



Evaluation of impact in a programmatic setting

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Evaluation of new TB diagnostics: A capacity building workshop for public sector institutions in India, NIRT Chennai December 2014

Impact



Overview of Presentation

- Background
- RNTCP Experience with newer technology implementation e.g. LPA, CBNAAT, SLD
- Mandatory Notification under RNTCP
- Nikshay: (Case Based online software)

Impact

Impact

From Wikipedia, the free encyclopedia

Impact may refer to:

In **science**:

- [Impact \(mechanics\)](#), a high force or shock (mechanics) over a short time period
- [Impact crater](#), a meteor crater caused by an impact event
- [Impact event](#), the collision of a meteoroid, asteroid or comet with Earth
- [Impact factor](#), a measure of the citations to a science or social science journal

In **development**:

- [Impact evaluation](#), a way of evaluating changes from an intervention or development programme.

In **computing**:

- [IMPACT \(computer graphics\)](#), a computer graphics architecture for Silicon Graphics computer workstations

In **film, television and radio**:

- [Impact](#), a BBC World News weekday programme.
- [Impact \(1949 film\)](#), a 1949 film noir starring Brian Donlevy and Ella Raines
- [Impact \(1963 film\)](#), a 1963 crime thriller starring Conrad Phillips
- [Impact \(mini-series\)](#), a 2008 television mini-series starring Natasha Henstridge and David James Elliott
- [Impact Wrestling](#), the primary weekly television program of Total Nonstop Action Wrestling

In **literature**:

- [Bath Impact](#), the student newspaper for the University of Bath Students' Union, England

