSD draft and official documents of the Russian MOH and WHO recommendations. This draft was revised by independent international expert. The draft should be submitted to MOH as a tackle for finalization of official national plan.

In the framework of WHO technical assistance for the Russian MOH and according to the agreement between the Chief TB Specialist of the Russian MOH Professor P.Yablonsky and WHO TB Programme Manager Dr Masoud Dara on July 16, 2012, the WHO CO TB Control Programme received the official draft of the new national instruction on TB chemotherapy. WHO staff and independent TB experts provided a review of the draft and gave their recommendations. The final version of the recommendation was submitted to the MOH by the Chief TB Specialist for approval and issuing.

WHO facilitated the preparation of the Terms of References for TWG on development of the National Guidelines on DR-TB management. The first meeting of this TWG took place in Saint Petersburg during the first Congress of the Association of the Russian Phthisiatricians on 18 October, 2012. This group was established as a part of a Group of experts led by the Russian MOH Chief TB Specialist. The Group membership and a work plan were discussed and approved including participation of WHO in planned activities. The draft of the National Guidelines on DR-TB management should be developed during 2013.

In 2012 under a WHO/Europe Regional Director's Special Project on MDR TB control, the Task force on the role of the surgery in TB was created for the development of evidence-based criteria for surgery for M/XDR-TB patients, based on review of existing practices and lessons learned. Due to a long term history of TB surgery in Russia a number of Russian experts were invited to participate in the Task force. On 19 October 2012 the first meeting of the WHO/Europe Task Force on the Role of Surgery in MDR-TB took place in Saint Petersburg during the First Congress of the Association of the Russian Phthisiatricians. The meeting was organized by the WHO/Europe with WHO CO TB Programme assistance. Dr Richard Zaleskis, a former WHO/Europe Regional Advisor, served as Chair of the meeting. Nine members of the Task Force, 4 WHO staff and about 20 observers, surgeons and participants of the first congress of the National Association of Phthisiatricians, participated in this meeting.

WHO CO TB Control Programme in collaboration with national and international partners supported focused on training activities for strengthening the National TB service (both civilian and prison) for the proper M/XDR-TB management.

In June – September 2012 WHO TB Programme staff reviewed and provided comments on the AIHA training courses materials on MDR-TB management and Laboratory Diagnostics, developed by experts of Central TB Research Institute with support of AIHA. The training materials were presented during the Workshop for Heads of TB Chairs of leading medical schools of the Russian Federation conducted with the WHO CO participation on 26 – 29 November. The training materials were published by AIHA and later presented to partners at the meeting of the TB Training and Education Collaborative for the WHO European Region in Copenhagen (5-6 December 2012).

WHO CO TB Control Programme in collaboration with CTRI (the WHO Collaborating Centre on TB control) and NTRI (WHO Collaboration Centre on MDR-TB control education) conducted four workshops on PMDT. Totally 66 TB doctors and managers were trained. Workshops were focused on developing the skills of participants in clinical issues of PMDT as well as internationally recommended principles of M/XDR-TB control in penitentiary settings. The participants were also trained in completion of standard recording forms for MDR-TB patients and preparation of reports recommended by PMDT Guidelines, organization of proper infection control in TB facilities and

social support programme for MDR-TB patients. National TB experts from CTRI, CRIHOI, Orel TB service and WHO TB Officer participated in the following courses as trainers and facilitators:

- Sixteen TB doctors and managers (9 women and 7 men) from CTRI and regional FCS branches of Voronezh, Kaluga, Yaroslavl, Ulyanovsk, Vladimir Samara, Saratov, Volgograd, Rostov oblasts, Perm and Krasnodar krai, Republics of Tatarstan and Bashkortostan were trained on 12 – 16 March 2012 at the Training centre in Orel (called Centre of Excellence on PMDT), affiliated with CTRI. ;
- Fifteen TB doctors and managers (8 women and 7 men) from NTRI and regional FCS branches of Sverdlovskaya, Chelyabinskaya, Kirovskaya, Kurganskaya, Tulsкая, Tambovskaya, Moscow, Ryazanskaya, Astrakhanskaya, Tverskaya, Orlovskaya, Oryenburgskaya oblast, Stavropolsky krai, Republics of Bashkortostan and Mordovia were trained on 13-17 August 2012 at the training centre in Orel (called Centre of Excellence on PMDT), affiliated with CTRI.
- Fifteen TB doctors and managers (7 women and 8 men) from regional FCS branches of Novosibirskaya, Omskaya, Tyumenskaya, Tomskaya, Kemerovskaya, Irkutskaya oblasts, Altai and Krasnoyarsk krajs, Republics of Tuva, Khakasia, Khanty-Mannsy Autonomy were trained on 17-21 September 2012 at the training centre in Orel (called Centre of Excellence on PMDT), affiliated with CTRI;
- Twenty TB doctors and managers (12 women and 8 men) from civilian and prison sectors of Far Eastern federal district: Khabarovskiy, Zabaykalskiy and Primorskiy krajs, Amurskaya oblast, Republics Sakha-Yakutia and Buryatia, Sakhalin and Jewish Autonomy, were trained on 1-5 October 2012 in Khabarovsk.

WHO CO TB Control Programme elaborated and agreed with CTRI, NTRI and CRIHOI the technical protocol for operation research on monitoring effectiveness of national MDR-TB control and prevention, including long time impact of international support for MDR-TB and prevention given within GF Round 4 project in the Russian Federation. The operational research was planned at the end 2012 -2013.

Development of standard operating procedures for all levels of TB prevention, control and care services

The MOHSD Poryadok (Protocol) of medical care provision for TB patients issued in 2011 covers the issues related to the prevention, diagnosis and treatment of TB including TB care for PLWHIV through TB services. The Protocol outlines and justifies general principles of TB Control in the country. Further development of standard operating procedures for TB prevention, control and care service which are not covered by this Protocol is needed in additional special recommendations, instructions, orders and guidelines.

WHO CO TB Control Programme in collaboration with national and international TB experts and MOH authorities started its activities to support the development of proper regulations: new instruction of TB chemotherapy and guidelines on management of DR-TB, new instructions for monitoring of MDR-TB and guidelines on TB infection control (See relevant chapters).

Improvement for prevention and control of TB in HIV positive individuals

In the framework of WHO assistance for improvement of TB/HIV co-infection control, recommendations on TB/HIV control collaborative activities were developed by the TWG on TB/HIV in 2004 and later in 2007, followed by training courses supported by the Global Fund round 4 TB control project. These recommendations were mainly reflected in the regional regulatory documents.

According to the MOH decision, the role of HIV-services in this process should be reflected in a separate Protocol of medical care for HIV patients (in draft). Unfortunately, coordination of TB/HIV control activities presents challenge as TB Control and HIV Control Programmes are supervised by different Departments of the MOHSD. Special efforts are being made to facilitate better coordination and collaboration in this area. The HLWG Secretariat identified the issue of TB/HIV control collaboration as a top priority and selected this topic for discussion at the HLWG meeting in April 2012. For its preparation, an expert consultation meeting was called by the WHO CO on 24 January 2012, gathering representatives of the MOHSD, Federal Center of TB care of HIV patients, WHO CO HIV and TB Control Programmes, TB research institutes and international partners involved in this topic. Priorities for TB/HIV control in the RF and the role of the HLWG thematic working group in 2012 were discussed at this meeting. It was agreed to primarily document the existing guidelines on TB/HIV control in regulatory and technical documents on TB/HIV control, and to identify the existing contradictions and gaps to better define the further TWG activities and membership.

Despite the progress achieved by the Federal Centre of TB care of HIV patients in coordinating TB/HIV services collaboration, not all Russian regions are covered by the required quality of TB-HIV surveillance. To assess the capability and quality of TB-HIV surveillance on sites, the operational research to evaluate the quality of local TB-HIV surveillance systems (recording and reporting forms, data flow etc.) is planned by WHO CO in collaboration with the Federal Centre of TB care of HIV patients and CRIHOI. The meetings on the development of the operational research protocol were conducted in the Federal Centre of TB care of HIV patients and in the Federal TB monitoring Centre (CRIHOI) in February and March 2012 accordingly.

