

UGANDA EPISCOPAL CONFERENCE (UEC) TB REACH PROJECT

TB ALERT- “Accelerating Local Efforts to Reach and Treat TB in Communities”

About TB ALERT, UCMB’s TB REACH Project

Uganda Episcopal Conference (UEC) is implementing a two-year wave 3 TB REACH project supported by the World Health Organization (WHO) STOP TB Partnership. The project which began in March 2013 has the sole objective of increasing TB case detection using innovative strategies of diagnosing and treating TB that would have been missed in the absence of the project. The areas of operation of the TB REACH project are; Mpigi, Tororo and Busia districts.

Supported Health Facilities

Both government-owned and UCMB-owned health facilities are supported by the TB REACH project. The facilities and their respective referral hubs for GeneXpert testing are listed as follows;

Nkozi Hospital hub serves; Golo, Buwama, Nindye, Kituntu, Muduma, Bunjako, Butoolo, Sekiwunga, and Nabyewanga Health Centre IIIs and Mpigi Health Centre IV.

St. Anthony’s Hospital- Tororo serves; Tororo Government Hospital, TASO Tororo, Lumino HCIII, Kwapa HCIII, Malaba HCIII, Rubongi Military HCIV, Mukujju HCIII, Iyolwa HCIII, Kiyeyi HCIII, Dabani Hospital, Masafu Hospital, Merekit HCIII, Mulanda HCIII and Busia HCIV.

Methods;

The sole methods being implemented by UEC are Active Case Finding through facility-based intensification of TB screening using “cough monitors”, use of Village Health Teams (VHT’s) under a Performance Based Incentive (PBI) model for intensification of case finding at community level and use of the more-sensitive GeneXpert MTB/RIF technology for testing sputum samples in HIV positive-Sputum Smear negative individuals, facilitated through a motor-cycle coordinated sputum sample referral system in a hub model. Two GeneXpert hubs exist i.e. St. Anthony’s Hospital Tororo, serving as

the hub for Tororo and Busia districts and Nkozi Hospital serving as the hub for Mpigi district.

TB REACH trained and oriented project staff at facility and community levels. In addition, logistical support in form of recording and reporting tools (TB forms and registers) were provided alongside infection control materials like face masks and N95 respirators.

At community level, 37 Village Health Teams (VHTs) have been trained to proactively screen household contacts of existing TB cases as well as the general community for TB. Equipped with TB screening registers and job aids, the VHTs are able to identify persons with presumptive TB whom they refer for testing to nearby health units with TB diagnostic capacity using sputum smear microscopy. Eligible samples for GeneXpert testing i.e. microscopy-negative samples from HIV positive patients are then referred upwards to the hub for Xpert testing. Through a performance based incentive mechanism, VHTs are rewarded for any referred TB case who becomes bacteriologically positive. VHTs work closely with cough monitors at the lower level health units creating a vital community-facility link for TB detection, diagnosis and treatment. VHTs also support Directly Observed Therapy Short Course (DOTS), towards treatment completion and cure.

UCMB works closely with the District Health Office, engaging in quarterly technical support supervision and mentorship, jointly with the respective District TB and Leprosy Supervisors to ensure consistency in reporting and to provide guidance where process and system errors are found.

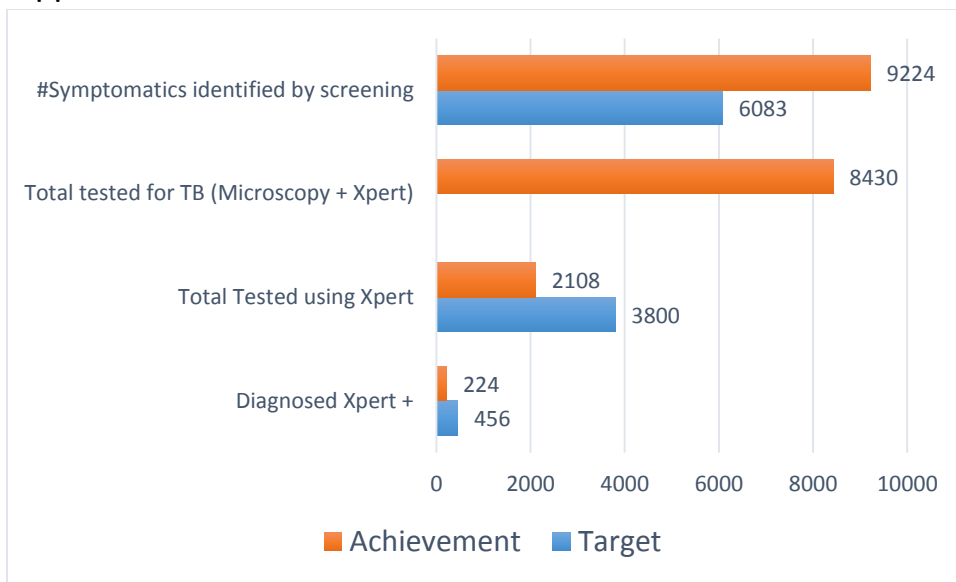
Interim Performance as at 1st March 2015

As of 1st March 2015, since the project started in 2013, 250,946 persons have been screened for TB in the supported districts, surpassing the project TB screening target of 20,277. Following project-led training, all people visiting the health facilities are screened for TB regardless of their HIV status. This is further supported by VHT-led TB screening at community level.

Of those screened, 9,224 (152% of target) persons with suspicious TB were identified. 8,430 (91% of TB suspects) were tested for TB using microscopy (6,322 i.e. 75%) and GeneXpert (2,108 i.e. 25%). 1,191 TB cases were diagnosed and GeneXpert contributed 224 of these diagnosed cases. Overall, 13 out of 20 targeted MDR TB cases (65%) have been diagnosed and supported to receive treatment.

UCMB TB REACH CUMMULATIVE PERFORMANCE AS AT 1st MARCH 2015

supported to receive treatment.



The 224 cases TB diagnosed using GeneXpert would have been missed in the absence of the project, if only microscopy was being used as was previously the case before the project started. In this way, the TB REACH project is positively contributing to TB detection in participating districts.

However, a huge challenge remains of ensuring that **all** diagnosed TB cases are started on TB treatment in a timely manner. This is the hallmark of the desired outcome of the TB REACH project, that all diagnosed TB cases be started on treatment.

Pictorial



One of the motorcycle *boda boda* riders who pick up samples for advanced TB testing using GeneXpert at Nkozi and St. Anthony's Hospitals in Mpigi and Tororo districts respectively.



Laboratory staff being trained upon installation of the GeneXpert machine in Nkozi Hospital



Sensitization of health workers about the new GeneXpert technology is very critical to success. Health workers in Tororo district being educated on the newly introduced DNA-based TB diagnostic test