REPORT OF FIELD VISIT TO TB SURVEY CLUSTER IN SIEM REAP:
Sun 31st Jul to Wed 3rd Aug 2011

Visiting Team:
• Dr. Lorena Espinoza, South Africa
• Dr. Dina Bisara Lolong, Indonesia
• Dr. Osahon Ogbeiwi, Nigeria
• Mrs. Rhoda P. Banda, Malawi
• Dr. Frank Bonsu, Ghana
• Dr. Deus V. Kamara, Tanzania (Team Lead)
• Dr. Patrick Migambi, Ruwanda

Team Supervisor & Guide:
• Dr. Saint Saly, CENAT
FIELD VISIT TEAM MEMBERS
Acknowledgement:
DETAILS OF SURVEY CLUSTER VISITED

• CLUSTER NUMBER: 02

• LOCATION:
  - Village - Sala Kansaeng
  - Community - Suay Dankum
  - Province - Siem Reap
  - District - Siem Reap
VISIT ITINERARY

DAY 0 – Sunday 31/07/2011
• Arrival at survey cluster town: 14.30
• Survey Team Preparatory Planning Meeting: 16.00 – 18.00

DAY 1 – Monday 01/08/2011
• Enumeration & Census exercise: house to house visits: 08.00 to 12.00

DAY 2 – Tuesday 02/08/2011
• Screening Exercise: 07.00 – 17.00

DAY 3 – Wednesday 03/08/2011
• Departure from Cluster town: 09.00
GENERAL OBSERVATIONS I

- There was evidence of effective communication between the survey team, the local leaders and the community: the meeting was held as planned. Attendance on schedule, the survey participants invited – good turnout = PARTICIPATION RATE HIGH!

- The organization of the field work was well structured and ordered execution

- Active participation/engagement between team leader, survey team and the community, everyone understood his role in the survey team

- Language was a barrier for us, but we managed to negotiate through.
GENERAL OBSERVATIONS II

• Communication is important for success of the field work
• Pre-visits was important to make contact and establish communication with the community
• Adequate planning and preparation necessary for successful screening exercise.
• Good supportive survey team leadership - support to the survey team members
KEY LESSONS FROM DAY 0

• Preparatory / planning meeting was conducted with local leaders and local health workers at the field survey site
• Checking of the updating cluster household map and the household registry list already prepared
• Allocation of the households to the 4 teams of enumerators to complete census in Day 1.
• Defining the borders of the household blocks BY ROADS
• Discussed the issue of logistics and finalised the arrangement and organisation of the census and screening exercise, noting what should be when limitations of rain, etc happen
PLANNING MEETING BEGINS
CLUSTER MAP OF HOUSEHOLD BLOCKS
ALLOCATION OF ROLES & HOUSEHOLDS
LESSONS FROM DAY 1

• Pasting the numbers on the household was done by one person early the same day and left the household registers with the household before the census enumeration team visited the numbered houses

• Commitment of the survey team to complete the census despite the rain – work continued even in the difficult weather

• Activities were properly sequenced: pasting the numbers first, then visit by the enumerators, who interviewed at least one adult in each household and issued one invitation card per household with all eligible adults listed on it, marking the household number to avoid double visits before exiting the building

• Some households were missed by the community members who did the enumeration, it was countered checked and corrected by the survey team – numbering of household done during census visit by the enumerators
LESSONS FROM DAY 1 (cont’d)

• The survey team had the appropriate uniform or clothing for the weather – they were prepared for the wet weather condition
• The household numbers are pasted in visible and areas out of reach to children and used methods appropriate for the type of building
• Effective pre-visit advocacy: the survey team members were welcome in every home – no resistance to household numbering and visit to compounds (even the dogs did not bark at visitors!)
• Never ran out of stationary – adequate. Had the glue, papers, markers, pens and instrument – logistic preparation adequate and appropriate
HOUSEHOLD NUMBERS
– BEFORE & AFTER CENSUS
DIFFERENT STROKES FOR DIFFERENT HOUSES!

Number on a thatch house

Number on concrete house
CENSUS INTERVIEWS

Team leaders were involved

Team members were involved
INCENTIVES - Exercise book with survey message given to each child!
APPROPRIATE CLOTHING

FOR TEAM MEMBERS

FOR TEAM LEADERS
CHALLENGES OF WEATHER

WORKING IN THE RAIN!

IMPASSABLE ROADS
LESSONS FROM DAY 2

• All 13 TB suspects were identified from X-ray screening and not from symptoms: suggests X-ray screening > symptomatic screening: symptom screening less effective

• Organisation – setup timely, arrangement of participant flow well organised and availability of equipment and logistics for the screening exercise – no shortages, no apparent operational problems

• Use of two 5 KVA generators to run electricity supply to the X-ray equipment and the screening camp

• The laboratory section complete with a dark room, dressing/changing place, X-ray caution signs and barriers and protection for radiographers
LESSONS FROM DAY 2 cont’d

• Use of volunteers to move the subjects and the survey instrument
• Use pre-printed serial numbers as labels for sputum sample containers and laboratory forms, and pre-printed serial page numbers for filing of batches of x-ray films
• The team leader check both data instruments and keeps an eye on the x-ray reading before deciding on who is sent to the sputum collection desk
• A lot of paper work to register the same subjects at the different screening desks: reception register, x-ray register, lab register
• Gifts given to participants on exit from the screening exercise
Setting up the screening camp

The Survey Banner

The Survey Camp
Survey Equipment

Generators

Rented furniture
Survey Equipment
Survey Equipment

X-ray machine & chest stand    X-ray changing ‘room’
Survey Equipment

Interview desk

Sputum collection desk
Survey Equipment

Radiography desk & DARK ROOM

X-Ray Film Reader’s desk
Survey Equipment

Team Leader / Thank you gift

Data checker’s desk & Serial numbering machine
SCREENING PROCESS

1. IV card submitted and waiting

2. Reception: confirmation of eligibility
SCREENING PROCESS

3. Signing the consent form

4. Interview: symptomatic screening
SCREENING PROCESS

5. X-ray reception desk and waiting to be called

6. Chest Radiography
SCREENING PROCESS

7. X-ray film processing and printing: dark room

8a. X-ray registration and reading
SCREENING PROCESS

8b. CxR film: Careful Screening for pulmonary abnormalities

9. A Thankful Exit where no symptomatic or radiographic abnormalities
SCREENING PROCESS

10. Laboratory desk for sputum collection: where TB is suspected

11. Post screening: Data storage and serial numbering by Team Leader
THE ACE – VOLUNTEERS: facilitating movement at every stage

The Blue man at the waiting area

The Blue man at the reception
THE ACE – the volunteer

The Blue man at the Interview desk

The Blue man when all is done
CHALLENGES

• 1-2 households were not in the household lists: cross-checking during census was done
• Bad weather - It was raining and pouring cats and dogs: effect on participant turn-out
• A lot of paper work to register the same subjects at the different screening desks: reception register, x-ray register, lab register: extra burden?
• Language / communication difficulties for visiting team: limited direct interaction with survey team
• No rain boots for movement in flooded areas: could slow movement of survey team during census
• Possibility of X-ray – reading misses: any chance for second opinion in the field?