



TPT 1 Routine Standard Operating Procedures (SOP) to review IPT Registers and Patient Care Booklets for TB Screening (TX_TB) and TPT Initiation and Completion for PLHIV (TB_Prev)

1.TPT Routine Patient Care Booklet (PCBs) Review (TX_TB and TB_Prev)

1.1 Assign a focal person to randomly select 10 Patient Care Booklets for review.

1.2 Use the table below to record the following information:

- Screened for TB
- Investigated for TB
- Bacteriologically confirmed (MTB+/SS+/C+)
- Diagnosed with RR/DR-TB
- Started on TB Treatment (Date and Registration Number)
- Eligible for TPT
- Initiated on TPT
- History of TPT/Completed TPT

1.3 Summarise data collected in Table: 1 below and develop a cascade to show information graphically.

1.4 Table 1: TX_TB: Patient Care Booklet Reviews: Period of review (e.g. 14-18 May 2018)

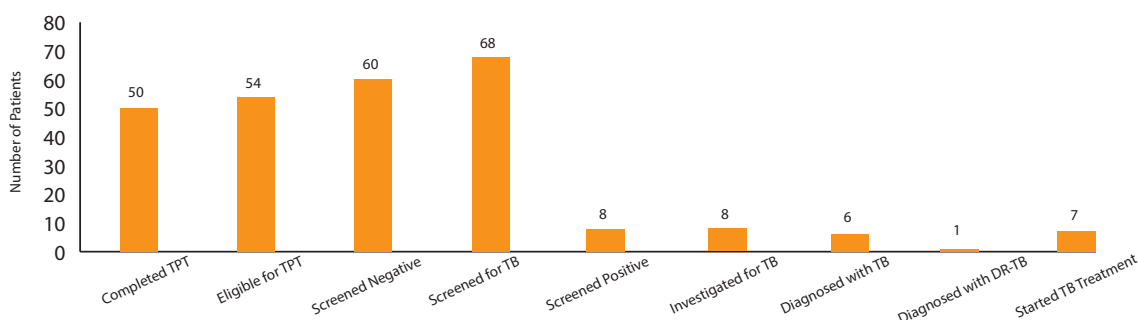
1.5 **Focal Person/Sister in Charge** at time of data collection:

# of patient record	Screened for TB	Investigated for TB Specimen sent	Diagnosed with TB	Diagnosed with RR/DR-TB	Started TB Treatment (Date & Registration Number)	Eligible for TPT	Initiated on TPT Date	History/Completed TPT	Screen Negative for TB
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

1.6 Share cascade with facility staff/colleagues and discuss gaps and opportunities for improvement.

Illustrative TX-TB and TB_Prev Cascade: Summary Table and Graph

Total # of patient records reviewed	Total # completed TPT	Total # eligible for TPT	Total # screened Negative for TB	Total # screened for TB	Total # screened Positive for TB	Total investigated for TB	Total diagnosed with TB	Total diagnosed with DR-TB	Total Started TB treatment
68	50	54	60	68	8	8	6	1	7





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- 1.7 Determine time of action and person responsible.
- 1.8 Follow up weekly/monthly –randomly selected files. Mark files with a sticker to indicate review.
- 1.9 Show improvements quarterly. Display graphs in appropriate places within the facility, share them in management/staff meetings, include them in monthly reports

2. TPT Routine IPT Register Review(TB_Prev)

2.1 Assign responsibility to a focal person to review the register by using the table below to determine the month(s) for review according to the reporting month.

