Purpose of the Performance-based Monitoring and Evaluation Framework (PBMEF) for Tuberculosis

PBMEF Description

The PBMEF is a tool that can help USAID/Washington staff, Mission health officers who work on tuberculosis (TB), and TB advisors track progress against TB in a country and manage USAID's TB investments in one place. It is a standardized monitoring and evaluation (M&E) framework with 10 high-level core indicators to demonstrate program effectiveness and desirable outcomes in USAID's 23 TB-priority countries under the TB Accelerator.

The framework includes 14 corresponding groups of extended indicators allowing TB stakeholders to analyze the data and dig deeper to probe the reasons for program gaps. These standardized, high-quality indicators can serve as a key resource for implementing partners when developing their M&E plans, and later when analyzing the data to inform USAID's global programming and identify gaps for improvement.

The framework is informed by existing TB strategies: the Global Plan to Stop TB, the United Nations High-Level Meeting political declaration, the U.S. Government Global TB Strategy, and so forth. The PBMEF is a living document to be updated, harmonized, and adaptable to individual country contexts.

PBMEF Development Process

The PBMEF was developed following a consultative and collaborative process that went through several steps. In the first step, TB DIAH reviewed and synthesized patient pathways and treatment cascades for drug-sensitive TB (DS-TB), drug-resistant TB (DR-TB), TB preventive therapy (TPT), contact investigations, and TB with co-morbidities (HIV and diabetes). Later, the existing TB indicators and a set of potential indicators were mapped alongside these cascades and pathways to prepare a full list of draft PBMEF indicators.

In the second step, TB DIAH identified key M&E questions relevant to TB program monitoring by national- and subnational-level managers and M&E experts. These questions were matched with the list of draft indicators.

The third step was to prioritize the indicators based on their importance, feasibility, and credibility. The result of this exercise was a smarter list of indicators—identified as Tier 1 and Tier 2 indicators. Tier 1 indicators are core: they are highly important for performance monitoring and are already in place or can be implemented with little additional investment. Tier 2, or extended indicators, are important but need more substantial investment to collect routinely.

Core Indicators

To date, Missions have only had to report on two core TB indicators: DR-TB Treatment Success Rate and DR-TB Notifications. The 10 core (i.e., Tier 1) indicators in the PBMEF framework will become mandatory reporting for the semiannual reporting through the Missions. These indicators follow:

1. TB Detection
2. Bacteriological Diagnosis Coverage (Pulmonary TB)
3. Childhood TB Notifications
4. DR-TB Notifications
5. Private Sector TB Notifications
6. Contact Investigation Coverage
7. TB Treatment Success Rate
8. DR-TB Treatment Success Rate
9. TPT Coverage
10. Percentage of TB Financing Expected from Domestic Sources

These indicators were selected because they measure annual trends to assess country performance in detecting, enrolling, and treating cases of TB. They also measure performance towards USAID's objectives of reach, cure, prevent and the 2020 and 2050 milestones for the End TB Strategy and UN High-Level Meeting targets. These are mostly standardized indicators that are already reported at the national level and required by WHO.

The PBMEF and TB Roadmap

The PBMEF is a critical tool for supporting the TB Roadmap in tracking progress over time to reach every person with TB, cure those in need of treatment, and prevent the spread of disease and new infections. The framework can help identify challenges to achieving targets of the national TB program (NTP) and USAID. This data will provide an evidence base for funding and programmatic decisions.

In addition to the core indicators, country teams can select from the extended indicators (not including disaggregated data) to help understand the situation at a more granular level, in whatever ways make sense for USAID investments in the country.

The PBMEF can be used to analyze data using the cascade method for finding gaps in programs. Cascades quantify, track, and visualize how health and development programs are performing for the target population at progressive stages

toward an expected outcome. The data can answer questions, such as these:

- Which TB services are performing less well than expected: diagnostic or treatment services?

- Are we missing certain target groups?

- Are we missing certain geographic areas?

- What other combinations of these gaps exist—not limited to the programmatic questions above?
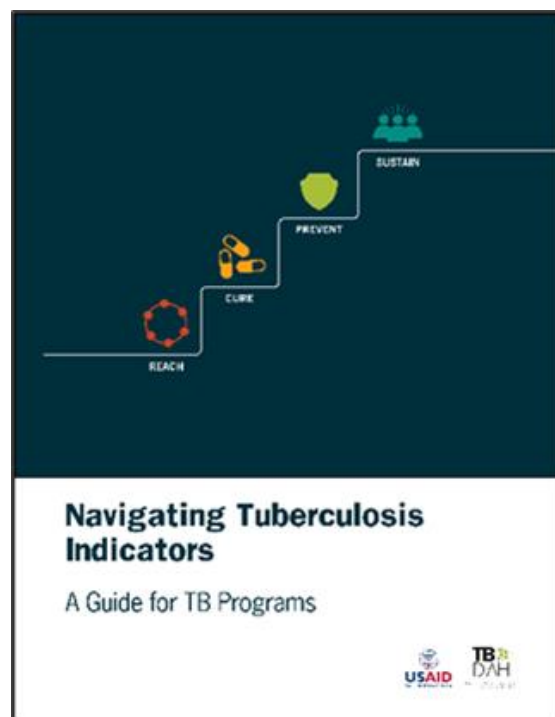
Indicator Guide

The PBMEF is part of an indicator guide that can assist with accurate and complete data collection. It includes the following resources:

- An introduction that articulates the purpose of the guidance and an overview of the TB Accelerator and TB Roadmap

- The PBMEF indicators, with an overview and description of the core and extended indicators

- Guidance on how to report the core and extended indicators

- Full indicator reference sheets for the 10 core indicators

- A package of TB cascades: DS-TB, DR-TB, TPT, contact investigations, and TB with co-morbidities

Reporting TB Data

Mission staff will report against the 10 core indicators via the TB DIAH Data Hub (the hub). This web portal is an interactive website that contains aggregate, national, and—eventually—subnational data dashboards for USAID priority countries. It serves as a tool for analysis of routine TB data for performance measurement and is a resource to optimize demand for, and inform, TB interventions, resources, and policies.

To access the hub, users will navigate to: **https://hub.tbdiah.org/form/usaid-tb-roadmap-core-indicators**

TB Indicator Guide

The hub is a one-stop-shop for TB data needs. It has the ability to interact with data, view trends, and compare data from other countries; view subnational and half-yearly data; clean data based on data validation rules and data quality checks within the hub; and export all data into Excel. TB DIAH can customize the hub to best meet specific TB data entry needs.