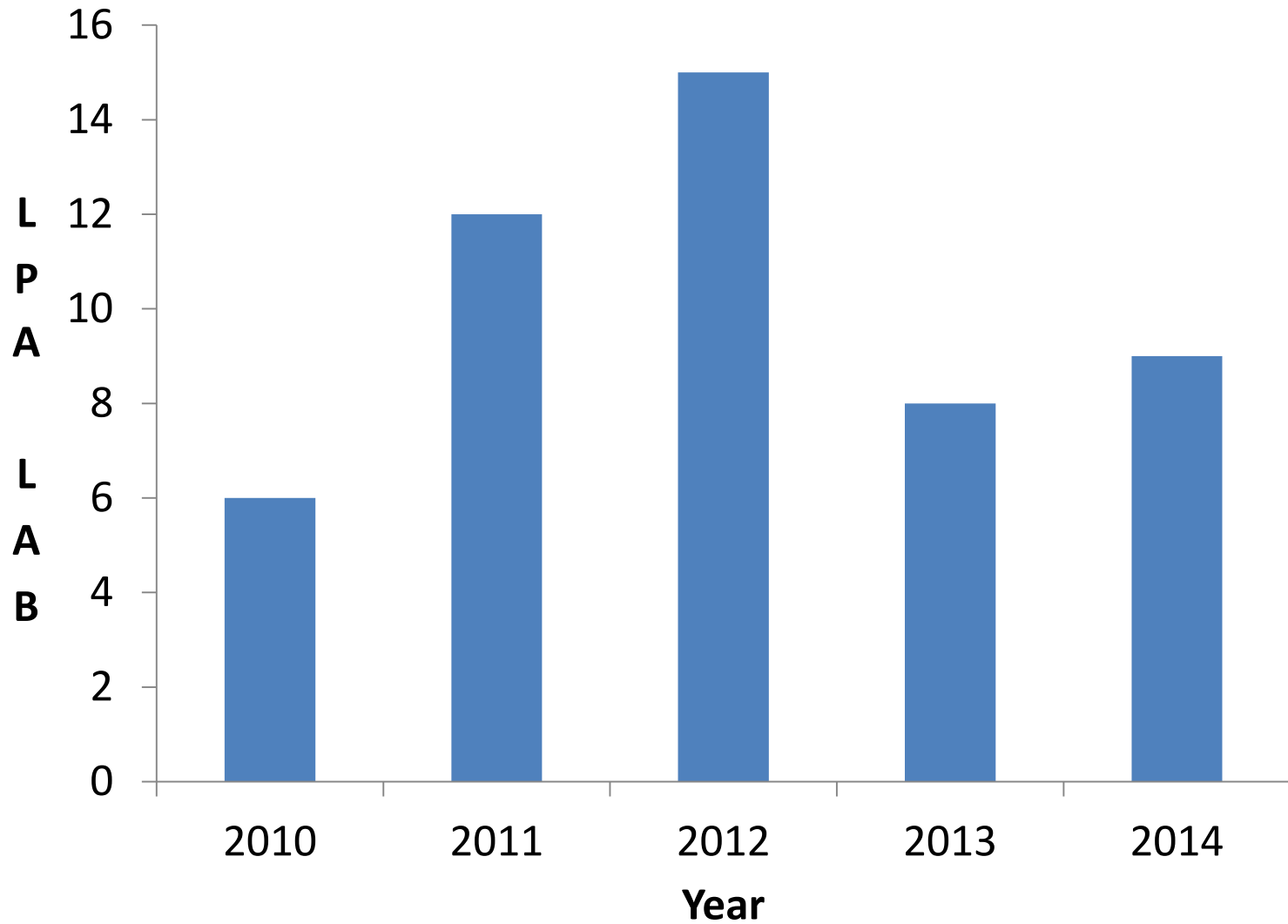
Impact evaluation

- Impact evaluation a way of evaluating changes from an intervention or development programme.
- **Health Impact Assessment (HIA)** is defined as "a combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population." ([ECHP 1999](#), p. 4)

Health Impact

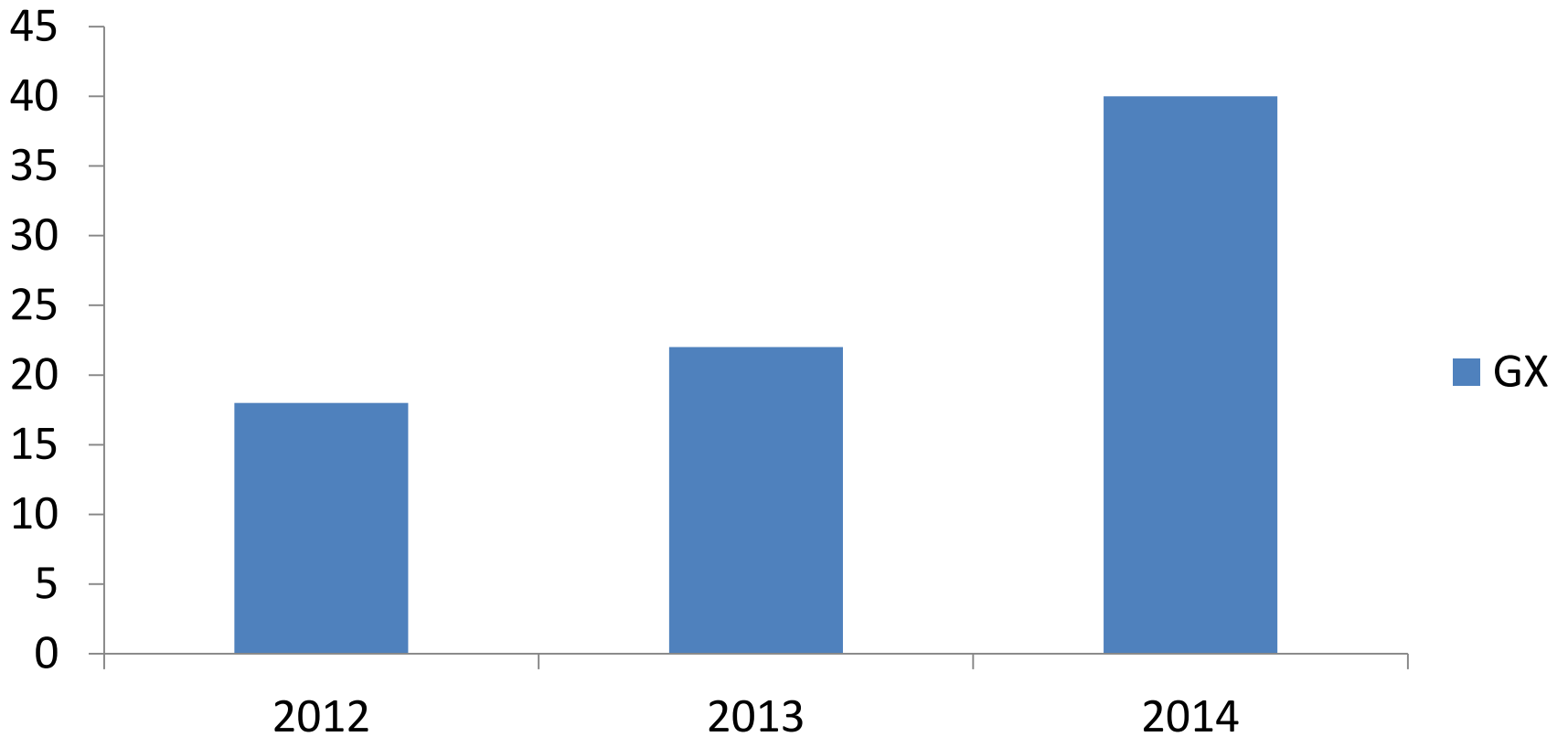
- **Health impact:** A health impact can be positive or negative. A positive health impact is an effect which contributes to good health or to improving health. For example, having a sense of control over one's life and having choices is known to have a beneficial effect on mental health and well being, making people feel "healthier" (Wilkinson, 1996). A negative health impact has the opposite effect, causing or contributing to ill health.
- Short term:
 - ✓ Number of test done
 - ✓ Number of patient diagnosed
 - ✓ Number of patient put on treatment
- Long term:
 - ✓ Number of patients favourable outcome
 - ✓ Reduction in mortality
 - ✓ Change in prevalence and incidence
 - ✓ Change in disease burden

