Georgia National TB Strategic Plan (NSP) 2016-2020

# Proposed outline, Goal, Objectives and Targets, Strategic Interventions

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# Background

- *Global strategy and targets for tuberculosis prevention, care and control after 2015* approved by the World Health Assembly (May 2014)
- Development of robust NSPs for TB is actively encouraged by WHO and other partners
- The Global Fund 'mandates' the availability of <u>costed</u> NSPs for NFM applications
  - Georgia: TGF's new requirement in the TB Grant Agreement (16 December 2014): 'to deliver the National Tuberculosis Strategy, approved by relevant government bodies' by 31 March 2015
- Georgia: National TB plans 2007-2011 and 2013-2015
- NSP development process
  - Technical Working Group (TWG) on TB NSP and Concept Note development set up by the CCM
  - Two meetings of TWG took place (18 December 2014 and 23 January 2015)
  - Technical assistance to TWG and CCM is provided by USAID (TB Advisor, URC TPP)

#### Draft post-2015 Global Tuberculosis Strategy Framework (1)

- Vision: a world free of TB zero deaths, disease and suffering due to TB
- *Goal*: end the global TB epidemic
- *Milestones* for <u>2025</u>:
  - 75% reduction in TB deaths (compared with 2015);
  - 50% reduction in TB incidence rate (less than 55 TB cases per 100 000 population)
  - No affected families facing catastrophic costs due to TB

#### • *Targets* for <u>2035</u>:

- 95% reduction in TB deaths (compared with 2015)
- 90% reduction in TB incidence rate (less than 10 TB cases per 100 000 population)
- No affected families facing catastrophic costs due to TB

### Principles:

- Government stewardship and accountability, with monitoring and evaluation
- Strong coalition with civil society organizations and communities
- Protection and promotion of human rights, ethics and equity
- Adaptation of the strategy and targets at country level

#### Draft post-2015 Global Tuberculosis Strategy Framework (2)

#### **Pillars and Components**

#### **1.** Integrated, patient-centered care and prevention

- A. Early diagnosis of TB including universal DST; and systematic screening of contacts and high-risk groups
- B. Treatment of all people with TB including DR-TB tuberculosis; and patient support
- C. Collaborative TB/HIV activities, and management of co-morbidities
- D. Preventive treatment of persons at high risk and vaccination against TB

#### 2. Bold policies and supportive systems

- A. Political commitment with adequate resources for TB care and prevention
- B. Engagement of communities, civil society organizations, and public and private care providers
- C. Universal health coverage policy, and regulatory frameworks for case notification, vital registration, quality and rational use of medicines, and infection control
- D. Social protection, poverty alleviation and actions on other determinants of TB

#### 3. Intensified research and innovation

- A. Discovery, development and rapid uptake of new tools, interventions and strategies
- B. Research to optimize implementation and impact, and promote innovations

# Proposed framework for the Georgian TB NSP 2016-2020 (1)

#### Goal

• to decrease the burden of tuberculosis in Georgia and its impact over the overall social and economic development in the country, by ensuring universal access to timely and quality diagnosis and treatment of all forms of TB, which will decrease illness and death and prevent further development of drug resistance.

#### *Targets* (by 2020), compared to baseline (2013 or 2014)

- Reducing TB mortality rate by at least **25%**
- Reducing TB incidence rate by at least **15%**
- Maintaining the proportion of MDR-TB among new cases under **15%** and among previously treated TB cases under **40%**
- Ensuring universal access to diagnosis and treatment of all forms of TB, including M/XDR-TB, so that:
  - At least **90%** of estimated MDR-TB cases are diagnosed, and
  - At least **70%** of all notified MDR-TB cases are successfully treated



#### Proposed framework for the Georgian TB NSP 2016-2020 (3)

#### **Overall structure**

- 1. Introduction
- 2. The burden of tuberculosis in Georgia
- 3. Achievements and challenges of tuberculosis control
- 4. Goal, Principles, Objectives and Targets
- 5. Components of the National Strategic Plan
- 6. Implementation responsibilities
- 7. Financing of TB control interventions
- 8. Indicators for monitoring implementation
- 9. Annexes
  - 1. Funding needs estimate for TB control
  - 2. Operational plan and budget
  - 3. Technical assistance plan
  - 4. Monitoring and Evaluation Plan

#### Proposed framework for the Georgian TB NSP 2016-2020 (4)

#### **Objectives**

- 1. To provide universal access to early and quality diagnosis of all forms of TB including M/XDR-TB
- 2. To provide universal access to quality treatment of all forms of TB including M/XDR-TB with appropriate patient support
- 3. To enable supportive environment and systems for effective TB control

Proposed framework for the Georgian TB NSP 2016-2020 (5)

