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IMPACT

- Who We Are
- Our Strategic Approaches
- Highlights of Progress

Who we are

- ▶ IMPACT – **I**nnovations and **M**ultisectoral **P**artnerships to **A**chieve **C**ontrol of **T**uberculosis
- ▶ 5-year technical assistance project (Oct 2012 – Sept 2017); USAID-funded
- ▶ 43 project sites in 17 regions in Luzon, Visayas, and Mindanao

Where we are

National Capital Region	LUZON	VISAYAS	MINDANAO
Caloocan City	Pangasinan (I)	Aklan (VI)	Zamboanga del Norte (IX)
Quezon City	Bulacan (III)	Cebu (VII)	Zamboanga Sibugay
Valenzuela City	Nueva Ecija	Northern Leyte (VIII)	Bukidnon (X)
Las Piñas City	Pampanga	Northern Samar	Misamis Oriental
Makati City	Tarlac	Western Samar	Davao Oriental (XI)
Malabon City	Batangas (IVA)		Compostela Valley
Mandaluyong	Cavite		Sarangani (XII)
Marikina City	Laguna		Lanao del Sur (ARMM)
Pasay City	Quezon		Maguindanao
San Juan City	Rizal		Basilan
Taguig City	Benguet (CAR)		Sulu
	Isabela (II)		Tawi-Tawi
	Romblon (IVB)		Surigao del Norte (CARAGA)
	Masbate (V)		

Our strategic approaches



PhilPACT as guiding framework for providing technical assistance (TA)

Focus on local government units with low CDR – low CR NTP performance

Work with DOH-Regional Health Offices as the prime TA providers

Provide TA through collaboration with/among partners and USAID CAs

Philippine Plan of Action to Control Tuberculosis (PhilPACT), 2010–2016

Goal

VISION
TB-free Philippines

Impact

Reduce TB burden
in the country

Reduce out-of-pocket
expenses related to TB

**Intermediate
outcomes**

ACCESS
Increase and sustain
DOTS coverage

QUALITY
Ensure provision of
quality TB services

EFFICIENCY

- Decrease cost per case treated
- Increase support and allocation to poor-performing provinces

**Reform
outputs**

SERVICE DELIVERY

- Increase service delivery outlets
- Increase PPMD coverage
- Expand DOTS services in hospitals
- Improve positive behavior of families and communities

REGULATION

- Assure availability of high-quality, low-cost drugs
- Create guidelines for TB sub-plan in PIPH/CIPH/AOP/AIP

FINANCING

- Increase national budget for TB
- Increase LGU commitment to TB
- Increase PHIC reimbursement from TB-DOTS

GOVERNANCE

- Provide DOH TA package and guidelines
- Establish public-private mix DOTS coordinating body

Why engage the League of Cities of the Philippines

In support of PhilPACT, LGUs are enjoined to–

- ▶ Provide leadership in developing and implementing a local TB control program, plan, and policies
- ▶ Mobilize finances for the TB program
- ▶ Ensure a trained TB team: physician, nurse, medical technologist
- ▶ Ensure an adequate stock of anti-TB drugs and supplies

Why engage the League of Cities of the Philippines

- ▶ Implement the quality assurance system for TB laboratory services
- ▶ Collect, analyze, and use TB data for local program management
- ▶ Build partnerships with other government agencies, NGOs, and private entities for comprehensive implementation of the TB program
- ▶ Invest in continuing quality improvement through certification and PhilHealth accreditation of DOTS facilities

Major Challenges in Improving/Sustaining TB Program Performance

Service Delivery

- ▶ Access to quality assured laboratory was hampered by the:
 - Unavailability of laboratories outside town centers
 - Lack of full time medtechs/microscopists in DOTS centers
 - Inadequate number of service providers
 - Lack of budget support for monitoring QAS implementation
 - Facilities with improper or without sputum collection areas
- ▶ Interrupted supply of anti-TB drugs and reagents (i.e. gaps in the logistic mgt. cycle)
- ▶ Inadequate number of trained treatment partners