RNTCP Certified LPA laboratory

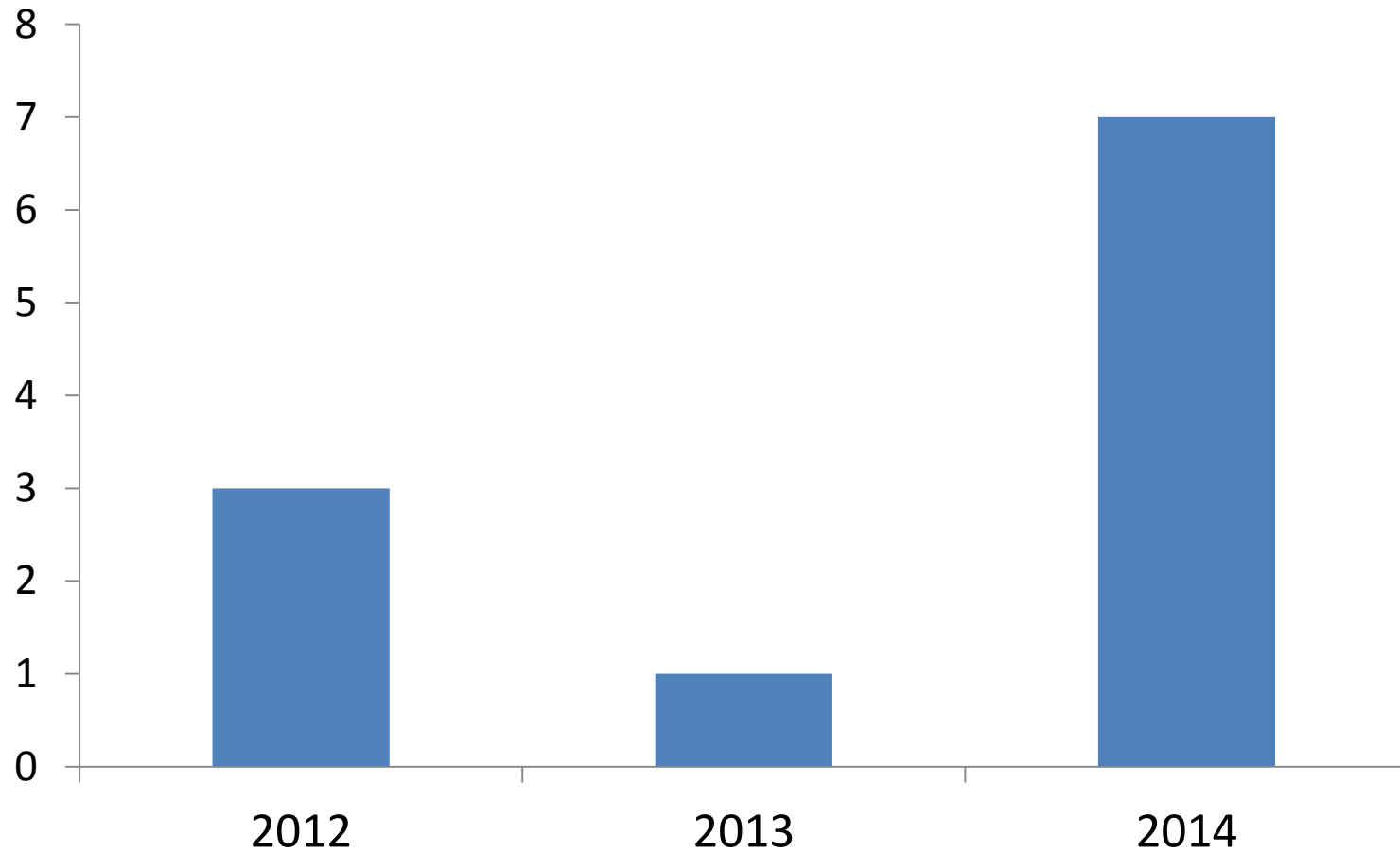


CB-NAAT DEPLOYMENT

CB NAAT

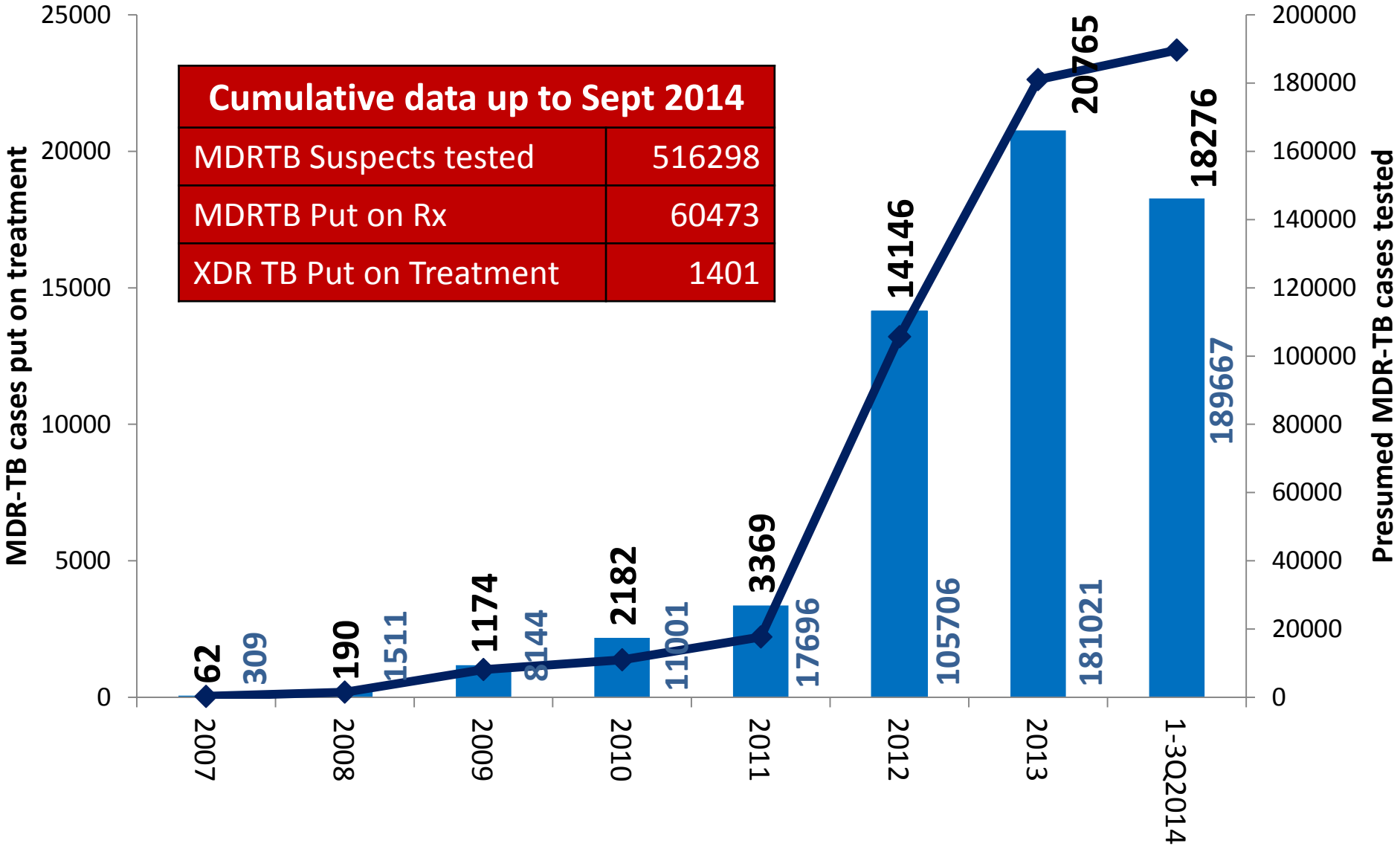


RNTCP certified SLD labs



DR-TB case finding efforts

■ Sum of MDR-TB cases initiated on treatment ◆ Sum of presumed MDR-TB cases tested