#### Strategic Interventions (by Objective)

# **Objective 1.** To provide universal access to early and quality diagnosis of all forms of TB including M/XDR-TB

- 1.1 Rollout of rapid molecular diagnostic technologies at peripheral service level
- 1.2 TB diagnostic investigations at regional and national level
- 1.3 Contacts' investigation, screening and active case finding for TB among high-risk groups including people living with HIV
- 1.4 Support to operations of the laboratory network

#### Proposed framework for the Georgian TB NSP 2016-2020 (6)

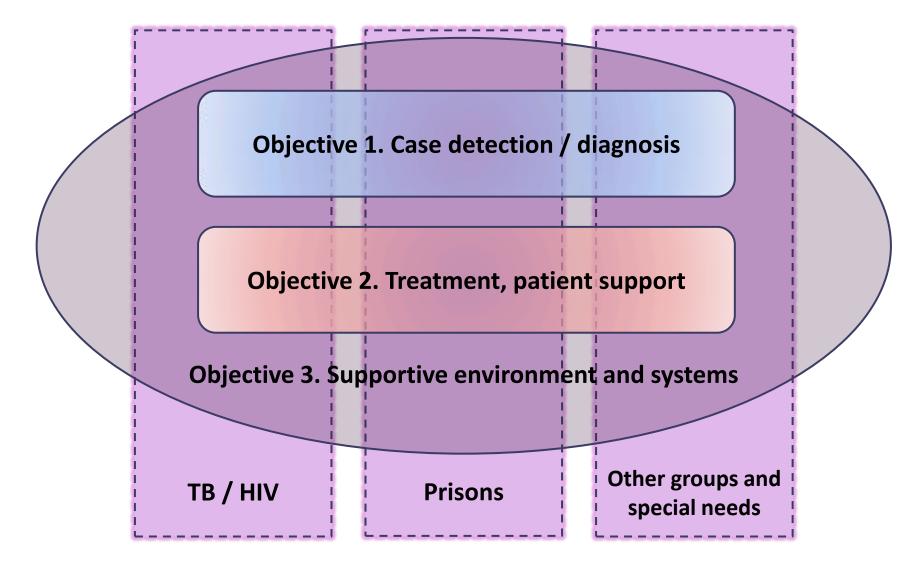
# Objective 2. To provide universal access to quality treatment of all forms of TB including M/XDR-TB with appropriate patient support

- 2.1 Supply of anti-TB drugs and drug management system
- 2.2 Patient support to improve adherence to TB treatment
- 2.3 Treatment monitoring, management of co-morbidities and adverse drug reactions
- 2.4 TB infection control in health care facilities
- 2.5 Preventive treatment and vaccination against TB
- 2.6 Support to operations of TB treatment institutions

#### **Proposed framework for the Georgian TB NSP 2016-2020 (7)** Objective 3. To enable supportive environment and systems for effective TB control

- 3.1 Improving the health system performance for TB control
- 3.2 Strengthening NTP management capacities
  - Strengthening NTP governance and management at central and regional level
  - Strengthening capacities for TB control in the penitentiary system
  - Strengthening capacities for management of HIV-associated TB
- 3.3 Supervision, monitoring and evaluation of the National TB Program
- 3.4 Capacity building of medical staff for TB control
- 3.5 Civil society engagement in the implementation of innovative patient-centered community-based approaches for improving TB case detection and treatment outcomes
- 3.6 Advocacy, communication and social mobilization (ACSM) for effective TB control
- 3.7 Addressing legal and ethical issues of TB control
- 3.8 Research on priority issues of TB control

Proposed framework for the Georgian TB NSP 2016-2020 (8)



## **TGF investment priorities for TB in EECA**

- **1.** Promote universal access to timely and quality diagnosis of all forms of TB, including M/XDR-TB
  - Expand the use of new diagnostic technologies
  - Ensure proper internal and external quality assurance systems in TB laboratories
  - Improve tracing and management of TB and M/XDR-TB contacts and infection control
- 2. Promote universal access to quality treatment of all forms of TB, including M/XDR-TB
  - Ensure uninterrupted supply of quality-assured medicines
  - Implement patient-centered approaches for improving treatment outcomes
  - Address TB/HIV co-infection through integrated care and joint strategies

#### Special attention to: migrants, prisoners and ex-prisoners

## Key challenges to address in the new NSP

- NTP governance and management (at central and regional level)
- Alignment and integration with the overall health system transformation processes (UHC, public / private mix)
- Diagnostic strategy and laboratory network: vision and actions for the next 5 years (including rollout of rapid molecular diagnostics to peripheral level)
- Programmatic and financial takeover by the country from TGF, including
  - Anti-TB drugs (including new drugs for M/XDR-TB treatment)
  - Laboratory investigations for TB and DR-TB
  - Patient support measures (incentives, enablers)
  - Supervision, M&E system, training and other essential NTP activities
- TB/HIV collaboration
- Involvement of non-state actors / civil society / communities