Major Challenges in Improving/Sustaining TB Program Performance

Service Delivery

- ▶ Low health seeking behavior among symptomatic/presumptive TB cases
- ▶ TB cases default (lost) to treatment and others failed while under treatment
- ▶ Private providers not practicing DOTS
- ▶ Hospitals not implementing DOTS
- ▶ Functionality of TB Diagnostic Committees vary

Major Challenges in Improving/Sustaining TB Program Performance

Financing

- ▶ Insufficient budget supporting TB program
- ▶ Small to no provisions for health promotion
- ▶ Lack of support (e.g. travelling expenses) for TB treatment partners
- ▶ Low availment of PhilHealth DOTS Package or reimbursements not utilized
- ▶ Low coverage of PhilHealth

Major Challenges in Improving/Sustaining TB Program Performance

Regulation

- ▶ Significant no. of DOTS facilities were not DOH DOTS certified or accredited under TB OPB of PhilHealth or both
- ▶ Significant no. of hospitals and private microscopy laboratories not complying with the Quality Assurance System (QAS) on Direct Sputum Smear Microscopy (DSSM) under DOH A.O 2007-0019
- ▶ Over-the counter dispensing of TB drugs without proper prescriptions exist

Major Challenges in Improving/Sustaining TB Program Performance

Governance

- ▶ No policies supportive of TB control; some LGUs with policies but not implemented
- ▶ Other partners (e.g. private sector, CBOs) not mobilized for TB control activities
- ▶ Adherence to DOT protocol was variable due to lack of trained or no available treatment partners and inadequate supervision of TB treatment partners
- ▶ Referral, recording and reporting were weak
- ▶ Irregular monitoring, supervision, and evaluation activities

Major Challenges in Improving/Sustaining TB Program Performance

Human Resource Development

- ▶ Some DOTS facilities without medtech or microscopist
- ▶ Untrained medtechs and DOTS providers
- ▶ No human resource development plan

Major Challenges in Improving/Sustaining TB Program Performance

Information Systems

- ▶ Delayed/late reporting of NTP program accomplishments
- ▶ Lack of IT equipment (e.g. computers) for the NTP program
- ▶ Health workers not “tech-ready” or untrained on the info system
- ▶ Inadequate to lack of capabilities to analyze and use NTP information

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IMPACT 'S Technical Assistance

Component 1

Increase demand for TB services

- ▶ Mobilize and strengthen communities, and public and private providers into networks of TB IEC providers
- ▶ Build advocacy capacity of national, regional, LGU, and local managers of the TB control program
- ▶ Develop new and expand existing behavior change communication models for vulnerable groups

IMPACT'S TECHNICAL ASSISTANCE PACKAGES FOR:

Strengthening Demand for TB Services



- ☐ Advocacy, Communication, And Social Mobilization (ACSM)
- ☐ InterPersonal Communication and Counseling (IPCC)
- ☐ Capacity building of community-based organizations (CBOs)
- ☐ Formation of, strategic planning for, and monitoring multi-sectoral alliances (MSAS)
- ☐ Training of Midwives as Supervisors of BHWs

Component 2

Increase supply of quality TB services

- ▶ Expand service delivery points to improve access to TB services
 - Strengthening and expansion of laboratory network
 - Establishment of TB service delivery network
 - Strengthen the referral system between private hospitals, physicians and DOTS facilities/health centers
 - Vulnerable population (i.e. TB in Children, inmates, elderly, urban poor, PLHIV)
- ▶ Strengthen drugs and logistics management capacity
 - Rapid field assessment of Drug Supply Management
 - Workshop on Practical Guide in Pharmaceutical Management

