

# On-going Progress Update and Disbursement Request

## PROGRESS UPDATE PERIOD

|                                     |                             |
|-------------------------------------|-----------------------------|
| Grant number:                       | LSO-810-G08-T               |
| Progress Update - Reporting Period: | Cycle: 8                    |
| Progress Update - Period Covered:   | Beginning Date: 30-Sep-2014 |
| Progress Update - Number:           | 8                           |

Note: All programmatic indicators contained in the current Performance Framework should be listed, regardless of whether there are targets/results for the period covered by the Progress Update or whether the targets have been met in previous periods.

| B. Programmatic Indicators  |                                                      |                                                                                                                          |                     |                       |                   |                          |      |                         |                       |                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| Objective No.               | * Indicator No.                                      | Indicator Description                                                                                                    | Tied To             | Targets cumulative?   | Top 10 indicator? | Baseline (if applicable) |      | Intended Target to date | Actual Result to date | % achievement (Please calculate as appropriate) | Reasons for programmatic deviation from intended target and deviations from the related workplan activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                             |                                                      |                                                                                                                          |                     |                       |                   | Value                    | Year |                         |                       |                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| WP-1.1.3.3<br>Obj 1 Ind 1.1 | Improving diagnosis                                  | # of second line DST tests performed locally                                                                             | Current grant       | Y-cumulative annually | No                | 0                        | 2012 | 604                     | 0                     | 0%                                              | 604 DST tests were expected to be performed locally .The DST tests are done to find out which drugs the TB bacteria in a person are sensitive to, and therefore whether the person has got drug resistant TB. However these tests were not done during this reporting period. According to the NTP report, WHO and CDC conducted an assessment to determine the readiness of NTRL to perform second line DST. The assessment showed that further training is needed on the staff and a consultant from the supranational laboratory Uganda has been engaged from in October 2014, for a period of a month. The mandate of the consultant among others is to further assess training needs, review and operationalise standard operating procedures and sort samples for external quality assurance. The PR is yet to receive the assessment report on the above-mentioned findings. One issue which was also identified by the PR during the discussion with NTRL staff was that the samples for DST test are available as well as the reagents however the NTRL had prioritized samples of the on going DRS due to capacity issues. It is anticipated that the DST tests will be conducted from November 2014 following the capacity building by the consultant. One other thing which was of concern was that the reagents might expire if the DST tests are not done. It was however discovered that the reagents are in powder form have a longer shelf life. |
| WP-1.1.3.1<br>Obj 1 Ind 1.2 | Improving diagnosis                                  | % of laboratories showing adequate performance among those that received external quality assurance for smear microscopy | National Program    | Y-cumulative annually | No                | (6/17) 35.3%             | 2012 | 100%(17/17)             | 0%                    | 0%                                              | The Laboratory work at The National TB Reference Laboratory has been very intense due to the on going drug resistance survey. Therefore the Laboratory could not conduct supervision and EQA at peripheral laboratories. It is envisaged that in the next reporting period data collection of DRS would be completed and laboratory staff will be able to conduct the EQA as required. Preparations for conducting the EQA for the next reporting period have already been concluded and they are scheduled to commence in November 2014. Reporting on the indicator will be done in the coming reporting period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| WP 1.2.1.1<br>Obj 1 Ind 1.3 | Patient support                                      | # of MDR-TB patients receiving treatment adherence food packages                                                         | Current grant       | N-not cumulative      | No                | 208                      | 2012 | 198                     | 254                   | 128%                                            | During the reporting period April-September, 254 MDR-TB patients received treatment adherence food packages at least once. This translates into 128% of the target. Food packages for the patients serve two main purposes; firstly they improve the nutrition status of the patients since some of them are severely malnourished. They also act as powerful adherence enablers. This is because the MDR drugs have serious side effects like irritation of the mucosal, especially Para Amino Salicylic Acid and Prothio which need the patient to take meals at three hour intervals.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| WP 2.1.1.1<br>Obj 2 Ind 2.1 | Procurement and supply management (first line drugs) | Percentage of 2nd line anti-TB drugs in stock in the last six months                                                     | GF and other donors | N-not cumulative      | No                | 100%                     | 2012 | (5/5)100%               | (5/5)100%             | 100%                                            | During the reporting period all five Anti-TB drugs were available. Therefore there was no stock out of any drug. The five 2nd line anti- TB drugs Kanamycin/capreomycin, Moxifloxacin/Levofloxacin, Ethionamide, PASER and Cyloserine. The availability of drugs demonstrate that new patients will be put on treatment on time while patients currently on treatment will continue to have their drugs on monthly basis when it is time to refill.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| WP 1.1.4.3<br>Obj 2 Ind 2.2 | Multi drug resistant TB( MDR-TB)                     | # and % of new laboratory confirmed MDR-TB patients enrolled in 2nd line anti-TB treatment                               | Current grant       | Y-cumulative annually | Yes - Top 10      | 81                       | 2012 | (144/144) 100%          | (127/131)96.8%        | 97%                                             | 63 new patients were enrolled from April to September 2014. Out of the 63, 61 were laboratory confirmed. Two patients were treated based on clinical observation and past history. Out of the 68, 66 were laboratory confirmed between Oct13-March 2014,two patients were treated based on clinical observation and past history. The total number of patients is therefore 131 and those who were laboratory confirmed was 127. This translates into 97% of the patients enrolled on treatment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