The protocol for the study of “TB/HIV surveillance problems” was developed and approved during the meeting with the specialists of the Federal penitentiary service hold on 17 July 2012.

Improvement of infection control

TWG on TB infection control developed “The Guidelines on infection control in TB settings” including modern WHO recommended approaches for the Russian TB service. The Guidelines were submitted to the MOH for its consideration, approved has and recommended by the MoH for publication. The document will be published and distributed among the main TB institutions throughout the country.

WHO CO in collaboration with CTRI, the WHO Collaborating Centre on TB control, national and international partners provided its financial and technical support for conducting four workshops on TB infection control issues at the Training Centre on Infection Control in Vladimir, affiliated with CTRI (called Centre of Excellence on TB Infection Control). Totally 90 experts were trained with WHO CO financial support:

- The workshop on prevention of nosocomial transmission of tuberculosis. Twenty one TB facilities administrators, epidemiologists, heads of TB departments, chief nurses, laboratory managers and TB hospital engineers (14 women and 7 men) from the Republic of Chuvashia, Republic of Karelia, Vladimir, Nizhniy Novgorod, Archangelsk, Astrakhan, Tambov, Kaliningrad, Irkutsk, Voronezh oblasts and from the Novosibirsk TB Research Institute were trained on 30 January – 3 February 2012. The course covered theoretical aspects and implementation issues of airborne TB transmission risk reduction as well as managerial activities aimed to develop sustainable TB infection control programme in cold climate settings;
- The workshop on engineering aspects of prevention of nosocomial TB transmission. Nineteen engineers from ventilation companies and regional TB facilities of Tomsk, Vorkuta, Moscow, St. Petersburg, Yekaterinburg, Rostov, Republic of Khakasia, Chechen Republic, Vladimir oblast and Ukraine (9 women and 10 men) were trained 6 – 10 February

2012. IFRC/Russia, MSF/Chechnya, and IFRC and UNDP Ukraine co-financed this event by covering the costs of the participation of Chechen and Ukrainian representatives. The aim of the intensive course for ventilation engineers was to discuss the theoretical aspects and to develop practical skills to effectively implement engineering measures to control environment in various high TB transmission settings;

- The workshop on prevention of nosocomial transmission of tuberculosis. Twenty nine TB managers, epidemiologists and engineers (16 women and 13 men) were trained on 2-6 April 2012. MSF/Uzbekistan and WHO CO in the Republic of Belarus co-financed this event and their representatives took part in the workshop. The course covered theoretical aspects and implementation issues of airborne TB transmission risk reduction;
- The workshop on bio safety in TB laboratories for 21 laboratory managers of FCS regional TB bacteriological laboratories (17 women and three men) were trained 9-13 April 2012. The workshop was focused on specific issues of TB infection control in laboratories and proper laboratory equipment maintenance.

In additional three workshops on TB infection control issues were arranged specifically for a number of TB partners with WHO CO technical support . Totally 51 experts were trained in WHO supported training centre:

- University Research Company financed the workshop on prevention of nosocomial transmission of TB. Twenty one TB managers, epidemiologists, heads of TB departments, chief nurses, Rospotrebnadzor representatives and MSF Tajikistan representative (11 women and 10 men) were trained on WHO recommended principals of TB infection control on 14-18 November 2011. The course covered theoretical aspects and implementation issues of airborne TB transmission risk reduction, managerial activities aimed to develop sustainable TB IC programme in cold climate settings and used standard programme elaborated with WHO CO technical assistance;
- Russian regional TB services and TB Control Programme of the Republic of Kazakhstan financed conducting of the workshop on maintenance, validation and certification of bio safety cabinets. Twelve engineers (2 women and 10 men) were trained on 17-21 September 2012. The course covered practical aspects of operation and proper maintenance of bio safety cabinets;
- MSF Holland financed the workshop in bio safety in TB laboratories. Eighteen TB doctors, TB managers and laboratory technicians from Chechen Republic were trained on 24-28 September 2012. The workshop was focused on specific issues of TB infection control in laboratories and proper laboratory equipment maintenance.

Appropriate quality of laboratory network performance

MOH appointment of the National Reference laboratory remains a priority action for the development of laboratories' standard operating procedures, installation of proper quality insurance control in TB laboratories and improvement of laboratory network performance. Appointment of national reference laboratory was discussed during the joint meeting of TWG on laboratory diagnostics and TWG on TB surveillance that was hosted by WHO CO on 15 August 2012.

In the framework of WHO assistance for strengthening the country laboratory capacity, implementing the WHO Regional Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-resistant Tuberculosis (M/XDR-TB) and expanding Russian-speaking supranational TB reference laboratories in the Region, WHO/EURO and WHO CO provided the assessment missions to federal TB (phtisiopulmonology) institutes on 27 September – 5 October 2012). The mission visited St Petersburg, Yekaterinburg, Novosibirsk and Moscow (Central TB Research Institute). The aim of the mission was to assess the key TB laboratories in the Russian Federation and to explore the possibility of including one of them in the WHO supranational TB

reference laboratory network. During the visit, the WHO representatives met with key authorities of these research institutes, including directors, heads of laboratories and laboratory staff members, to discuss biosafety, quality assurance and TB laboratory procedures. Recommendations of the mission were presented to MOH and the MOH representative has requested the full version of the mission report. Currently, the future format of the supranational TB reference laboratory network is under discussion and it is foreseen that the future network will consist of both supranational reference laboratories and centres of excellence, which will have a more regional scope.

On 20 October 2012 the WHO Officer of Antimicrobial Resistance and TB Laboratory Network Tuberculosis and M/XDR-TB Programme (DCE/TBM) at WHO Regional Office for Europe took part in the plenary session of the first Congress of the Russian Association of Phtisiatricians, organized in St. Petersburg. WHO presentation highlighted the importance of the mission of the newly established European TB Laboratory Initiative (ELI) on strengthening TB laboratory capacity in WHO/Europe.

Addressing gender- related barriers to improve access to TB diagnosis and care

WHO CO TB Control Programme provided negotiations with CTRI, NTRI and CRIHOI to conduct operational researches on gender-related issues in national TB control. Researches should be organized in 2013-2014 within operational researches dedicated to the monitoring of the effectiveness of MDR-TB control, organizations of TB care for PLWHIV and monitoring of the Russian regional programmes.

Improving TB programme monitoring system as a process of mutual technical assistance and transfer of knowledge and expertise among professionals

Development of national standard tools and protocol for monitoring

Improvement of the national TB monitoring system needs further implementation of the cohort analysis for monitoring of M/XDR-TB detection and treatment. As part of implementation of M/XDR-TB management according to the international approaches, TWG on TB surveillance and monitoring assists in the development of the new version of the national prikaz (order) on recording and reporting forms for TB and MDR-TB cohort analysis. Improvement of the national TB recording and reporting system was discussed by WHO CO and CRIHOI specialists at the working meeting on 13 February, 2012.

Development of TB electronic register is one of the core elements of any qualitative national TB surveillance. Currently, Russia has no national countrywide standards of TB software. WHO CO provides the consulting activities to support the development of the Terms of Reference for the national standards of the Russian TB software based on WHO guidelines “Electronic recording and reporting for tuberculosis care and control” and revised recording and reporting TB forms.

Discussions on the Terms of Reference for the development of the Russian standard of electronic TB register took place during the meetings held in Partner in Health (PIH) and WHO CO on 14-15 February, 15 and 22 March 2012, accordingly. The participants of the meetings were TB surveillance specialists from CRIHOI, StPRIPP, WHO CO and PIH. WHO Project Officer participated in a joint WHO/PIH mission to Tomsk (PIH supported TB Control Project) for the completion of the Terms of Reference for the electronic TB register and consulting of the register design.

The Round Table on the Monitoring and evaluation of DR-TB spread in the RF was conducted in St. Petersburg on 18 October 2012. This event was hosted by the 1st Congress of the National Association of Phtisiatricians “The Current problems and perspectives of TB service development

in the Russian Federation” endorsed by the Russian MOH. 40 participants, including national TB experts, representatives from WHO headquarters Stop TB Department, TB Control Programme from WHO Regional Office for Europe and WHO CO participated in the Round Table.