**IMPACT'S
TECHNICAL ASSISTANCE
PACKAGES FOR:**

**Improving the
Supply of TB Services**



SERVICE DELIVERY

- ☐ Laboratory network strengthening, assessment, planning, and implementation
- ☐ Installation of remote smearing stations
- ☐ Strengthening of PMDT referral system between RHUs and treatment centers/satellite treatment centers
- ☐ Monitoring, supervision, and evaluation skills enhancement
- ☐ Program implementation review
- ☐ Data quality assessment

**IMPACT'S
TECHNICAL ASSISTANCE
PACKAGES FOR:**

Improving the Supply
of TB Services in the
Private Sector



PRIVATE SECTOR PARTICIPATION

- ☐ Workplace TB program installation
- ☐ Service delivery network expansion
- ☐ Pharmacy DOTS initiative
- ☐ Hospitas DOTS

Component 3

Increase supply of quality TB services

- ▶ Ensure timely delivery of appropriate MDR/XDR-TB services
 - Scale up use of rapid diagnostic tests for MDR/XDR-TB
 - Increase treatment adherence through use of modern communications technology
 - Strengthen NTP and NTRL leadership and regulatory capacity

Key **Partners:** NTP, RHO, LGU, GF-TB, SIAPS, USP-PQM, CHANGE

Component 4

Increase supply of quality TB services

- ▶ Strengthen capacity of national, regional, and LGU health offices to provide technical assistance to local TB staff

Component 5

Remove policy and systems barriers to increasing supply of and demand for quality TB services

- ▶ Increase local TB financing through certification and accreditation
 - Workshop on DOH TB DOTS Certification, PHIC Accreditation, Increasing Availment and Utilization of Reimbursement
- ▶ Improve compliance with national TB policies, standards, and guidelines

IMPACT'S TECHNICAL ASSISTANCE PACKAGES FOR:

Removing Policy and Systems Barriers



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

ADMINISTRATIVE ORDER
No. _____

SUBJECT: Amendment to Administrative Order No.2006-0026 on the
Implementing Guidelines in the Conduct of National
Tuberculosis Control Program – Directly Observed Treatment
Short-Course (NTP-DOTS) Certification.

Since the adoption of the Directly Observed Treatment Short-Course (DOTS) Strategy in 1996, significant progress in addressing the Tuberculosis (TB) burden has been achieved by the National TB Control Program (NTP). The standard indicators namely Case Detection Rate (CDR), Treatment Success Rate (TSR), and Cure Rate (CR), since...

ENHANCING THE POLICY AND FINANCING ENVIRONMENT

- ☐ Enhancing the TB sub-plan of:
 - Provincial Integrated Plan for Health (PIPH),
 - Annual Investment Plan for Health (AIPH),
 - Annual Operational Plan (AOP)
- ☐ Evidence-based policy development
- ☐ Certification and accreditation of TB-DOTS facilities

Partners' Actions



- Improving LGU capacity for quality DOTS
 - LGUs hired medtech/microscopist to help expand access to microscopy services
 - Increase participation of TB microscopy Laboratories in EQA
 - 4 provinces made decisive steps to increase number of provincial controllers to strengthen QAS
 - Effective program mgt. through skills enhancement training of local NTP teams on MSE, laboratory network include as convener of MSA for TB Control
 - Pool of regional, provincial and local trainers as resource persons

Partners' Actions



- Improving LGU capacity for quality DOTS
 - Enhanced IPCC skills of front line health workers (midwives, BHWs, CHTs, other volunteers)
 - Improved skills and decision making of local NTP teams
 - TB Medical and Nurse Coordinators for treating TB cases found sputum negative with chest x-ray finding through TB Disease Activity Assessment training
 - Use local TAPs through outsourcing
 - Apply Infection Control and Prevention in their areas
 - Use latest management in TB following the new MOP

Partners' Actions



- Improving access to DOTS services for the vulnerable population
 - Established linked with jail/prison TB teams for TB in Prison program
 - Engagement of orphanages, home for the aged and urban poor areas were explored
 - Provincial govt. of Samar made TB in Children a priority program and will implement it province-wide level