Progress Nov 2014

**Presumptive MDR TB
cases tested (42,122)**

**MDR TB cases
Diagnosed (3355, 8%)**

**MDR TB patients initiated on
(Cat IV) Patients (2596)**

**DST for 2nd line drugs
performed (818, 32%)**

**R+Ofx resistant
diagnosed (163, 20%)**

**R+Kana resistant
diagnosed (11, 1.3%)**

**XDR TB diagnosed
(32, 4%)**

TB Notification Order

7th May 2012

Govt. of India

RNTCP

Z-28015/2/2012-TB
Government of India
Ministry of Health and Family Welfare

Nirman Bhavan, New Delhi

Dated: 7th May 2012

Notification of TB cases

TB continues to be a major public health problem accounting for substantial morbidity and mortality in the country. Early diagnosis and complete treatment of TB is the corner-stone of TB prevention and control strategy. Inappropriate diagnosis and irregular/incomplete treatment with anti-TB drugs may contribute to complications, disease spread and emergence of Drug Resistant TB.

In order to ensure proper TB diagnosis and case management, reduce TB transmission and address the problems of emergence and spread of Drug Resistant-TB, it is essential to have complete information of all TB cases. Therefore, the healthcare providers shall notify every TB case to local authorities i.e. District Health Officer / Chief Medical Officer of a district and Municipal health Officer of a Municipal Corporation / Municipality every month in a given format (attached).

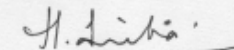
For the purpose of case notification, a TB case is defined as follows:

- A patient diagnosed with at least one sputum specimen positive for acid fast bacilli, or Culture-positive for Mycobacterium tuberculosis, or RNTCP endorsed Rapid Diagnostic molecular test positive for tuberculosis
OR
- A patient diagnosed clinically as a case of tuberculosis, without microbiologic confirmation, and initiated on anti-TB drugs.

For the purpose of this notification, healthcare providers will include clinical establishments run or managed by the Government (including local authorities), private or NGO sectors and/or individual practitioners.

For more detailed information, the concerned State TB Officers / District TB Officers, whose details are available on www.tbindia.nic.in, may be contacted.

Encl: As mentioned



(Manoj Sinha)

Under Secretary to the Government of India

Copy for immediate further necessary action, to:

- 1) All Principal Secretaries / Secretaries of Health of States / UTs
- 2) All Directors of Health Services of States / UTs
- 3) All State TB Officers of States / UTs

With the request to kindly immediately bring this order to the notice of all concerned for compliance, in their respective State / UT

2012

Guidance for TB Notification in India



Central TB Division,
 Directorate General of Health Services,
 Ministry of Health & Family Welfare,
 Govt of India

July 2012

For any queries, please write to tbnotification@tbcindia.nic.in

Frequently Asked Questions (Tuberculosis notification in India)

1. What is TB notification?
Reporting about information on diagnosis &/or treatment of Tuberculosis cases to the nodal Public Health Authority (for this purpose) or officials designated by them for this purpose.
2. Who is expected to notify TB cases?
Every healthcare providers meaning clinical establishments run or managed by the Government (including local authorities), private or NGO sectors and/or individual practitioners.
3. Are the public sector facilities expected to notify the TB cases?
Yes. All Tuberculosis facilities expected to notify the TB cases &/or treated, whether under DOTS strategy or not.

TB Notification Module – Nikshay: User Manual

4. To whom TB cases are to be notified?
Nodal Public Health Authority (for this purpose) or officials designated by them for this purpose. State TB Officers (STOs) are the nodal officers for this purpose. For more information on all TB cases in 2012 was issued to Principal Secretaries, Health of all States/UTs, all Director, Health Services of all States/UTs and all State TB Officers of all States/UTs with a request to bring it to the notice of all concerned for compliance in their respective States/UTs.
5. When TB cases are to be notified?
On diagnosis of TB cases or on treatment of TB cases.
6. How TB cases are to be notified?
Based on above communication sent by Central TB Division (CTD) and NIC has developed TB Notification module, which has 2 level processes:

- Process-1: Health Establishment Registration – All Public and Private Health Establishments either diagnosing or treating TB patients need to be registered and a Registration Number will be generated by the computer. Process-1 has been allowed at DTO level only. It is essential to associate all such Health Establishment with the Tuberculosis Unit for easy monitoring.
- Process-2: Once Health Establishment is registered, then all the patients either being diagnosed (by laboratories) or being treated (by Hospitals/Private Practitioners) will be entered into the software. There are some common fields for Laboratories and Hospitals/Practitioners and some different fields for each of them and they will be displayed depending upon the type one chooses. This facility has been given at DTO as well as TBU level.