Improvement of standardized methodology for TB monitoring and supervision with the emphasis of M/XDR-TB and TB/HIV cases as integral part of the national TB monitoring system

Activity on promotion and implementation of WHO CO developed standardized methodology for TB monitoring and supervision depends on the MOH approval and issuing of new regulation on M/XDR-TB and TB/HIV monitoring. Discussion and field testing on a new set of tackles for standardized monitoring were planned to be done when the MOH will issue the new regulations.

Human resource development (HRD) for TB control as an integral part of Human Resources for Health (HRH)

HR for health is a key element of a proper functioning health system in the country. Development of human resources contributes to health system strengthening. The national TB control programme depends on qualified and motivated staff, so development of human resources for TB control is required to ensure effective TB control interventions and should target different categories of health workers involved in TB control at different levels of care provision. Human resources development includes proper planning for required types of personnel, functions and workload, system of professional training and re-training in specific areas of TB control, system of coaching and supervision.

Improvement of professional capacity and training programmes

WHO CO initiated consultations with partners involved in supporting medical training for TB control in order to consolidate and coordinate efforts. Agreement was reached on the joint consultations, and the previously developed training and educational materials were reviewed to ensure high standards and internationally approved approaches to TB control.

Continuous postgraduate medical education is an essential part of further strengthening of the human capacities of the national TB Control Programme. Attracting young doctors and researchers to TB control is a high priority, as TB control, with the majority of doctors being slightly below or over the pension age, is affected by the human resource crisis more than any other area of health care.

AIHA commissioned the team of CTRI TB experts with the development of standard training certified course on PMDT. This team of CTRI TB experts had a long time experience in conducting PMDT workshops in the framework of WHO supported activities of COE on PMDT in Orel. Training methodology and materials of COE in Orel were taken for the development of the standard course.

CTRI initiated negotiation with WHO CO for the establishment of webinar course on PMDT and distant training of TB experts in remote regions. WHO technical assistance and financial support were requested for the first course scheduled for April-May 2013. Communication means and training materials should be tested.

On 21 February 2012, a meeting with the Novosibirsk TB Research Institute (WHO Collaborating Center on MDR-TB Training and Education, Director Professor Vladimir Krasnov) took place upon the Institute’s request. Areas of collaboration were discussed. It was agreed to prioritize the development of MDR-TB training programme on the basis of Novosibirsk/Tomsk WHO

Collaborating Center for TB specialists from Siberian and Far Eastern Federal districts in the framework of the collaborative activities.

WHO Officers took part in national educational events and conferences to provide presentation of WHO recommendations in TB control and facilitate training sections.

On 20 October 2011, the postgraduate school “Methodology of research and data analysis in biomedicine” was organized by WHO CO TB Control Programme in the framework of the All-Russia scientific and practical TB conference “Improvement of medical care for TB patients” in Saint Petersburg (October 20 – 22, 2011). WHO CO Officer presented the lecture “Monitoring and evaluation in biomedicine, main principles, culture and philosophy of data analysis”. There were more than 50 participants from the Russian regions, including head and deputy head doctors of TB dispensaries, statisticians and TB managers;

On 19 – 23 December 2011, WHO CO TB Control Programme Officer contributed as facilitator in the postgraduate courses “Effectiveness of Research in Biomedicine” held at RIPP and organized by PIH. WHO Officer delivered 6 lectures on evidence-based medicine and biostatistics. More than 30 TB doctors from regional TB programmes and RIPP attended the course.

On 23 March 2012, the Young Scientists Conference dedicated to the World TB Day was conducted in CTRI. PIH and WHO CO supported the organization of the event and participation of some delegates from remote regions of the RF. More than 70 representatives of Federal TB/Phthiology research institutes, regional TB services and National TB Centres from the Commonwealth of Independent States took part in the conference. The results of research on TB diagnostics, including pilot introduction of new molecular methods, treatment of TB and lung diseases were reported and discussed;

On 5 – 10 September 2012, WHO CO TB Control Programme Officer took part as facilitator in the postgraduate courses “Effectiveness of Research in Biomedicine” held at RIPP MMA and organized by PIH. WHO CO Officer delivered 6 lectures on evidence-based medicine and biostatistics. More than 40 TB doctors from regional TB programmes and RIPP attended the course.

Development of tools for staff retention and HRD planning

WHO CO emphasized issues of HRD planning within its support in preparation of National MDR-TB Control Plan 2012-2015. Establishment of TWG for development of tools for staff retention and HRD planning were planned in 2013-2014.

Classification of positions and development of terms of reference for different categories of health personnel

WHO CO planned a study of regional TB staff terms of references within operational researches on monitoring effectiveness of national MDR-TB control and prevention and TB-HIV surveillance problems to initiate discussion of this problem with the MOH. Proper technical protocols were elaborated and agreed with CTRI and NTRI. Researches were planned for the end 2012-2013.

Strengthening the pool of Russian TB experts working at the local level and trained as international consultants (including exploring work with local medical academy staff as appropriate)

WHO CO continued its efforts to strengthen the capacity of the pool of Russian TB professionals that could be later engaged as international technical experts to support efforts of TB control in the WHO European Region and globally. Training in international principles of evidence-based

medicine, research and exposure to international community experience were among approaches used for informal and more formal training.

WHO CO TB Control Programme supported the participation of national TB experts in international conferences and workshops:

On 26 – 30 October 2011, Russian TB experts and WHO CO TB Officers took part in the 42nd Union World Conference on Lung Health in Lille, France. Prior to the Conference, on 26 October, a workshop on training activities for M/XDR-TB control in the Russian Federation was organized by the Lilly Stop MDR-TB Partnership. It was agreed to continue coordination meetings with international partners to ensure proper collaboration in this area. At the Lilly Stop MDR-TB Partnership workshop, WHO CO presented the WHO view on MDR-TB surveillance development in the Russian Federation;

On 27 – 30 October 2011, during the Union World Conference on Lung Health, WHO CO in collaboration with Russian TB control specialists presented seven posters devoted to the Russian Federation experience in combating TB. In particular, posters presented: studies of the MDR-TB social and demographic factors in the regions of Russia, quality assessment of routine DR-TB surveillance at the sub-national level in the RF, results of Green Light Committee approved projects in Russia supported by Global Fund Round 4 and the Project impact on MDR-TB control in Russia, study outcomes on monitoring and evaluation of the first line DR-TB pattern at the regional level, and forecasting the long-term outcomes for pulmonary TB patients. There was also a poster presentation on “Causes of patient and health system delays in three regions of the Russian Federation” made within the poster discussion session “Health system factors affecting TB detection”;

On 3-4 July 2012 the 6th Conference of the Union Europe Regional (IUATLD) was held in London. Three Russian experts took part in the event and provided presentations on MDR-TB Control and Strengthening capacities of TB Laboratory network.

On 11-13 November 2012 the Russian MOH representatives took part in the WHO HQ-organized side events in Kuala Lumpur, Malaysia: Eighth Meeting of the Subgroup on Public-Private Mix (PPM) for TB Care and Control (10 to 11 November 2012); Third Consultation for the review and planning of the WHO-CIDA Intensified TB Case Detection Initiative (12 November 2012); Special Consultation with NTP Managers of High TB-burden countries (12 November 2012).

On 13-17 November 2012, two representatives of the National TB programme participated in the 43rd Union World conference on Lung Health, Kuala Lumpur, Malaysia, with poster presentations.

Mainstreaming TB surveillance and recording and reporting documentation with a strong analytical component in cooperation with relevant research institutes

For the last few years the Russian Federation has achieved notable success in the improvement of the national MDR-TB surveillance system both on the national and sub-national levels. At the same time, the current system of Russian DR-TB monitoring and evaluation does not ensure the required representation and quality of DR-TB data, and has problems in meeting the international definitions and data collection approaches. One of the ways to improve DR-TB surveillance is the development of the national Guidelines of DR-TB surveillance based on national and international definitions and rules.