Partners' Actions



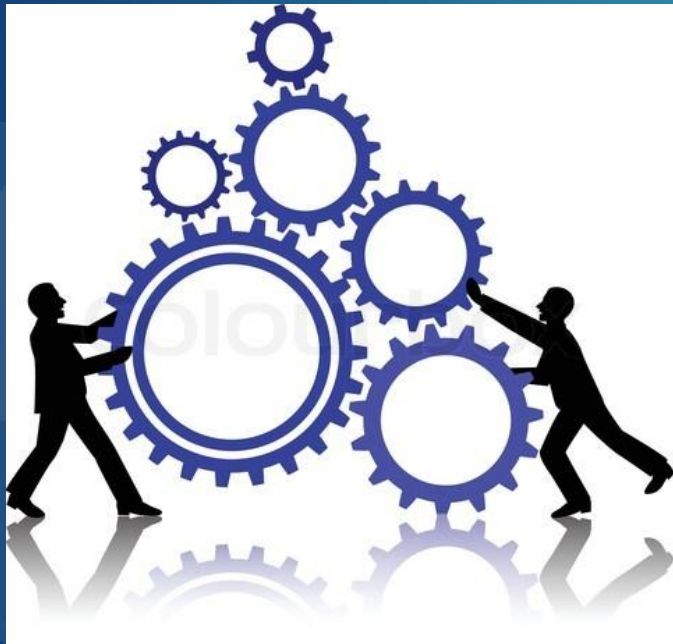
- Expanded Private Sector Participation in DOTS
 - Developed partnership with pharmacies on Pharmacy-DOTS Initiative (PDI)
 - Received referrals from pharmacies (e.g. Talisay City)
 - Initial advocacies to private hospitals

Partners' Actions



- Community support to TB mobilized to improve DOTS services utilization
 - Aklan TB Council (ATC) passed an ordinance supporting the council and is developing their TB strategic plan
 - Commitments from LGUs in the formation/organization of multisectoral alliances in Northern Samar, Samar, Leyte and Cebu
 - Kalibo strengthened the Barangay TB Mgt. Council (BTBMC) in 6 barangays
 - CBOs were trained as IEC providers