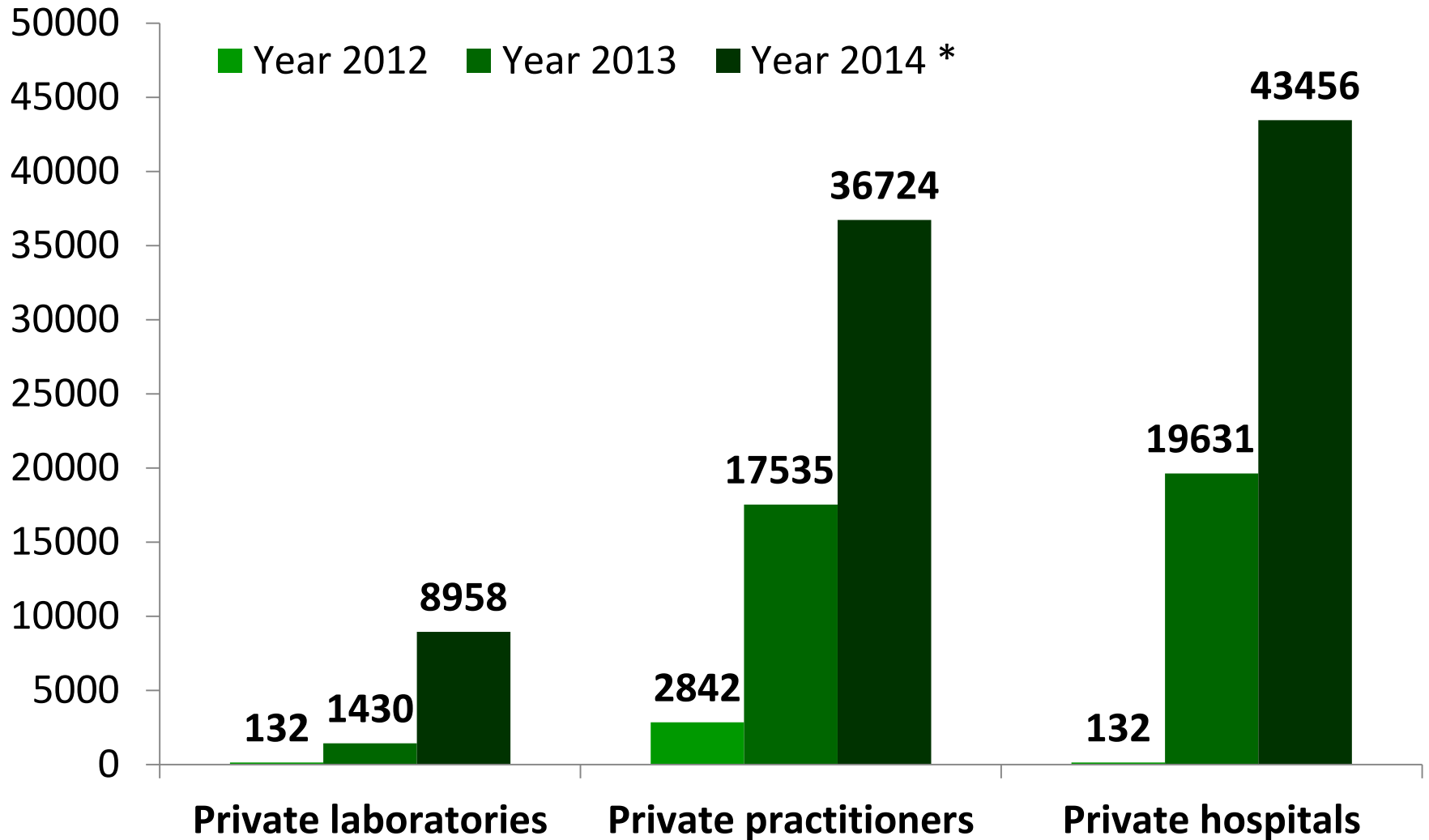
For DTO Login, a new option, TB Notification has been given, which has 2 sub-options as given in the Screen-I.