Development of the national drug resistance surveillance system

WHO CO in collaboration with WHO/EURO initiated the elaboration of Guidelines on the organization of monitoring of the spreading of DR-TB in the RF. The purpose of this guide is to

improve the regional and federal surveillance systems. Currently there are no modern national recommendations in MDR-TB monitoring, and the compatibility of regional TB programmes for MDR-TB surveillance is insufficient. The development of a specific set of tackles considered in these guidelines will help to standardize the results obtained by the Regional TB control programmes according to WHO recommendations and the requirements of the Global project. The draft Guidelines on the organization of monitoring of the spreading of DR-TB in the RF was discussed during the joint meeting of TWG for TB laboratory diagnosis, and the TWG on surveillance and monitoring of TB took place on 11 July 2012. TWG meeting approved the draft and made decision to finalize the document as manual for managers of TB facilities, health care providers, epidemiologists, laboratory practice professionals, specialists in logistics and statistics.

Publication of analytical reviews and annual national TB drug resistance reports

WHO CO supported and coordinated preparation and publishing of annual analytical reviews “Tuberculosis in the Russian Federation, 2010” and “Tuberculosis in the Russian Federation, 2011”. The 2010 Review was approved by the Russian MOHSD, issued in January 2011 (printed 2000 copies in Russian and 500 copies in English) and disseminated among the leading TB control institutions of Russia and the Commonwealth of Independent States, also among international partners. Draft Review 2011 was fully completed. The draft was handed for the approval to the MOH. The MOH agreed to provide financing for publishing of “Tuberculosis in the Russian Federation, 2011”.

The annual TB Analytical review is the collaborative work of the MOHSD, WHO CO and six leading institutions working in TB control in the country. More than 30 authors of the different sections of the review are the leading Russian and WHO CO TB control specialists. The Review includes twelve chapters covering all main sections of TB control and TB epidemiology: TB notification and estimated incidence, mortality, treatment outcomes, TB-HIV infection, MDR-TB, capacity and structure of TB control facilities and resources, etc. Every section is provided with the information from WHO Reports “Global TB Control”, WHO/The UNION MDR-TB Reports and other international publications. This enables the Russian TB specialists to interpret and understand the international data and surveillance approaches, and to compare the Russian and international TB control reports. TB Review has a special chapter describing the MDR-TB control problem in the Russian Federation and globally, the level of MDR-TB spread in the Russian regions and analysis of the contributing factors for MDR-TB growth in the country. The Analytical review is an important tool of collaboration, collection of the proper TB data and its processing, and the source of the distribution and clarification of the content of WHO reports and international TB surveillance publications in Russian.

WHO CO assisted the MOH and WHO Headquarters in the presentation of TB data from the Russian Federation to the Global TB Report. The Russian MOH was not able to present the proper data on 2011 TB Control activities financing in the country due to reforming of the Ministry in 2012. WHO CO initiated the mutual WHO/MOH activities to collect the requested 2012 data. A number of meetings and consultations with national authorities and TB experts were conducted.

Provision of technical support for existing COE in Orel and Vladimir, affiliated with the WHO Collaborating Center at CTRI, also contributing to their advancement as international COE for the WHO European Region.

WHO CO in collaboration with CTRI and Centres in Orel and Vladimir developed and agreed activity plan 2012-2015 for joint training activities. As it was planned, WHO CO and CTRI should conduct four courses on PMDT in Orel training centre and four courses on TB infection control in Vladimir training centre per year.

WHO CO supported the training courses and training centres capacities in COE on MDR-TB control in Orel and COE on TB infection control in Vladimir. COE in Orel hosted three of four workshops on PMDT supported by the WHO CO. The staff from Orel COE took part in all WHO supported courses as trainers and facilitators. The COE in Vladimir hosted all seven courses on TB infection control supported by WHO CO and its partners.

On 5-6 December 2012 the TB Training and Education Collaborative for WHO European Region meeting took place at the WHO Regional Office for Europe. WHO CO TB Control Programme presented the training activities for TB control in Russia with special focus on the COE in Orel and COE in Vladimir. The partners agreed that due to the international level of training provided by the above mentioned training centres, they should be placed on the TB team list of resources for the technical assistance and be promoted among the NTPs in the WHO European Region.

Development of the COE on TB control laboratory component in Chuvashia and at least one COE east of the Ural Mountains

Support to the COE on TB laboratory in Chuvashia

WHO CO TB Control Programme encouraged the development of the draft agreement between RIPP MMA and the Republican TB Dispensary of Chuvashia on establishment of COE on laboratory detection and diagnostic. The agreement is at the final stage of discussion and approval. RIPP MMA and Chuvashia TB Dispensary developed a draft action plan 2013-2015 for the COE in Chuvashia.

WHO CO TB Control Programme provided supplies to the Chuvashia Republican TB Dispensary of the BACTEC reagents and disposables to prepare for the launch of a training programme on rapid TB and TB resistance diagnostic.

Establishing a new COE on laboratory diagnosis in collaboration with a federal TB research institute beyond the Ural Mountains

WHO CO TB Control Programme and NTRI negotiated the establishment of the COE on laboratory diagnosis in the Siberian federal district. NTRI recommended six regions in Siberian and Far Eastern federal district as potential sites for the establishment of the COE on laboratory diagnosis.

On 22 June 2012 the WHO TB Control Programme Technical Officer in laboratory diagnostics will meet the representatives of the Novosibirsk TB Research Institute, WHO Collaborating center, to discuss the details of the process, including the criteria for the selection of the site for the future training center on TB diagnostics in the Eastern part of the country. During the discussion of NTRI experts with WHO Officers two sites (Zabaikalsky krai and Republic of Buryatia) were preliminary selected for the assessment.

On 6-16 August 2012 WHO Technical Officer and NTRI laboratory experts conducted a joint assessment mission to Zabaikalsky krai and the Republic of Buryatia. The mission recommendations and action plan on the establishment of COE TB diagnosis were presented to NTRI for approval.

Development of a new COE on Extrapulmonary TB in St. Petersburg and a COE on TB Surveillance and Monitoring/MDR-TB in the Far East

WHO CO TB Control Programme initiated negotiations with the Director of StPRIPP, the Chief TB Specialist of the Russian Ministry of Health Professor P. Yablonsky on the establishment of the COE on Extrapulmonary TB in StPRIPP.

Coordination of national and international TB partners

Support to the HLWG on TB and TWG, ICC and Interagency coordinating meetings

WHO support of HLWG mechanism was a key tool for strong and effective interaction with the national institutions and decision makers in national TB control. HLWG was also a platform for collaboration and discussion of national and international TB experts for harmonization of the Russian national TB control approach with the best international recommendations and experience.

HLWG on TB Control in the Russian Federation with a number of Thematic Working Groups (TWGs) provides a mechanism to ensure consensus between the national and international experts on key technical and managerial issues for TB control in Russia. HLWG was established in August 1999 by the MOHSD and MOJ, the Russian Academy of Medical Sciences and WHO. HLWG in Russia is an international collegial, coordinative and advisory body.

Main objectives and HLWG activities are:

1. To establish mechanisms for effective consultations between Russian and international experts on the epidemiology of TB in the Russian Federation;
2. To develop recommendations on strategies and tactics of TB control in the RF;
3. To develop standard methods of implementation and conduct of TB control activities in Russia by international organizations in accordance with both the policy of the MOH and international experience;
4. To coordinate interaction between Russian and international organizations involved in TB control in the RF;
5. To analyse the activities of TWG and to approve the proposed plan of activities of the HLWG and TWG;
6. To perform analyses and expertise of the project documents and activities of international organizations developing or planning joint projects for TB control in Russia.

During the reporting period HLWG met for two plenary meetings.

The 21st HLWG Meeting was held on 20 October 2011 in St. Petersburg in the framework of the MOH endorsed All-Russian Conference on TB Control . The meeting was chaired by Professor Vladislav Erokhin, Director of CTRI, following the tradition for rotation of the meeting chairs between WHO and the national members of HLWG. Representatives of the Russian MOHSD and its agencies, Chief TB Specialist of the MOHSD, WHO Regional Office for Europe and the WHO Office in the Russian Federation, Academy of Medical Sciences, and FCS. Key partners, such as Directors of the Federal TB Research Institutes, representatives of the IFRC, RRC, PIH, International Organization for Migration, USAID and other agencies involved in TB control in Russia also attended the meeting.