2.2 Review for 6, 9 and 12 months retrospectively by using the table below for guidance.

Month of Initiation (counted as the first month of treatment)	Month of report for 9 months completion	Month of report for 12 months completion	Month of Report for 6 months completion
May	Jan	April	Oct
June	Feb	May	Nov
July	March	June	Dec
Aug	April	July	Jan
Sept	May	Aug	Feb
Oct	June	Sept	March
Nov	July	Oct	April
Dec	Aug	Nov	May
Jan	Sept	Dec	June
Feb	Oct	Jan	July
March	Nov	Feb	Aug
April	Dec	March	Sept

2.3 Determine the number of initiations who:

Completed at least 6 months, determine %

Number %

Completed 9 months, determine %

Number %

Completed in 12 months, determine %

Number %

2.4 Use the table below to record the findings

2.5 **Focal Person/Sister in Charge** at time of data collection:

# of patient record	Eligible for TPT	Initiated on TPT	Completed 6 months	Completed 9 months	Completed in 12 months	Comments
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						



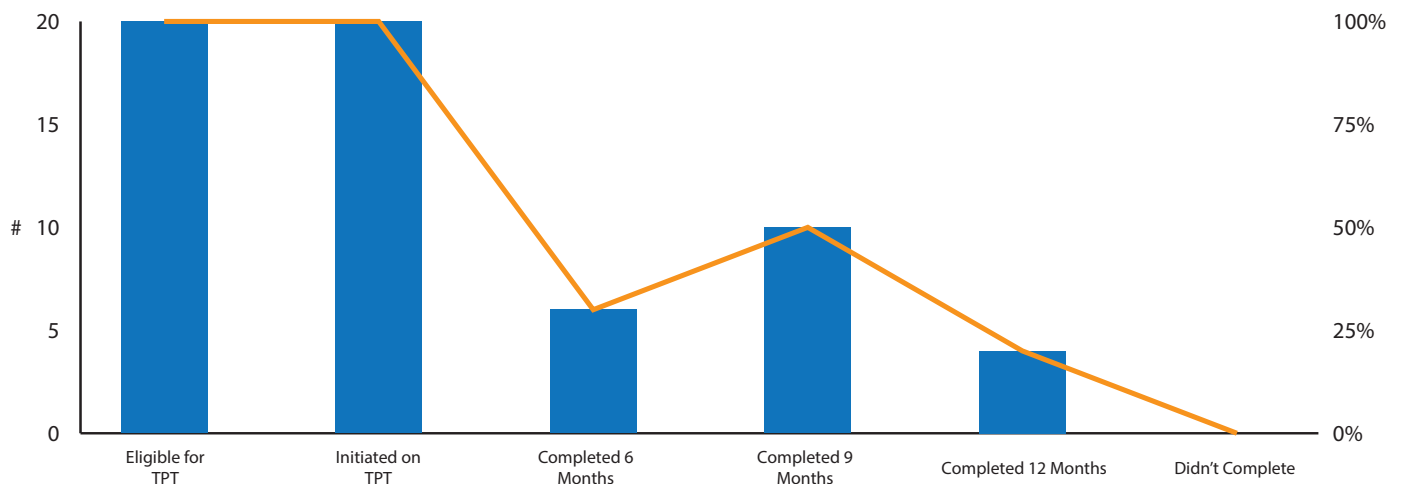
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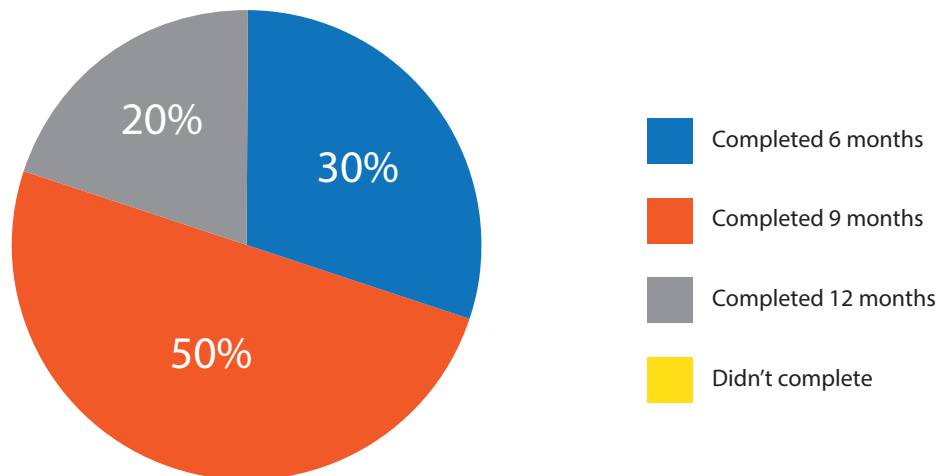
- 2.4 Summarise data collected and develop a cascade to show information graphically.
- 2.5 Share cascade and a pie chart with facility staff/colleagues and discuss gaps to address and opportunities for improvement.
- 2.6 Determine time of action and person responsible.
- 2.7 Follow up weekly or monthly. Randomly select 10 files. Mark files with a sticker to indicate review.
- 2.8 Show improvements quarterly**