Standards For TB CARE IN INDIA(STCI)



- Standards for Diagnosis of TB (1 – 6)
- Standards for Treatment of TB (7 – 11)
- Standards for Public Health for TB (12 – 21)
- Standards for Social Inclusion for TB (22 – 26)

Progress in TB patient notification by private sector



Total notification 1.5 lakh

* Till 30th Nov 2014



Nikshay-Case Based Web Based recording and reporting system

http://nikshay.gov.in/User/Lc Login Page

REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME
(MINISTRY OF HEALTH AND FAMILY WELCOME, GOVERNMENT OF INDIA)

HOME FAQS CONTACT US

DOTS-
Pura Course | Pakka Itiiaj

Sign in to Nikshay

User Name:

Password:

gdjxz

About RNTCP

In India today, two deaths occur every three minutes from tuberculosis (TB). But these deaths can be prevented. With proper care and treatment, TB patients can be cured and the battle against TB can be won.

Tuberculosis (TB) is an infectious disease caused by a Bacterium, Mycobacterium tuberculosis. It is spread through the air by a person suffering from TB. A single patient can infect 10 or more people in a year.

India has a long and distinguished tradition of research in TB. Studies from the Tuberculosis Research Centre in Chennai and the National Tuberculosis Institute in Bangalore provided key knowledge to improve treatment of TB patients all around the world.

Modern anti-TB treatment can cure virtually all patients. It is, however, very important that treatment be taken for the prescribed duration, which in every case is a minimum of 6 months. Because treatment is of such a long duration and patients feel better after just 1-2 months, and because many TB patients face other problems such as poverty and unemployment, treatment is often interrupted.

16:54
16-08-2012

Nikshay

Case Based Web Based recording and reporting system

- To strengthen TB surveillance system, Central TB Division in collaboration with National Informatics Center, developed the “Case Base Web Based Recording & reporting, Information & Communication Technology system” and hosted it on 15th May 2012.
- Four Levels of Users:
 - National Level
 - State TB Officer
 - District TB Officer
 - Tuberculosis Unit level user
- Integration
 - With MCTS for Health Facilities Database
 - With Meta Data and Data Standards (MDDS)