During the meeting two major topics were discussed: response to DR-TB and strengthening of TB laboratory network for better diagnosis and treatment.

The Consolidated plan to combat M/XDR-TB in the WHO European Region and its implications for the TB control in the RF (treatment, laboratory, infection control, etc.) were presented by Dr Masoud Dara, Programme manager, WHO Regional Office for Europe. He stressed the importance of Russia's contribution to combating M/XDR-TB in the Region, including the necessity to develop and implement successfully its national plan to prevent and fight M/XDR-TB.

Priorities for TB control in Russia to be addressed by the national TB control programme and areas for international collaboration were presented by Dr Lyudmila Mikhailova, Deputy Head, Department of Organization of Medical Prevention, Medical Care and Healthcare Development, MOHSD, HLWG Secretariat Co-Chair, Chair of TWG on epidemiological surveillance and TB monitoring.

Dr Richard Zaleskis, Medical Officer, WHO Regional Office for Europe, described the Role of laboratory network in the work of TB control manager and TB clinician, emphasizing the importance of high quality laboratory diagnostics both for individual clinical decisions on treatment and for managerial programmatic approaches, based on WHO recommendations.

Review of the WHO Steering and Technical Advisory Group (STAG) recommendations on laboratory development 2005-2011 and on their relevance for the RF was made by Professor Vladimir Malakhov, Head of Federal System for Quality Control Assurance, MOHSD, the STAG member for a number of years.

To sum up the progress of the TWG “TB laboratory diagnostics” Professor Vladislav Erokhin, Director, CTRI RAMS, Chair of TWG “TB laboratory diagnostics” presented the 2011 major tasks and achievements of laboratory experts who worked on developing recommendations in this technical area.

The 21st meeting of the HLWG confirmed commitment both of WHO and MOHSD and the Chief TB specialist of MOHSD to work on harmonization of the Russian national TB control strategy with international recommendations, confirming M/XDR-TB control as the key priority for joint efforts.

The 22nd HLWG Meeting was held on April 18, 2012 in Moscow at the World Bank Office. More than 50 participants from the MOHSD, WHO, Federal TB institutes, FCS, authorities responsible for TB and HIV control and representatives of NGOs attended the meeting: Dr Galina Chistyakova, Deputy Director, Department of Health and Sanitary-Epidemiological Human Well-Being presented the latest data on the TB/HIV situation in Russia and measures undertaken by the MOHSD to stop TB/HIV spread, including the Government's efforts to secure funding and modernization of TB and HIV/AIDS services. WHO Headquarters representative Dr Getahun Gebre Haileyesus presented epidemiological data and trends on TB/HIV in the World and WHO recommendations on TB/HIV control and prevention. WHO Regional Office for Europe representative Dr Pierpaolo de Colombani reviewed the situation on TB/HIV co-infection in the European Region and WHO activities related to TB/HIV control and prevention in Europe. National authorities and experts reported about challenges of TB/HIV prevention in Russia and problems of TB/HIV co-infection management. HLWG members and experts discussed the raised problems and gave recommendation for the Russian MOHSD in regards with the improvement of the management of TB/HIV co-infection and enhancing of inter sectoral / interdepartmental coordination.

On 31 July 2012 Dr Luigi Migliorini met with Dr Lyalya Gassabova, newly appointed Head of the Department of Medical Care and Standardization of Public Health from the MOH to discuss the priority areas of collaboration between WHO and the Russian Federation. They agreed on the necessity of strengthening the collaboration in the framework of BCA between the MOH and the WHO Regional Office for Europe, as well as the collaboration in TB control and development of partnership mechanisms including the HLWG on TB in RF.

HLWG Secretariat met on a regular basis to ensure the necessary follow up on the HLWG decisions:

On 23 September 2011, HLWG Secretariat met to discuss the agenda and speakers for the next HLWG meeting in October 2011. It was suggested to discuss TB/HIV problem as the main topic for the meeting agenda. Additionally, the members of the Secretariat discussed the outcomes of the 61st Session of the WHO Regional Committee for Europe, Baku, 12-15 September 2011, and the Consolidated Action Plan for the Prevention and Control of MDR/XDR-TB in the WHO European Region. The agenda of the coming HLWG meeting was preliminary agreed

On 30 November 2011, HLWG Secretariat discussed the requirements for recommendations on quality improvement of TB data R&R. Development of training materials on implementation of new R&R forms were also discussed upon suggestion by the MOHSD.

On 28 December 2011, HLWG Secretariat met to discuss the outcomes of the HLWG and TWG work in 2011 and tentative plans for HLWG and TWG for 2012. It was proposed to review the Statute (2005) to reflect the changes, update the HLWG objectives and the list of HLWG members.

On 27 January 2012 HLWG Secretariat discussed the problem of TB in HIV-infected patients in the RF – priorities of the HLWG activities to ensure effective prevention and care of TB in people living with HIV; and working plan and priorities of HLWG for 2012. It was agreed that the 22nd HLWG meeting will be devoted to TB/HIV control and will take place in Moscow on 18 or 22 April 2012. It was decided to invite to the next meeting in representatives from the WHO Regional Office for Europe and the WHO headquarters to present their perspectives on the problem at the Regional and global levels.

On 2 March 2012 HLWG Secretariat discussed the outcomes of research on social determinants of TB and their impact on treatment effectiveness, as well as the HLWG meeting agenda and topics for presentations.

On 22 June 2012 HLWG Secretariat met to discuss the new health management structure, following the 2012 Presidential elections and establishment of the new Ministry of Health of the Russian Federation. The Secretariat members will also discuss outcomes of the Annual meeting of the Joint ECDC/WHO network on TB surveillance in Stockholm, Sweden, 12-13 June 2012.

On 20 July 2012 HLWG Secretariat meeting was held upon the request of the MOHSD to establish working relations with the HLWG members and introduce a new focal point for TB control at the MOH of the RF. The meeting is planned in cooperation with the MOH representative from the International Department, it will be devoted to the discussion of the HLWG annual plan and expected outcomes of collaboration between Russian and international experts, areas of the WHO technical support to strengthen TB control in Russia, the new MOH priorities in this area and expectations from the collaboration.

On 21 September 2012 HLWG Secretariat met to discuss the HLWG objectives for 2012-2013 in view of the new MOH priorities in TB control. Also the Secretariat members reviewed progress in development of the national guidelines for MDR-TB surveillance in the Russian Federation. The meeting was attended by the MOH focal point for TB control and the HLWG Secretariat, who confirmed the MOH interest in collaboration with WHO for TB control in Russia.

WHO CO TB Control Programme supported TWG activities, including organization and hosting of TWG meetings:

On 16 September 2011, TWG on “TB Laboratory Diagnostics” took place in the WHO CO premises. The agenda for discussion included two main topics: revision of TB R&R forms and registers for laboratory activities and the national concept of strengthening the laboratory network for TB diagnosis, including expansion of rapid tools for diagnosis of TB/MDR-TB in the RF. The

meeting was attended by laboratory and surveillance experts from several federal TB research institutes and public health institutions. The participants were informed on the details of the national concept to improve the laboratory network system, which is being prepared by the working group under the Chief TB Specialist of the MOHSD at StPRIPP. The participants provided their comments on the presented R&R forms and commented on the Laboratory concept. It was decided to work further on these documents with the involvement of all Federal research TB institutes and recommended that both groups (the TWG under the HLWG and the working group under the Chief TB Specialist of the MOHSD) work together.

On 17 February 2012, TWG on Infection Control in TB settings met to discuss progress in the endorsement of the IC guidelines by the MOHSD. The draft guidelines were submitted to the MOHSD according to the protocol, and later forwarded for review to the MOHSD Chief Specialist of Phthysiology, whose review contained significant changes of the document provided by the StPRIPP specialists. The TWG members discussed comments provided by the reviewer and suggested further mechanism for finalizing the Guidelines.

On 11 July 2012, joint meeting of TWG for TB laboratory diagnosis and the TWG on TB surveillance and monitoring discussed the draft Guidelines on the organization of monitoring of the spreading of DR-TB in the RF. TWG meeting approved the draft and decided to finalize the document as a manual for managers of TB facilities, health care providers, epidemiologists, laboratory practice professionals, specialists in logistics and statistics.