2.6 Summarize data collected and develop a cascade to show information graphically as illustrated below.



2.7 Share cascade and a pie chart with facility staff/colleagues and discuss gaps to address any opportunities for improvement.

Example of a pie chart:



- 2.7 Determine time of action and person responsible
- 2.8 Follow-up weekly or monthly. Randomly select 10 files. Mark files with a sticker to indicate review.
- 2.9 Show improvements quarterly. Display graphs in appropriate places within the facility, share them in management/staff meetings, include them in monthly reports



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TPT 2 Rapid Assessment Tool to Update IPT Registers and Patient Care Booklets for TPT Initiation and Completion for PLHIV (TB_Prev)

Tools required:

IPT Register(s)

Patient Care Booklets

Data Collection Forms

EPMS Information/ electronic system information

1. TPT Rapid Assessment Register Review(TB_Prev)

- 1.1 Determine the period to update. (For example Oct 2016 – Sept 2017) Do the updating by quarters to align with previous reports.
- 1.2 Assign a team of at least 3 people, including a leader to manage the process.
- 1.3 Conduct a review on the current status of the register, using the routine SOP guidance and provide a summary. Use the summary to compare with the rapid assessment review. This will help the purpose of record keeping.
- 1.4 Prepare to review the register by listing the names of patients/registration numbers to assist in getting booklets from storage. Get a printout from EPMs/the system.
- 1.5 Determine a safe place for review and the process of getting booklets and returning booklets to storage.
- 1.6 Review booklets and update the IPT register accordingly.
 - Booklets with names identified
 - Booklets from within the time frame (e.g. Oct 2016- Sept 2017) not recorded in the IPT register
- 1.7 Keep a list of all booklets/patients updated and all those recorded for the first time.
- 1.8 Correlate information with EPMs/the system and update accordingly.
- 1.9 Summarise data collected and develop a cascade to show information graphically.
- 1.10 Share cascade and a pie chart with facility staff and discuss gaps and opportunities for improvement.
- 1.11 Determine time for any further action and person responsible.
- 1.12 Revert back to the routine SOP on a weekly/ monthly basis to review initiations for the week/ month.
- 1.13 Use the table below to record the findings for 1.7
- 1.14 Period to update (e.g. Oct 2016-Sept 2017)

# of Patient record	Initiated on TPT/ Recorded/ NEVER updated	Initiated on TPT/ NEVER Recorded	Initiated on TPT/ Updated	Booklets for further review/Indicate reason briefly	Comments
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

- 1.14 Determine solutions and date for implementation. Use the findings to implement a Quality Improvement Project/Quality Collaborative for TPT.

