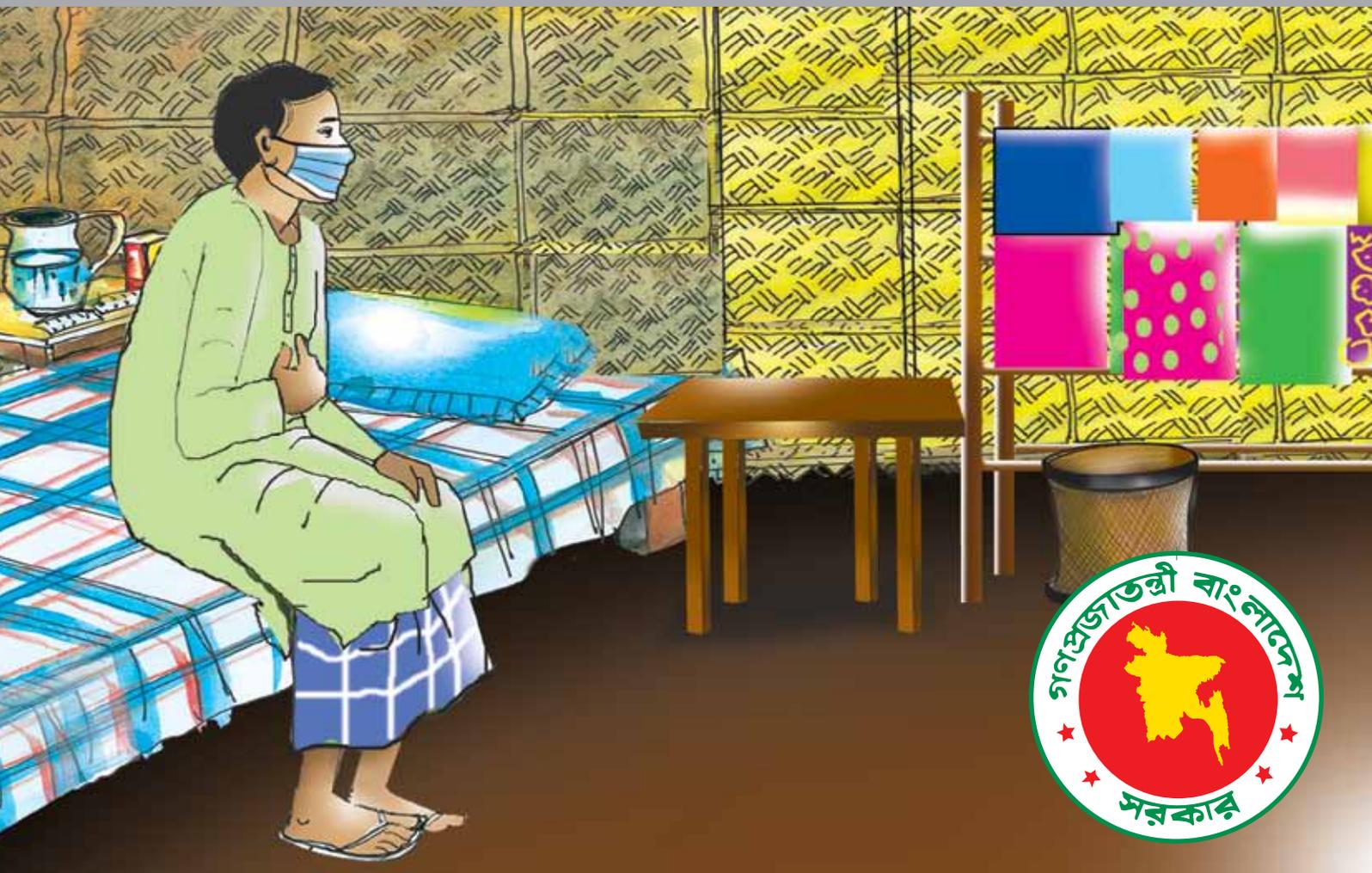


Training TB Infection Prevention and Control in Health Facilities

Training Curriculum



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ABBREVIATIONS

| | |
|-------|--|
| ACSM | Advocacy Communication and Social Mobilization |
| DR-TB | Drug resistant tuberculosis |
| HCW | Health care worker |
| IC | Infection control |
| IPC | Infection prevention and control |
| PPT | PowerPoint |
| Rx | Treatment |
| SOP | Standard Operating Procedures |
| TB | Tuberculosis |
| UVGI | Ultraviolet germicidal irradiation |

BASIC TRAINING COURSE INFORMATION

Background

In 2011 the “*National Guidelines for Tuberculosis Infection Control*” were launched, providing guidance to health care workers (HCWs) and hospital managers on the prevention of the transmission of tuberculosis (TB) in their facilities.