WHO CO TB Control Programme organized and hosted interagency coordinating meetings for coordination TB activities with WHO partners:

On 29 September 2011, the interagency meeting discussed the results of the 61st Session of WHO Regional Committee for Europe, Baku, 12-15 September 2011, and emphasised the importance of the European regional plan to combat MDR-TB and its potential input for TB control in the region and Russia.

On 24 November 2011, during a regular interagency meeting the partners involved in TB control in the RF exchanged information on problem-solving approaches in the organization of MDR-TB control within the framework of joint international projects, approaches to treatment of MDR-TB in children, the use and procurement of psychotropic drugs for MDR-TB patients, and approaches to involuntary hospitalization (at MSF-Holland request). Partners discussed plans and experience on implementation of case-finding activities, preventive TB treatment, and antiretroviral therapy in people living with HIV, as well as training plan and education activities on TB/MDR-TB for 2011 and 2012. Finally, the partners accepted the invitation of Professor Petr Yablonsky, Chief TB Specialist of MOHSD, to attend a meeting with international agencies in St. Petersburg in December 2011.

26 January and 10 February 2012, two monthly Interagency TB meetings took place. Russian and international partners in TB control met with WHO facilitation to discuss and plan joint activities in preparations to World TB Day 2012.

On 28 June 2012, the monthly TB coordination interagency meeting, hosted by the WHO CO discussed outcomes of the World Health Assembly and their importance for the Russian Federation and TB control, STAG meeting recommendations to the WHO DG relevant to TB control in the RF, other relevant news from partner agencies on progress in their activities.

On 30 November 2012 TB Interagency coordinating meeting gathered international organisations that plan to continue their support to TB control in the Russian Federation after the closure of the USAID Office in Moscow and termination of all USAID-funded activities in Russia. From about 15

international organizations five Russia-based agencies plan to stay active in the area of TB control in Russia: WHO, International Organisation for Migration, Partners in Health, MSF Holland, Lilly MDR-TB Partnership. Additionally, collaboration will be continued by the International Union against TB and Lung Diseases, Finnish Lung Health Association, Norwegian Heat and Lung Association.

On 29 December 2012, interagency coordinating meeting took place at WHO Office in Moscow. Partners updated on the past and planned activities in TB control in Russia and agreed on the plans for the World TB Day campaign in Russia. Information materials from Stop TB Partnership were distributed and the organizing committee for the WTBD was formed.

WHO CO TB Control Programme supported the Coordinating meeting of the Chief TB Specialist of the MOHSD with international organizations involved in TB control in Russia, St. Petersburg. The meeting was organized on 20 December 2011 upon the initiative of the MOHSD Chief TB Specialist Professor Petr Yablonski and the WHO Special Representative to the Russian Federation Dr Luigi Migliorini, who co-chaired the meeting. The meeting objectives were to discuss the major priorities for TB control from the MOHSD and WHO perspectives, share information on the activities of international partners involved in TB control in Russia, and develop the coordinated approach to join efforts of the National TB services and international organizations. The overall outcome of the meeting was quite positive and made a basis for coordination of international partners' efforts. It has been agreed that such meetings should be held regularly; the particular format should be determined by the Chief TB Specialist and WHO. The interagency meeting and the meeting in St. Petersburg reflect the growing commitment of the National TB control programme leadership to take the lead and actively involve the international partners in the work according to the MoH priorities in TB control. WHO continued to be seen both by national and international partners as an organization responsible for coordination of activities performed by international partners involved in TB control in the Russian Federation.

Promotion of WHO policies and international recommendations

To secure and expand distribution of WHO documents, guidelines and recommendations, the meeting of WHO CO TB Control Programme Officer and Director of the WHO Documentation Centre in Russia took place on 13 July, 2012. The purpose of the meeting was to explore possibilities for the WHO Documentation Centre to host the WHO e-TB Library and share the Russian language information resources on TB control. WHO would provide a technical support to this activity that was planned within the Regional Strategic Plan to Prevent and Combat M/XDR-TB in the WHO European Region.

WHO representatives attended a number of meeting and conferences to promote of WHO policies and recommendations:

On 4 September 2011, WHO Programme Officer attended the meeting organized by the University Research Company (URC), which started the new project supported by USAID on improving public health practice in TB control. During the meeting the representatives of TB services of the three pilot regions presented their views on the project development and planned the next steps. The project is aimed at improving interagency management for better quality of delivered health care. Further discussions have been planned to ensure that WHO recommendations on TB control are taken into account by the project activities.

On 6 September 2011, staff of the WHO CO TB Control Programme took part in the video conference organized between the Global Fund, WHO HQ and WHO EURO in collaboration with the Global Fund. The purpose of this meeting was to brief countries, NTP and consultants on

specifications and details of the Global Fund Round 11. The participants from 12 countries, including NTP representatives, were invited to attend the video conference.

On 9 – 11 November 2011, the representatives of the WHO Regional Office for Europe and WHO CO took part, delivered presentations and discussed WHO TB Strategy implementation in Russia at TB Conference and 90th Anniversary ceremony of the CTRI (WHO Collaborating Center on TB control).

On 21-22 September 2012 the WHO TB Project Officer took part in the Assembly of public health associations of several European countries “Multidisciplinary approach to disease management: from diagnosis to elaboration of treatment concept” with the presentation “TB in the World and WHO European Region” in Burgas, Bulgaria.

27 September 2012, WHO Programme Officer attended the meeting on “TB in persons with HIV and the role for NGOs in TB/HIV control” organized by the International Scientific and Technical Center (ISTC) with presentation on the WHO recommendations on TB/HIV control and involvement in to TB control non-governmental organizations.

WHO CO TB Control programme took the lead in the organization of the annual country activities dedicated to the World TB Day:

On March 22, 2012 a Press conference to mark the World TB Day took place in Moscow at the Russian Information Agency RIA Novosti. In 2012 the World TB Day activities in Russia were implemented under the slogan “Our generation must stop TB!”.

To discuss the prospects of TB control in Russia, Dr Lyudmila Mikhailova, the Deputy Director of the Department for organization of prevention, care and public health development, attended the Press-conference and made a presentation on TB control in Russia. She highlighted the measures undertaken by the MOHSD to stop TB, including the Government's efforts to secure funding and modernization of TB services. Dr Sergey Baryshev, the Head of Medical Services Department, presented the achievements and problems for effective TB control in prisons. The Chief TB Specialist Professor Peter Yablonsky discussed the existing challenges and required innovations in TB control in the RF. WHO Special Representative to the Russian Federation Dr Luigi Migliorini spoke about the role of international cooperation in the fight against TB and mentioned the message from the UN Secretary-General in connection with the World TB Day. Dr Igor Kazanets represented the International Organization of Migration (IOM) Office in Russia and raised the problem of TB among migrants in Russia and the Commonwealth of Independent States. Finally, Julia Baygildina, a former TB patient herself and as a representative of the RRC supported TB patients' peer group from the Republic of Khakassia, spoke of her personal experience and presented the results of a survey among TB patients implemented by the RRC and AIHA, emphasizing the importance of peer support and psychological and social assistance to TB patients. The press-conference was attended by 15 journalists and about 50 guests representing federal health agencies, TB professionals, international partners, donors and non-governmental organizations, and got extended coverage in media and Internet.

National and international partners actively marked the World TB Day with activities around this date in the RF.

Advocacy and promotion of innovative methods for the rapid diagnosis of TB and MDR-TB

WHO CO monitored implementation of innovative rapid test for TB and DST across the Russian regional TB services and federal TB institutes and provided consultation of national experts for Xpert MTB/RIF machines operation. Fifty seven Xpert MTB/RIF machines were installed mainly in regional second level laboratories. Currently MoH endorsed recommendations on GeneXpert use

does not exist. In the situation when numbers of different levels TB control institutions have intention to use them in the diagnostic chain it is politically and strategically important to develop them and submit to the MoH for endorsement..