Partners' Actions



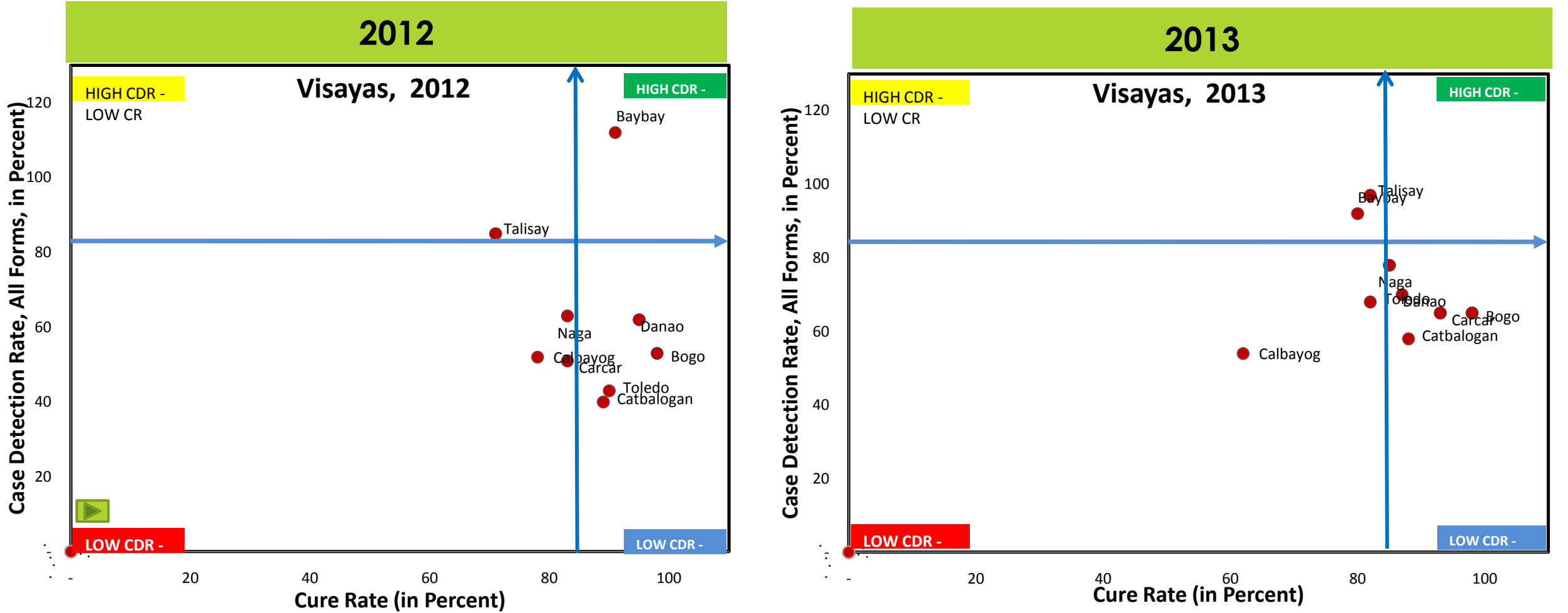
- Increased policy support to TB and accreditation of DOTS facilities
 - Some LGUs passed their TB Ordinance w/ budget support
 - Increasing LGUs applying for DOH DOTS certification and PHIC accreditation
 - Growing number of accredited DOTS centers with PHIC claims/reimbursement

