



NATIONAL PLAN FOR ACCELERATED ACTIONS FOR ENDING TB: 2021-2025



World Health
Organization
Timor-Leste

National Plan for Accelerated Actions for Ending TB: 2021-2025

Executive Summary

The National Plan for accelerating efforts to End TB 2021-25 is drawn from the National Strategic Plan (NSP) for Ending TB developed through a country led process using the person-centered framework of TB programming with support from WHO. The NSP takes into account the recommendations made during the 2019 TB External Review Mission, and contains strategies and interventions based on the principles outlined in WHO's End TB Strategy.

The action plan 2021-25 to End TB by 2025 emphasizes on accelerating bold and ambitious actions identified in NSP, especially through intensified screening and outreach measures to circumvent the COVID-19 effect are much needed.



The total 5 years TB NSP budget is \$52.34 million, and in order to accelerate actions towards ending TB, much higher investments would be needed.



PILLAR I: INTEGRATED, PATIENT-CENTRED CARE AND PREVENTION

OBJECTIVE 1: Detect at least 90% of incident cases by 2025 (Finding missing TB cases by accelerating the intensified TB case finding or ICF efforts through better community response and engagement)

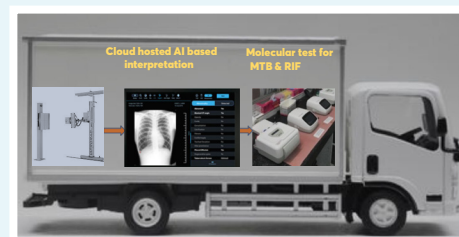
Detect at least 90% of incident cases by 2025 (Finding missing TB cases by accelerating the intensified TB case finding or ICF efforts).

STRATEGIC INTERVENTION 1:

Active case finding at high OPD load health facilities

Accelerated Actions:

- Increasing presumptive TB examination from 1 to > 5% across all high OPD load health facilities and IPC measures by ‘Triaging’
- Strengthening referral and feedback mechanisms across different levels
- Strengthening contact evaluation and investigations among diagnosed TB cases
- Enhanced TB screening using “One Stop fully equipped Mobile TB Diagnostic Van”



STRATEGIC INTERVENTION 2:

Active case finding among vulnerable population for TB and Latent TB Infection in the community:

Accelerated Actions:

- Nation-wide community-based house to house TB vulnerability assessment to identify people at high risk for developing TB. This approach will ensure systematic TB screening among targeted high-risk population
- Identifying individuals with these multiple risk factors and encouraging them to undergo periodic TB screening and close monitoring

- Digitalizing the data entry by using ‘Mobile Vulnerability Assessment for TB (VAT) Application’ and GIS based dashboard system using DHIS2
- Application of portable digital X-ray screening tools with computer aided detection (CAD) or Artificial Intelligence (AI)
- Provision of TB Preventive Therapy (TPT) to the eligible population

STRATEGIC INTERVENTION 3:

Implementation of revised national TB diagnostical gorithm

Accelerated Actions:

- Phased implementation of Universal Drug Susceptibility Testing (U-DST) for all TB patients and incremental use of molecular diagnosis for TB especially for high risk and vulnerable population (Children, Elderly, Diabetics, PLHIV, Cases detected through active case finding etc.)



- Strengthening specimen collection and transportation (SC&T) within the municipalities to the GeneXpert Sites and from the municipalities to National TB Reference Laboratory

STRATEGIC INTERVENTION 4:

Advocacy and community-based TB awareness response

Accelerated Actions:

- Intensified advocacy and communication about TB by establishing multi-sectoral coordination mechanism at national and municipality levels - National and Municipality Task Force in line with the multi-sectoral sectoral accountability framework for TB (MAF-TB)
- Engaging community-based church network and catholic schools; mother support groups; and intensified social mobilization and partnership activities through youth groups

OBJECTIVE 2 : Ensure successful treatment for more than 90% of the enrolled TB patients by 2025, and improve management of Drug Resistance TB (DR-TB) cases through country-wide implementation of the shorter DR-TB treatment regimen

STRATEGIC INTERVENTION 1:

Patient support system with improved monitoring.