WHO activities for untimely termination of USAID supported TB Control Project in the Russian Federation

On 1 October 2012, the USAID mission in Russia sent a Grant termination letter to the WHO Regional Director on the Grant No. AID-118-10-11-00001 “Intensified Actions to Sustain Evidence-based TB control Policy Development, Capacity Building to prevent and control Tuberculosis, especially Multidrug-resistant and Extensively drug-resistant TB and TB/HIV co-infection in the Russian Federation”, effective 31 December 2012. WHO has been requested to stop its activities under the USAID-funded project and began orderly closeout of the programme to be completed by 31 December 2012. USAID expressed its understanding that WHO would need to closeout according to its internal policies and to complete obligations towards staff, premises rentals, earlier made commitments.

On 12 October 2012, Dr Hans Kluge, Director of the Division of Health Systems and Public Health, the Special Representative of the Regional Director to Prevent and Combat MXDR/TB at the WHO Regional Office for Europe met with Prof. Petr Yablonsky, Chief Thoracic Surgeon and TB Specialist of the MoH, Director of the St Petersburg Institute of Phthysiopulmonology, to discuss technical aspects of cooperation between WHO and the Chief TB Specialist with WHO TB Control Programme in Russia; as well as perspective of collaboration between WHO and the National Association of TB Specialists, progress in improving the Russian TB programme performance indicators. It was agreed that further discussions and consultations with WHO EURO are needed

On 12 October, Dr Hans Kluge also met with Dr Irina Kupeevea, Department of Science, Education and HR, MOH, the official representative of the Ministry at the All-Russian Nurse Forum in St. Petersburg. Dr Hans Kluge expressed deep gratitude of the WHO/Europe Regional Director, Ms Zsuzsanna Jakab, to the Russian Minister of Health Dr Veronika Skvortsova for her support of the RC-62 in Malta. Dr Kupeevea was assigned by the MOH Department of Specialized Health Care and Standards, namely TB focal point Dr Tereza Kasaeva, Deputy Director of the above mentioned Department, to confirm that the new MOH is willing to support the activities of the WHO Regional Office for Europe in TB Control in Russia and willing to strengthen collaboration and partnership with WHO in this area.

On 12 October 2012, WHO/Europe TB Programme Manager Dr Masoud Dara (via t/c), TB Programme Officer and Administrative Officer a.i. from the WHO Office in Moscow met with the USAID Grant Officer for short briefing with regards to closure out of procedures for the USAID Grant “Intensified Actions to Sustain Evidence-based TB control Policy Development, Capacity Building to prevent and control Tuberculosis, especially Multidrug-resistant and Extensively drug-resistant TB and TB/HIV co-infection in the Russian Federation”. The minutes of the meeting are prepared.

On 19 October 2012, Dr Hans Kluge met with Professor Petr Yablonsky, Head Phthysiologist of the Russian MoH to discuss the perspective of collaboration between WHO Regional Office for Europe and the Russian NTP. Professor Yablonsky confirmed his commitment to the collaboration and expressed his preparedness to lead the HLWG on TB in the RF. He invited WHO to involve more the newly established Russian Association of Phthysiologists in implementation of joint TB control activities.

On 30 October 2012, Dr Hans Kluge met the TB Control programme team in Russia and WHO Special Representative in the Russian Federation to discuss consequences of the termination of the USAID TB control grant due to the closure of the USAID Moscow Office. Dr Kluge was joined by WebEx by Dr Masoud Dara, TB Programme Manager from Copenhagen, and they shared their views on the situation and steps to be implemented by WHO at the Regional and country levels to ensure continuity of technical support to the Russian Federation on TB control in the framework of the signed BCA for 2012-2013. Dr Kluge met personally with all staff present in the office and discussed their personal concerns and possible options for the future. The WHO Russia team prepared a list of essential activities to be implemented by the end of the Grant (31 December 2012) and ensure closure of the Project with sustained results.

On 30 October 2012, Dr Hans Kluge, Director of the Division of Health Systems and Public Health, the Special Representative of the Regional Director to Prevent and Combat MXDR/TB at the WHO Regional Office for Europe and Dr Dmitry Pashkevich, TB Coordinator in the Russian Federation a.i., met with Dr Lyalya Gabbasova, Director of the Department of Specialized Medical Care and Standardization, Mr Sergey Muraviev, Director of Department for International Cooperation and Public Relations at the Ministry of Health of the RF to discuss strategic cooperation between the Russian Federation and WHO for TB, M/XR-TB control in view of restructuring the TB Control Programme in the Russian Federation. In general the MOH representatives confirmed TB as priority for the National Health Programme and for the Russian-WHO support to the third countries. Russian representatives will take part in the Regional working groups and technical meetings. Dr Kluge informed the MOH representatives on the forthcoming visit of the RD to the Russian Federation and the possibility to continue the discussion.

On 23 November 2012 the WHO TB Programme Coordinator a.i. met with the focal point for TB control at the Ministry of Health of the Russian Federation to discuss further steps in collaboration in view of the changed financial capacity of WHO to provide support within BCA to the Russian Federation due to the closure of the USAID grant.

On 3 – 7 December 2012, WHO TB Programme Officer took part in several meetings organized by the WHO Regional Office for Europe: 3 December 2012 - Technical Advisory Group meeting, 4 December 2012 – Interagency Coordinating Committee for TB control meetings, 5 – 6 December 2012 – TB Training and Education Collaborative for WHO European Region meeting; 7 December 2012 - TB Programme staff meeting. During these meetings areas for further technical support by the WHO Regional Office in Europe to the Russian Federation after termination of USAID supported TB Control project were discussed and planned.

PROJECT MANAGEMENT

WHO Regional Office for Europe provided technical and administrative support for the implementation of the project.

Five fully-funded TB Project Officers (NPO), one technical officer (international professional) on laboratory issues provided high quality professional services under t with administrative assistance oftwo programme assistants with implementation, evaluation and monitoring of the Project. Necessary financial, administrative and secretariat assistance was also provided to the TB Control Programme by a pool of the WHO Country Office administrative assistants. From the WHO Regional Office for Europe, guidance and technical assistance with project implementation was provided by the Regional TB Team (International Professional Officers, Special Representative of the Regional Director to Prevent and Combat M/XDR-TB in the WHO European Region and programme assistants).

MAIN PROJECT RESULTS

- National commitment and funding for TB control have significantly increased.
- TB notification and mortality rates in 2011 notably decreased compared to previous years both in civilian and prison sectors, although remain high.
- A draft National M/XDR-TB Response Plan has been developed.
- The development of the national TB control strategy was supported through the mechanism of the High-Level Working Group (HLWG) initiated by WHO; the key elements of the Stop TB Strategy were accepted by the National TB Programme (NTP).
- WHO contributed to the development of a new draft order on TB surveillance and monitoring, including surveillance and monitoring of M/XDR-TB.
- New guidelines on infection control in TB institutions and TB prevention in HIV patients have been developed by the respective thematic working groups (TWGs).
- WHO contributed to the annual analytical review on TB in Russia, which has been published in due time.
- Centers of Excellence and Training on modern TB and MDR-TB control have been established in collaboration with the TB research institutes in Orel (on MDR-TB management), in Vladimir (on infection control) and in the Republic of Chuvashia (on laboratory diagnosis).
- Technical assistance has been provided to develop recommendations on TB/HIV control, some of which have already been implemented.
- A comprehensive advocacy, communication and social mobilization (ACSM) campaign devoted to World TB Day was organized.
- The two WHO collaborating centers on TB control (Central TB Research Institute in Moscow and Novosibirsk TB Research Institute) have continued to actively promote the Stop TB Strategy.