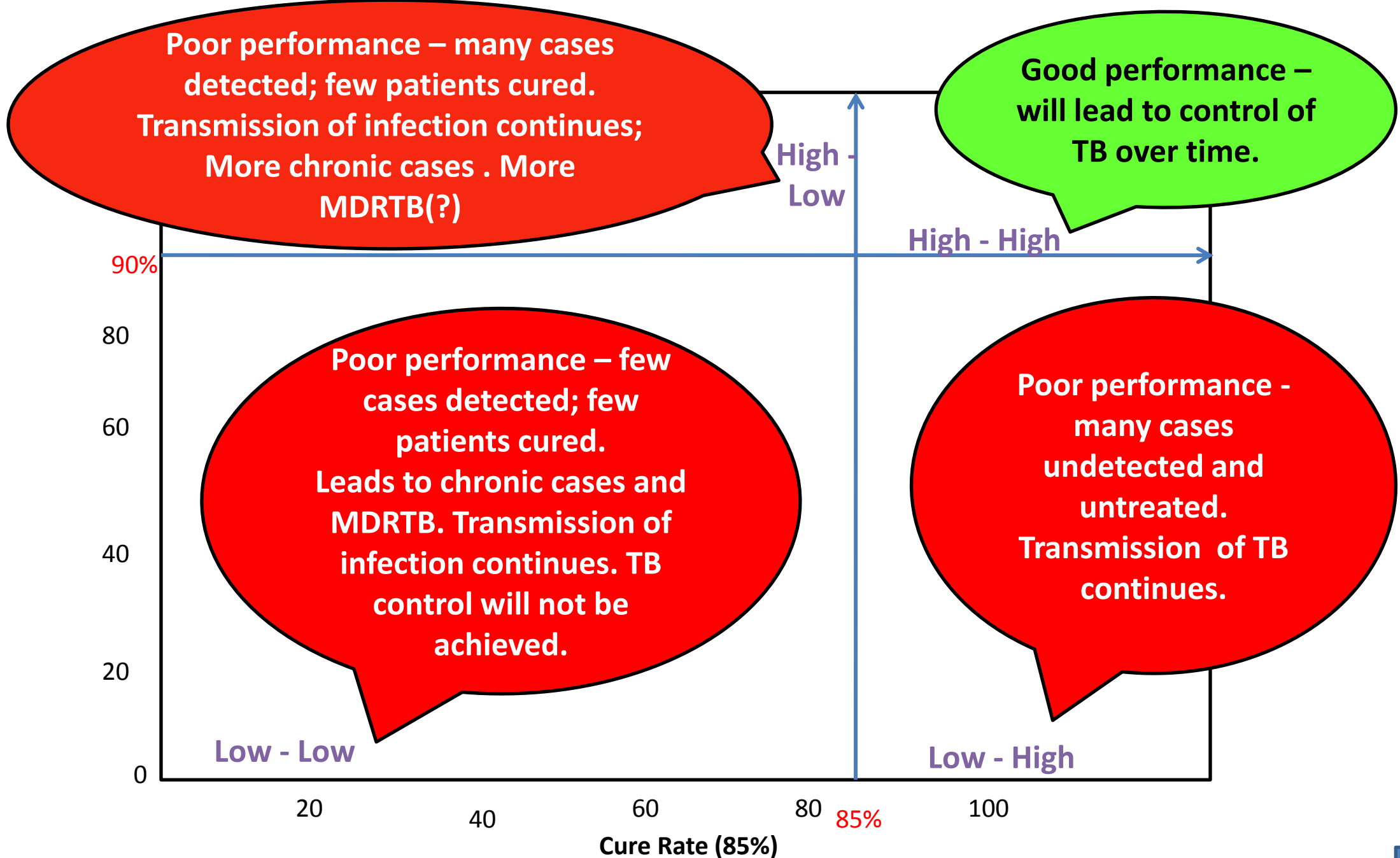
Partners' Actions

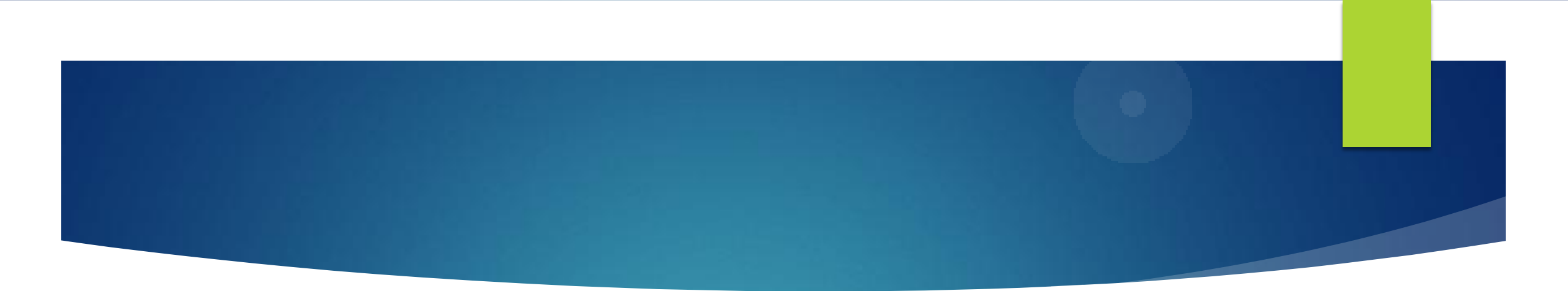


- Increased referrals and early diagnosis of presumptive DR-TB and immediate treatment DR TB cases in PMDT Treatment Centers or Satellite Treatment Centers
 - LGUs established their local referral system and case holding mechanisms in PMDT
 - Improving coordination between DOTS centers and PMDT TC/STC
 - Challenges promptly acted to strengthen the RS and CH mechanism through regular assessments
 -

Distribution of Cities by NTP Performance (CDR All Forms & CR NSP) Visayas, 2012 and 2013







We cannot afford of the **CONSEQUENCES** of
DOING NOTHING



Thank you for your attention.