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| Obj 2 Ind 2.3                    | High Risk Groups  | % of prisoners screened for Tuberculosis                                                                       | National Program    | N-not cumulative      | Yes - Top 10 | (686/2480)27.7%     | 2012 | 50%(1240/2480)   | (1754/3125)55%   | 110% | The National TB Programme is implementing the 3Is strategy, one of the Is being intensified case finding (ICF) especially in congregate settings. TB screening of inmates in Correctional Services is done routinely. During the reporting period TB screening of inmates was conducted in the correctional institutions of Berea, Mokhotlong, Outhing, Mahale' hoek, Maseru, Qacha's nek and Leribe and Botha Buthe and Thaba Tseka. Mafeteng Correctional Services was undergoing renovations and all inmates were transferred to other institutions. There were 3125 inmates reported for the period April to September 2014, out of which 1754 were screened for TB.                                                                                                                                                                                                                                                                                             |
| Obj 2 Ind 2.4                    | High Risk Groups  | # of contacts of MDR-TB patients screened for TB                                                               | GF and other donors | Y-cumulative annually | No           | 0                   | 2012 | 432              | 488              | 113% | During the period October to March 2014, 248 MDR-TB patients' contacts were screened for TB and during the April to September 2014 period 240 MDR -TB patients contacts were screened for TB this translates to 488 which is 113% of the target. According to the national guidelines all contacts of MDR-TB patients are screened for TB. This is done to reduce the risk of infection among the family members as well as the community where they are staying.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| WP 2.3.4.1-2.3.4.2 Obj 2 Ind 2.5 | Infection Control | # and % of facilities reporting no stock out of personal protection consumables on the last day of the quarter | Current grant       | N-not cumulative      | No           | 0                   | 2012 | (4/4) 100%       | (3/4)75%         | 75%  | Leribe Hospital, Mokhotlong Hospital and Botsabelo MDR Hospital had adequate stock of N95 masks in their pharmacy store in the months April to September 2014 however Mahale's Hoek Hospital reported out of stock of N95 masks in the last day of July, August and September 2014. There were challenges related to supply chain management which resulted in delay in ordering of the N95 masks by the affected facility and this will be addressed in the next reporting period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Obj 2 Ind 2.3                    | TB/HIV            | Proportion of TB patients who received testing and counseling and know their results                           | National Program    | Y-cumulative annually | Yes - Top 10 | (10445/12616) 82.8% | 2011 | (9045/9858)91.8% | (6819/7354)92.7% | 101% | From January to March 2014, 2412 cases were notified and 2190 tested for HIV. 2444 cases were notified and 2309 patients tested for HIV. From July to September 2014, 2498 cases were notified and 2320 people tested for HIV. The cumulative figure of cases notified is 7354 and 6819 and this translates into 92.7% of the total cases. The indicator covers all TB patients with known HIV positive status as well as those tested at the TB clinic. TB patients have high rates of HIV co infection in settings with high HIV prevalence. In these settings, ensuring that TB patients receive HIV testing and counseling services should be a high priority. Knowledge of HIV status enables HIV positive TB patients to access the most appropriate HIV prevention, treatment, care and support services. And this reduces morbidity and mortality among people living with HIV. Currently the performance on the indicator is well compared with the target. |