The below listed factsheet is detailed the above mentioned project achievements

- The 21st Meeting of the High Level Working Group on Tuberculosis in the Russian Federation (20 October 2011, St. Petersburg), confirmed commitment of WHO, the MOHSD and the Chief TB Specialist of MOHSD to work on harmonization of the Russian national TB control strategy with international recommendations, confirming M/XDR-TB control as the key priority for joint efforts;
- The 22nd Meeting of the High Level Working Group on Tuberculosis in the Russian Federation (18 April 2012, Moscow) paid attention of MOHSD Officials, national TB and HIV experts to growing TB/HIV co-infection in the country. MOHSD plans to prevent co-infection spreading were presented and discussed;
- The HLWG Secretariat through its regular meetings provided the necessary follow up on the HLWG decisions;

-
- WHO CO in collaboration with CTRI and NTRI (WHO Collaborating Centers on TB in Russia), conducted four workshops on M/XDR-TB management for 66 TB doctors and managers;
 - WHO CO in collaboration with CTRI (the WHO Collaborating Centre on TB) and partners, conducted seven workshops on TB infection control for 141 TB doctors, managers and engineers at the training centers on TB infection control in Vladimir;
 - The Expert consultation meeting on TB/HIV collaborative activities called by the WHO CO on 24 January 2012 started the new level of consultations among representatives of the MOHSD, Federal Center of TB care of HIV patients, WHO CO HIV and TB Control Programmes, TB research institutes and international partners involved in this topic;
 - The Young Scientists Conference dedicated to the World TB Day was conducted in CTRI with PIH and WHO support and gathered more than 70 young researchers from various regions of the RF;
 - The Analytical review “Tuberculosis in the Russian Federation, 2010” was published in January 2012 (2000 copies) and distributed to the leading Russian and Commonwealth of Independent States TB control institutions;
 - The Analytical review “Tuberculosis in the Russian Federation, 2011” was completed and presented to MOH for approval and publishing;
 - The draft guidelines on “Infection control in TB settings” was completed by TWG, approved by the MOH Chief Specialist and will be published as TWG recommendations;
 - On March 22, 2012 a Press conference to mark the World TB Day attracted media and TB community in Moscow at the Russian Information Agency RIA Novosti and raised awareness of the general public and politicians on their roles in combatting the TB epidemic. In 2012 the World TB Day activities in Russia were implemented under the slogan “Our generation must stop TB!”;
 - Interagency coordination was ensured through regular interagency meetings and a meeting of the Chief TB Specialist of the MOHSD with international organizations involved in TB control in Russia;
 - The Round Table on Monitoring and evaluation of DR-TB spread in the Russian Federation (18 October 2012, St. Petersburg) paid attention to gaps in national TB MDR-TB monitoring and presented WHO recommendations on MDR-TB surveillance;
 - Monitoring of the treatment outcomes of MDR-TB patients treated within the Global Fund supported TB control projects was provided;
 - National TB laboratory network has been equipped with Xpert MTB/RIF machines and 57 machines were implemented mainly in regional second level laboratories to the end 2012.

MAJOR DIFFICULTIES AND CHALLENGES AT THE FEDERAL/NATIONAL LEVEL

- The Russian Federation is among the 22 High TB burden countries and the 27 high multidrug-resistant tuberculosis (MDR-TB) burden countries in the world.
- The current revised TB control strategy implementation is of insufficient quality and treatment regimens used have limited effectiveness.. Treatment practices do not always

follow international standards and infection control measures in health care facilities are inadequate.

- The increasing MDR-TB epidemic in the country requires modern national guidelines on TB treatment and drug-resistant TB management, as well as on infection control, consensus among national stakeholders with international approaches to DR-TB;
- TB/HIV co-infection increasing requires collaboration and joint action by both HIV and TB control programmes, technical and managerial approaches to TB prevention in people living with HIV and combined TB/antiretroviral treatment of TB/HIV patients;
- Treatment success rate in cohorts of new TB cases is insufficient, mainly due to high level of MDR-TB and poor case management;
- Treatment success rate in cohort of MDR-TB patients (data of Global Found TB Control Project) is insufficient due to poor case management;
- The lack of a national drug resistance surveillance system due to the absence of modern national guidelines and regulations;
- The TB laboratory network needs to be strengthened to provide accurate, rapid and quality assured diagnosis of TB and MDR-TB. It is also in need of coordination and standardization through designation of the country national reference laboratory by the Minister of Health. The national system of laboratory quality insurance control should be strengthened;
- The management of anti-TB drugs and the monitoring of anti-TB drug supplies are suboptimal. Weak drug management system and monitoring of drug supplies are observed at all levels. Despite the figures provided by the MOH showing an increasing availability of second-line anti-TB drugs and no official reports of serious drug supply interruptions, several members of the activist groups claimed life threatening interruption of second-line anti-TB drugs for the management of MDR-TB in St. Petersburg in early 2012. Interruptions are possible, however, due to the non-transparent, non-flexible and complicated system of drug procurement, as well as deficiencies in TB drug forecasting and management which remains a huge challenge in Russia;
- The lack of human resource in the TB service and insufficient involvement of medical schools in training on the revised TB control policy require special efforts in human resource development. , There is a challenge of attracting young well-trained staff.

ACTIVITIES WHICH ARE CRUCIAL TO SUSTAIN ACHIEVEMENTS WITHIN THE CURENT PROJECT

- Finalization of the National M/XDR-TB Response Plan in line with the Regional M/XDR-TB Action Plan.
- Technical assistance to MoH aimed at strengthen the national TB control system, focussing on early detection and diagnosis, introduction of modern TB diagnostic and treatment standards, development of outpatient forms of treatment, and evaluation of the effectiveness and cost-effectiveness of TB institutions at all levels in order to prevent and control M/XDR-TB and TB/HIV co-infection.
- Technical assistance with improving the surveillance and monitoring system to include MDR-TB, and with the development of the annual analytical review on TB control.
- Support for the activities of the HLWG and TWGs in coordination with the Working Group of the Ministry of Health and Social Development led by the MoH Chief TB specialist.

-
- Coordination of activities of the WHO Country Collaborating Centres on TB (Central TB Research Institute) and on MDR-TB training (Novosibirsk Research TB Institute)
 - Technical assistance for the Centres of Excellence to develop them as international Centres of Excellence and Training on MDR-TB management, infection control and laboratory diagnosis.
 - Advocacy and promotion of new methods for rapid diagnosis of TB and MDR-TB.
 - Coordination of international TB partners. Keeping the TB control partnership mechanism sustainable with main partners of WHO which are Ministry of Health of the Russian Federation, National TB Programme, including Chief TB specialist of the Ministry of Health, Research Institute of Phthisiopulmonology, 1st Moscow State Medical University named after I. M. Sechenov, Central TB Research Institute, Russian Academy of Medical Sciences, St. Petersburg Research Institute of Phthisiopulmonology, Novosibirsk Research Institute of Phthisiopulmonology, Ural Research Institute of Phthisiopulmonology, Federal Correctional Service of the Ministry of Justice of the Russian Federation, Central Research Institute of Public Health Organization and Informatization, Federal System for External Quality Assurance, International Federation of Red Cross and Red Crescent Societies/Russian Red Cross, Partners in Health, Russian Health Care Foundation, Finnish Lung Health Association (FILHA), Norwegian Heart and Lung Patient Organization (LHL), International Organization for Migration (IOM), International Union Against Tuberculosis and Lung Disease (The Union), Médecins Sans Frontières (MSF), Holland, Eli Lilly MDR-TB Partnership, The World Bank, Koch-Metschnikov Forum.

Attachment 1
Statement of expenditure
USAID Grant No AID-118-IO-11-00001

WHO Tuberculosis Control Programme in the Russian Federation

Reporting period 30.09.2011 - 31.12.2012

Cost Element	Expected Grant Total	Total Obligated 30.09.2011 - 31.12.2012	Total spent 30.09.2011- 31.12.2012	Balance
I Core Programme				
1.Management and Coordination of the project	2,953,000	1,061,753	2,288,517	-1,226,764
2.Surveillance Supervision and Monitoring	662,200	238,094	58,600	179,494
3.Training, education and human capacity development	2,015,570	724,699	84,248	640,451
4.Duty travels (within and outside Russian Federation)	86,900	31,245	49,300	-18,055
5.Procurement, laboratory equipment and supplies	403,425	145,052	62,233	82,819
6.Education materials and publishing	295,797	106,354	2,340	104,014
7.Union and other congresses and conferences support cost	200,000	71,910	25,500	46,410
8.Advocacy and policy development	298,524	107,334	5,400	101,934
9.Polio eradication				
10.Office space rent	686,200	246,724	246,724	0
11.Office activities and common service	274,490	98,693	8,996	89,697
Total	7,876,106	2,831,858	2,831,858	
PSc	1,023,894	368,142	368,142	0
Grant Total	8,900,000	3,200,000	3,200,000	0