1.15 Revert back to routine SOP on a weekly basis.



2. TPT Rapid Assessment: Patient Care Booklet (PCBs) Review- (TX_TB and TB_PREV)

2.1 Review booklets and update the IPT register accordingly.

- Booklets from within the time frame(October 2016- September 2017) not recorded in the IPT register
- Booklets of patients who started TB treatment

2.2 Use the table below to record the following information:

- Screened for TB
- Screened + and Screened -
- Investigated for TB
- Diagnosed with TB
- Bacteriologically confirmed (MTB+/SS+/C+)
- Diagnosed with RR/DR-TB
- Started on TB Treatment (Date and Registration Number)
- Eligible for TPT
- Initiated on TPT
- History of TPT/Completed TPT

2.3 Keep a list of all booklets of patients started on TB Treatment and update the line list below.

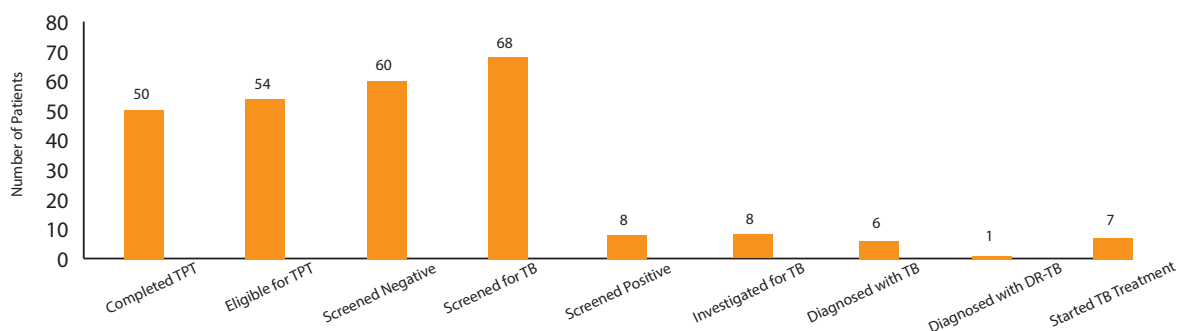
TX_TB: Patient Care Booklet Review: RAPID Assessment: Period (e.g. Oct 2016-Sept 2017)

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# of patient record	Screened for TB	Investigated for TB specimen sent	Diagnosed with TB	Diagnosed with RR/DR-TB	Started TB Treatment (Date & registration number)	Eligible for TPT	Initiated on TPT date	History/Completed TPT	Screened negative for TB
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

2.4 Illustrative TX-TB and TB_Prev Cascade: Summary Table and Graph

Total # of patient records reviewed	Total # completed TPT	Total # eligible for TPT	Total # screened Negative for TB	Total # screened for TB	Total # screened Positive for TB	Total investigated for TB	Total diagnosed with TB	Total diagnosed with DR-TB	Total Started TB treatment
68	50	54	60	68	8	8	6	1	7





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2.5 Determine time of action and person responsible

# of patient record	History/ Completed TPT	Initiated on TPT Date	Eligible for IPT	Screened Negative for TB	Screened for TB	Screened Positive for TB	Investigated for TB Specimen sent	Diagnosed with TB DR-TB	Started TB Treatment
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

2.6 Summarise data collected in the table of your choice above and develop a cascade to show information graphically. (Same table as for routine review)

2.7 Share cascade with facility staff/colleagues and discuss gaps and opportunities for improvement.

2.8 Determine time of action and person responsible. Use the findings to implement a QIP.

2.9 Revert back to routine SOP.



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TPT 3 Line List for TB Diagnostics (Presumptive cases in PLHIV) **(TX_TB and TB_Prev)**

1. Enter data in list as patients are investigated and diagnosed on a monthly basis.
2. Keep list in secure file in unit for reference and follow up for TB Unit.
3. Use data from the list to develop a graphic presentation of TB Diagnostics in PLHIV.
4. Report on this quarterly and manage process.

Name of ART Facility:

Reporting Month & Year:

Month

Year

# of patient record	Name of Patient	Unique #	Date of Birth	Intervention Xpert, FNA, Biopsy, DM	Results	Previous TPT Y/N Date Completed	Action: TB Treatment TPT Initiation Enter date and # in TB/TPT Register	Signature
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								