| WP 3.2.1.3 Obj 3 Ind 3.1         | Community TB Care | # of community treatment supporters receiving incentives                                                       | Current grant       | N-not cumulative      | No           | 205                 | 2012 | 198              | 268              | 135% | For the reporting period, 268 treatment supporters were provided with incentives at least once and this translates into 111% of the intended target. The variance between the number of patients(254) that received food packages and the number of treatment supporters who received incentives was mainly due to patients who were hospitalized just days before the food pick up date but their treatment supporters duly received incentives. The incentives are provided to the supporters for the role they play in the care of MDR-TB patients. Part of their responsibilities include the assisting the patient to take drugs as required, accompanying the patient for the regular checkups at facilities and provision of on-going counseling to the patient.                                                                                                                                                                                              |
| Obj 2 Ind 2.3                    | TB/HIV            | Proportion of HIV positive TB patients on ART                                                                  | National Program    | Y-cumulative annually | Yes - Top 10 | (3189/7954) 40.1%   | 2011 | (4287/7146)60%   | (3586/5023)71.3% | 119% | In Q1 the number TB patients who tested for HIV was 2190 and 1584 of them were HIV positive 1167 of them were put on ART. In Q2 2309 TB patients tested for TB , 1687 of them were HIV positive and 1163 were put on ART. 2320 TB patients received HTC and 1752 were HIV positive and 1256 were put on ART. This indicator is intended to measure ART uptake in among the TB patients. From Q1-Q3 the number of TB patients who tested for HIV is 6819 and 5023 tested HIV positive and 3586 of them were put on treatment. Antiretroviral therapy significantly improves the quality of life, reduces morbidity and enhances the survival of people with advanced HIV infection or AIDS. Performance on this indicator has been improving over time, coverage was around 40% in 2009 but is now over 70% and this is commendable.                                                                                                                                  |
|                                  |                   |                                                                                                                | Select              | Select                | Select       |                     |      | -                | -                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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\* Indicator No. should correspond to the indicator number listed in the approved Performance Framework of the grant (1.1, 1.2, etc.)

**C. Analysis of data quality and reporting issues**

(1) This section should contain (1) a summary of issues related to data quality and reporting on programmatic indicators, and any relevant issues which are not covered in 'Reasons for programmatic deviation', and (2) remedial actions that are underway or planned to address these issues.

The programmatic performance of this grant is tracked using 11 output indicators. All the indicators were due for reporting in this semester. The overall performance is good; with 7 indicators achieving at least 100% of the target, 2 other indicators achieved 75% and 97% respectively. However, there were no results reported for two indicators; (0%). Performance of EQA on the laboratories is still lacking behind and during the reporting period the low performance has been due unavailability of lab staff from the NTRL as they were still engaged on the Drug Resistance Survey currently on going. Furthermore DST tests were not because of capacity issues identified by WHO and CDC. It is envisaged that the current technical assistance from the supranational laboratory of Uganda will built the required capacity to enable the NTRL to conduct DST tests routinely.