Tuberculosis surveillance using

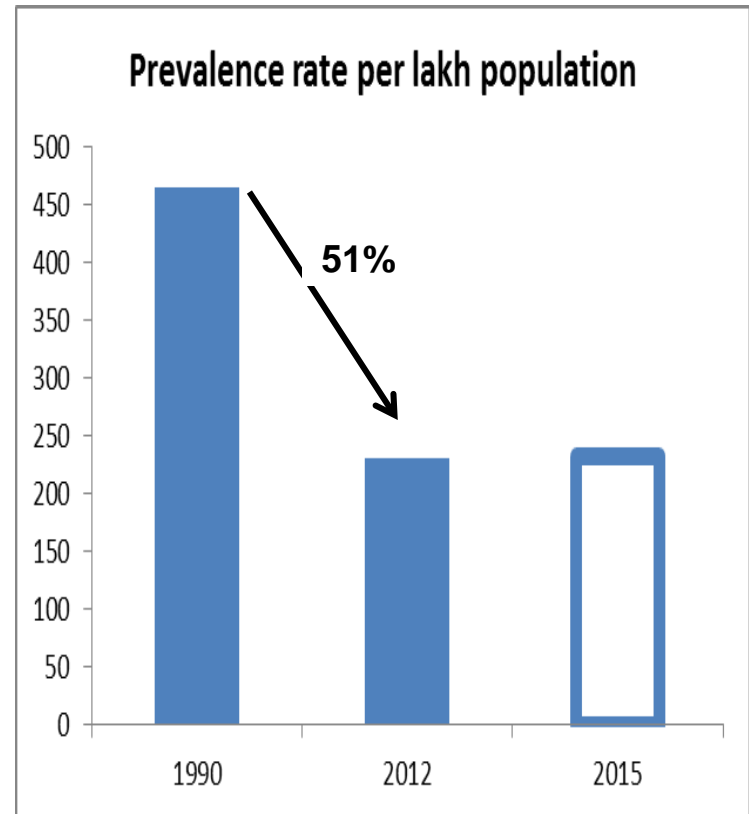
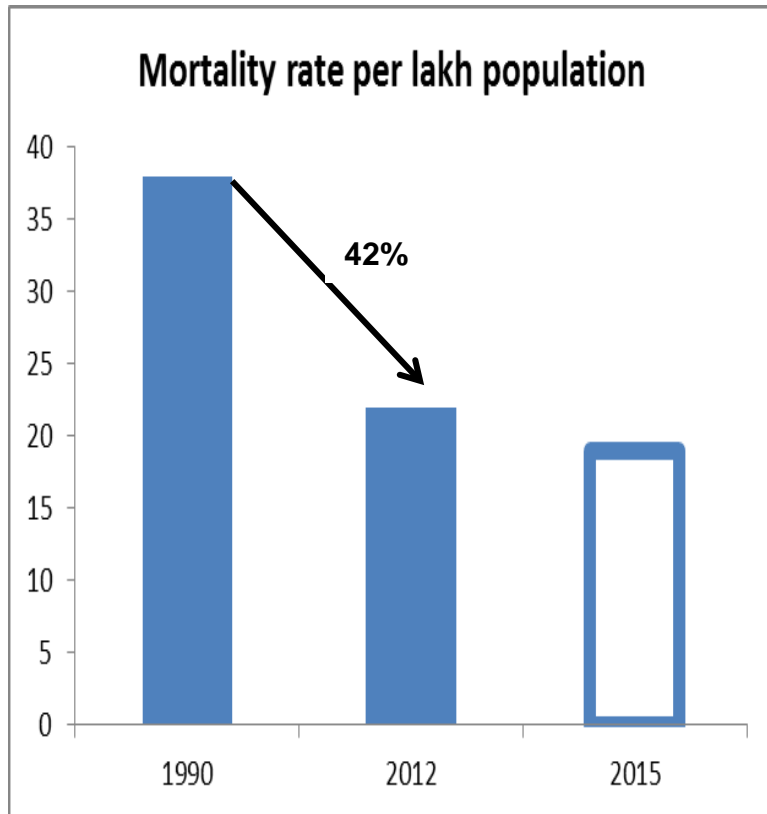
Nikshay: (Case Based online software)

TB Patients Registered under RNTCP	32,37,354
Peripheral Health Institutes (PHI) registered	44,001
Tuberculosis Officials details	2791
District TB Officers details	696
State TB Officers details	35
Contractual Employees details	7734
Non-RNTCP Health Establishments registered	78,908
Non-RNTCP Patients registered	1,28,844
Culture & Drug Resistant Labs Patients registered	68,024
Drug Resistant Tuberculosis Patients registered	6160



Mobile app
for
notification
by PP

India's TB control programme is on track as far as reduction in disease burden is concerned. There is 42% reduction in TB mortality rate by 2012 as compared to 1990 level. Similarly there is 51% reduction in TB prevalence rate by 2012 as compared to 1990 level.



Thank You

www.tbcindia.nic.in

TBC India
Directorate General of Health Services
Ministry of Health and Family Welfare

Contact Us | Web Mail | Discussion Board | Site Help

Documents Downloadable | Performance Indicators | Frequently Asked Q's | Key Facts and Concepts | Success Stories | IEC Resource Centre | History of TB Control | Directory Of TB Offices | Related Sites

Patient Treated: 011010897

Procurement Info | Method of Calculation

Lives Saved: 1981961

TUBERCULOSIS CONTROL - INDIA

RNTCP 100% coverage under DOTS

In terms of population coverage, India now has the second largest DOTS (Directly Observed Treatment, Short course) programme in the world. However, India's DOTS programme is the fastest expanding programme, and the largest in the world in terms of patients initiated on treatment, placing more than 100,000 patients on treatment every month. This site provides information about tuberculosis and its control in India.

70% case detection achieved

RNTCP Annual Report 2009 NEW

टीबी- पक्के इलाज का पक्का वादा डॉ.एस.

Indian TB Programme officers
[Login Here](#)

Strategic Vision Document of the RNTCP

About the RNTCP

In India today, two deaths occur every three minutes from tuberculosis (TB). But these deaths can be prevented. With proper care and treatment, TB patients can be cured and the battle against TB can be won

[More...](#)

[Request for Proposal for Media Agencies](#) | [Download Update Patch 3.1.8 for Epi-Centre Windows](#)

Revised National Tuberculosis Control Programme