In many health facilities TB Infection Prevention and Control (TB-IPC) is not yet up to standard, creating a high-risk of TB infection for HCWs and their patients. Training and supportive supervision of HCWs and their managers is needed to build their capacity to improve their TB-IPC practices.

The TB-Infection Prevention and Control (TB-IPC) package is meant for the people responsible for the “TB Infection Prevention and Control in health facilities”, the facilitators and the participants. The TB-IPC training package includes the training curriculum, the facilitators’ manual and the participants’ manual.

Target Audience

This training is designed for teams of four Infection Prevention and Control (IPC) key staff members (doctors, nurses, laboratory staff, hospital managers and IPC working group members) from both general and drug resistant TB (DR-TB) hospitals, and is for a maximum of 24 participants.

Facilitators

The training course is facilitated by a group of TB-IPC core trainers who were trained in the TB-IPC Training of Trainers. Three facilitators will facilitate the complete course; every facilitator will facilitate 3 - 4 sessions, will support the other facilitators in their sessions and will support participants in subgroup work. Therefore all the facilitators must be present for the full two days, for a preparatory meeting prior to the training and an evaluation meeting after the training. One of the facilitators is the overall facilitator, linking the different sessions and guiding the facilitators’ team. The facilitators will also write the training evaluation report.

Goals and Objectives

Overall Goal

By the end of this training course the participants are able to develop and implement the TB-IPC plan for their health facility, and monitor compliance with TB-IPC standards.

Specific Objectives

At the end of the training course participants will be able to:

1. Explain the purpose and relevance of TB-IPC in Bangladesh hospitals
2. Use the *National Guidelines for TB Infection Prevention and Control* for their professional practice
3. Make a TB-IPC risk assessment for their hospitals
4. Identify the TB-IPC tasks and responsibilities of staff in their hospitals
5. Present the FAST strategy and explore how the FAST strategy might be implemented in their hospitals
6. Give TB-IPC health education to their hospitals’ health workers, patients and their family members
7. Define the TB-IPC standard operating procedures (SOPs) to be developed for their hospitals and agree on timelines
8. Develop a TB-IPC implementation plan for their hospital and advocate for its implementation
9. Assess integration opportunities with overall health facility IPC.

Sessions

- Session 1: Welcome and introduction
- Session 2: The basics of TB infection and Prevention Control
- Session 3: A TB-IPC risk assessment
- Session 4: Administrative and environmental controls
- Session 5: TB-IPC among HCWs
- Session 6: The FAST Strategy
- Session 7: TB-IPC health education
- Session 8: Personal protection
- Session 9: TB-IPC implementation plan
- Session 10: The course evaluation

Course Duration

The duration of the training course is two days, with working hours from 9.00–17.00.

Training Course Program

Day 1

| Time | Session | Facilitator |
|-------------|---|-------------|
| 08:30-09:00 | Registration | Secretary |
| 09:00-10:00 | Session 1: Welcome and introduction | |
| 10:00-11:15 | Session 2: Basics of TB infection and prevention control | |
| 11:15-11:45 | Break | |
| 11.45-13.15 | Session 3: TB-IPC risk assessment | |
| 13.15-14.15 | Lunch | |
| 14.15-15.15 | Session 4: Administrative and Environmental controls | |
| 15.15-15.30 | Break | |
| 15.30-16.30 | Session 5: TB-IPC among HCWs | |
| 16.30-16.45 | Evaluation of the day | |

Day 2

| Time | Session | Facilitator |
|--------------|--|-------------|
| 09.00- 09.30 | Recap Introduction of the day | |
| 09.30-11.00 | Session 6: The FAST Strategy | |
| 11.00-11.30 | Break | |
| 11.30-13.00 | Session 7: TB-IPC health education | |
| 13.00-14.00 | Lunch | |
| 14.00-15.00 | Session 8: Personal protection | |
| 15.00-16.30 | Session 9: TB-IPC implementation plan | |
| 16.30-17.00 | Evaluation of the course | |

Course Language

The course is conducted in Bengali and the course materials are in English.