Accelerated Actions:

- Providing financial support to all DR-TB and transportation allowance to all TB patients;
- Ensuring timely payments of honorariums to the treatment supervisors and counselling support

STRATEGIC INTERVENTION 2:

Decentralization of DOT services with community engagement

Accelerated Actions:

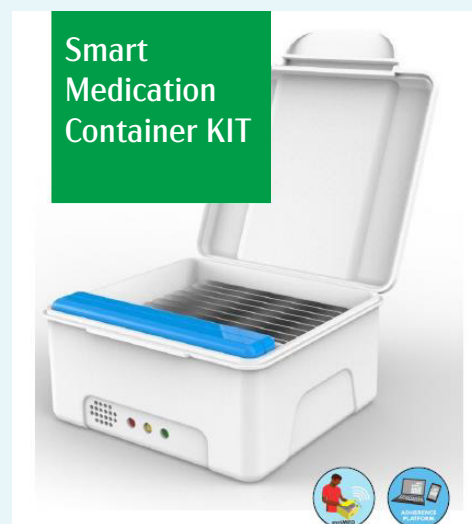
For those who are residing at hard-to-reach areas by provision of Family DOT, and for DR-TB patients on all oral shorter DR-TB Regimen

STRATEGIC INTERVENTION 3:

IT enabled adherence system

Accelerated Actions:

For those who are residing at hard-to-reach areas by provision of Family DOT, and for DR-TB patients on all oral shorter DR-TB Regimen



STRATEGIC INTERVENTION 4:

Strengthening logistic system for monitoring first- and second-line drugs

Accelerated Actions:

Accelerated Action: Integrating LMIS data tracking into the DHIS2 platform



PILLAR II: BOLD POLICIES AND SUPPORTIVE SYSTEMS

OBJECTIVE 3 : Provide DR TB diagnostic services for 100% of the estimated persons with presumptive DR TB by 2025; successfully treat at least 90% of the diagnostic MDR patients

STRATEGIC INTERVENTION 1:

Strengthening specimen collection & transportation (SC&T) mechanism

Accelerated Action:

SC&T to nearest GeneXpert, and Culture & DST sites

STRATEGIC INTERVENTION 2:

Establishment of TB molecular diagnostic services

Accelerated Action:

To establish GeneXpert Network, Line Probe Assay (LPA) & C&DST facility by end of 2021



STRATEGIC INTERVENTION 3:

Accelerated Action: Scale-up of DR-TB services at regional hospitals to improve access, followed by ambulatory treatment on all oral DR- TB regimen

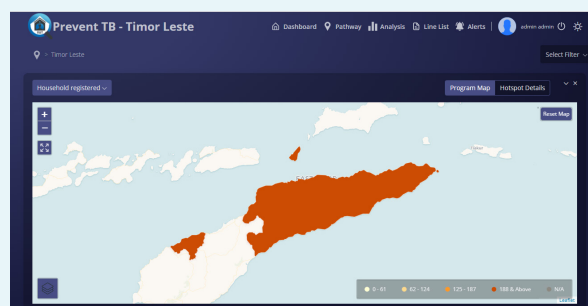
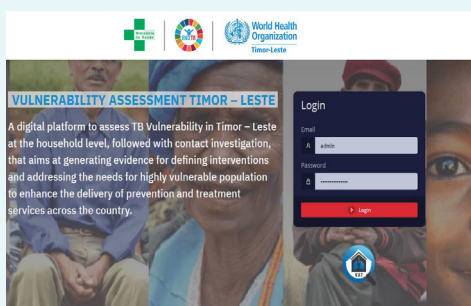
OBJECTIVE 4 : Timely and accurate recording and reporting from all of reporting centers by 2025

STRATEGIC INTERVENTION 1:

Case based electronic recording and reporting system using DHIS2

Accelerated Action:

To initiate sub-municipality reporting units for case-based notification, and strengthen referral and feedback mechanism



OBJECTIVE 5 : Availability of quality TB services, and provided by qualified and trained personnel at 100% by 2025

STRATEGIC INTERVENTION 1:

Ensure adequate technical support

Accelerated Action:

Technical support by continuation of long-term collaboration with WHO

STRATEGIC INTERVENTION 2:

Capacity building of >50% clinical and 100% of other staff at each health facility

Accelerated Action:

Introduction of International Standard of TB Care across all health facilities and monitoring

OBJECTIVE 6 : Scale up patient support system to all TB patients including drug susceptible (DS) TB with an intent to reduce catastrophic cost at least by 100% by 2025

STRATEGIC INTERVENTION 1:

Patient support system to be expanded

- Provision of 150 US\$ per month for 6 months to each DS-TB patient, and for 12 months for DR-TB patients as per the TB Pension Scheme
- To provide food basket to each TB and DR-TB patient (Rice, pulses, oil, milk and eggs) on monthly basis
- To provide counselling and rehabilitation support
- Use of IT for ensuring treatment adherence



PILLAR III: INTENSIFIED RESEARCH AND INNOVATION

OBJECTIVE 7 : Ensure adequate support for operational research to foster innovation

STRATEGIC INTERVENTION 1:

Ensure adequate support for operational research to foster innovation

Accelerated Action:

To conduct Operational Research (OR) skill building workshops for in-country researchers (Similar to WHO endorsed SORT IT courses).