Training methodology

The training program focuses on the competencies (knowledge, skills and attitudes) the participants need to practice TB-IPC in their workplace. The participants will assess the TB-IPC practices in their health facility and they will develop a TB-IPC work plan for their health facility that they will be able to implement when they return to work. Supportive supervision will be provided after the training, to support the teams with the implementation of their TB-IPC plan.

Different training methods are used to enhance active participation and sharing among participants such as sharing in groups, sub group work, role-plays and exercises to assess the current TB-IPC situation and plan for improvements.

Mentoring/Supportive supervision

After the TB-IPC training the trainees will be supported on the job by a mentor to finalize the TB-IPC risk assessment, to further develop the TB-IPC plan and to implement this plan.

TB-IPC Mentoring/ supportive supervision will be provided till one year after the training:

- Half day mentoring session two weeks after the training (by CTB field staff)
- Two hours mentoring sessions every three months (field staff).

Mentors must follow the two day training and will do an additional one day mentoring training. Challenge TB field staff could be assigned as mentor/supervisor.

The trainers can also be assigned to take up the mentoring role, and therefore only do the one day mentoring training.

The above supervision is on top of NTP's regular supervision, in which TB-IPC will always be addressed and is part of the NTP's supervision checklist.

Course Materials

The course materials consist of the Training Curriculum, the Facilitators’ Manual, the Participants’ Manual, the training course evaluation and evaluation report template and a certificate of attendance. The Participants’ Manual includes all the participants’ course materials: An introduction to the training course and the objectives, basic TB-IPC information and exercises.

Evaluation of the course

At the end of the course the participants will fill out a course evaluation form.
The evaluation results will be used for the course evaluation report.

Certification

At the end of the training course the participants will receive a certificate of attendance.

Logistics and organization

Preparing for the training

At least eight weeks prior to the training:

- Agree on the training dates and venue.
- Confirm the availability of the facilitators.
- Agree on the hospitals to participate.
- Send invitations to the hospitals and request them to send the list of participants not later than four weeks prior to the training.

At least six weeks prior to the training:

- Check if course materials need to be printed or re-ordered

At least two weeks prior to the training:

- Check the training supplies (flip charts/markers) and a projector is available and working.
- Check the list of participants.

At least one week prior to the training:

- Meet with the facilitators: Confirm the agenda and agree on the division of tasks among the facilitators.

The day before the training:

- Prepare the room with adequate chairs and tables, flip chart and markers.

The morning of the training:

- Set-up the projector.
- Set-up the registration area.
- Ensure the participant manuals and other hand-outs are available.

Materials and Equipment

To deliver a successful training course specific materials and equipment are required:

| General | Individual (per participant) | Per trainer |
|--|---|--|
| Laptop and projector | Participants’ manual | Facilitators’ manual and PPT slides |
| White board/flip charts | Brochure “FAST, a Tuberculosis Control Strategy” | National Guidelines for Tuberculosis Infection Control |
| Flip charts and two stands | Pen | |
| 10 Markers (different colors) | Notebook | |
| Sticky tape/Scissors | Name tags/Badges | |
| Hole punch/Stapler | Evaluation form | |
| Surgical masks (6) | Certificates | |
| N95 masks for every participant (if this is not possible, a minimum of two N95 masks per team) | Per team: Two copies of the <i>National Guidelines for Tuberculosis Infection Control</i> | |
| Per team: TB-IPC health education materials: <ul style="list-style-type: none"> • Cough etiquette leaflets • TB-IPC poster • MDR-TB flip chart • TB poster | | |

Prerequisites for classroom

The classroom should accommodate 30 people.

The classroom set-up: Groups of tables with 4–6 participants around each table. The tables and chairs should be moveable in order to accommodate group work. Adequate space is needed at the front of the room for the projector, board and other equipment.

After the training course:

1. Process the evaluation forms (secretary)
2. Organize the facilitators' meeting to discuss:
 - The training results
 - The points of particular interest for mentoring
 - Suggested improvement of the training content, methodology and materials.
3. The main facilitators write the evaluation report and discuss the results with the NTP and the organization that planned the course.

