Formulating an approach to differentiated care and support for priority populations

THALI formulated an approach to patient care and support which will prioritize the needs of seven vulnerable populations at risk of poor treatment outcomes through a tailored package of services. These patients will be identified through the Risk and Needs Assessment conducted by the Community Health Workers (CHWs). This Differentiated Care Model (DCM) offers intensive treatment monitoring, follow-up and counselling, through which THALI aims to push successful treatment outcomes over the 90 percent mark.

THALI targets seven categories of patients through its differentiated care model.

- Elderly patients over 65 years of age
- Patients who are living alone
- Patients who were treated previously, and had taken medication (irregularly)
- Patients consuming alcohol
- Patients co-infected with HIV
- Patients with diabetes
- Patients in rehabilitation

Linkages to chronic care centres initiated

THALI is attempting to link patients who need ingpatient care to chronic care centres in Bengaluru where they can receive nursing and nutritional support. The program staff linked two patients whose families were unable to provide them care and nutritional support to a chronic care centre, and is planning to identify other chronic care centres to which other vulnerable patients may be referred. The team plans to enter into formal MoUs with chronic care centres in the coming months and is discussing the formalization of the linkages between these centres and the RNTCP so that support services are continued.

Patient Care and Support Initiatives

CHWs in Bengaluru and Telangana were trained on the concept of the DCM, the criteria for enlisting patients, and types of activity to be done for each category. They were also trained in counselling skills to help these ‘difficult cases’ adhere to treatment. 130 project staff were trained on DCM in Bengaluru, and 68 in Telangana. Training for the remaining staff in Andhra Pradesh will be done in January.

Role plays on counselling skills were conducted during the DCM workshops

Nutrition support from faith-based organizations

THALI CHWs engaged with the Pyramid Spiritual Society, a faith-based organization, to provide nutritional support to TB patients in Visakhapatnam, Andhra Pradesh. The Society is supporting 10 patients for a month, while the team meets other donors to mobilise support for the rest of their treatment period and for additional patients.

Sustainability Initiatives

Engaging with Community Structures

ToTs and trainings on the community structures approach

Training of Trainers (TOT) workshops were held in Karnataka and Telangana to create conceptual clarity on working with community structures among the Zonal Coordinators and Community Coordinators. The team emphasized the need to have sustainable structures at the grass root level that can continue patient-centred care and support efforts beyond the project period, in alignment with the RNTCP’s principles. The strategy focuses on engaging with existing group-driven, context-specific and representative community structures that can potentially expand their scope to include TB activities in communities. Participants of the workshop identified various community structures with which they could associate to continue the program’s approach to prevention, care and support such as self-help groups, slum associations, labour unions, faith-based groups and Youth Associations.

CHWs were then trained on identifying community structures and enabling them to support TB control efforts.

Exploring associations with community structures

The THALI team conducted several meetings with various community structures to explore the possibilities of associating with them for TB control activities that may be sustained beyond the project period. In Krishna district in Andhra Pradesh, 40 members of an auto rickshaw union participated in a meeting during which CHWs explained how they could be included in supporting their communities to make their localities TB-free. The union agreed to CHWs attending official meetings to further discuss their participation in TB control activities. The teams also met with self-help groups, youth groups, slum development committees, municipal workers, and religious groups across the different zones in three states.

Creating a community of patient advocates

KHPT organized an orientation program for potential patient advocates on December 21 in Bengaluru. The meeting was attended by 24 patients and four caregivers, who were sensitized on THALI’s community engagement activities, the importance of patient advocates and the advantages of having them support TB control efforts in the community. Three patients stepped forward and declared that they were ready to speak openly about TB to different stakeholders, and help prevention activities. The other patients said that they were willing to begin sharing their experiences in patient support group meetings. These patient advocates will begin their journey with the motivation of other patients in support group meetings.

Creating a community of patient advocates

A workshop on community structures with field staff in Hyderabad

The patient advocates’ meeting in Bengaluru

Government Engagement

Presentation of THALI approaches and activities in Bengaluru

At a meeting of the Karnataka State TB Division on December 12, the THALI team presented findings from the baseline studies conducted in Bengaluru. The state programme coordinator presented findings from the Risk and Needs Assessment (RANA) conducted by the CHWs. The State TB Officer and the District TB Officer of Bengaluru Urban agreed that RANA would be useful at the time of treatment initiation and suggested that the RANA form be attached to patients’ treatment cards. They requested that KHPT train RNTCP staff on the RANA process during their official monthly meetings.

The DCM was also presented at the meeting, and state officials said that Senior Treatment Supervisors and TB Health Visitors should be trained on counselling techniques in order to help them use the DCM. The State TB Division will develop a budget for the same and include it in the coming year’s Project Implementation Plan (PIP).

THALI innovations presented at Karnataka regional review meeting

Innovations and best practices of the THALI programme, including satellite training of ASHAs, the TB Careline, and the Specimen Collection and Transportation system were presented at the RNTCP Regional Review Meeting [Southern Region] from November 19-20. THALI’s approach to engaging with community structures and its RANA activities were appreciated by state officials at the event.
After they (CHWs) told us about cough hygiene, I realized immediately access data from patient visits and the improved monitoring of data. The mobile application. The application was tested on the field, and patient data was synced in November, all THALI CHWs were trained to collect patient follow-up data using a PCS mobile application rolled out.

St John's conducts ToTs for medical colleges in Karnataka

THALI offers technical expertise for trainings

The THALI technical team participated as resource persons in four PMDT trainings conducted for Medical Officers in Bengaluru Urban through the National Tuberculosis Institute, and during two Continuing Medical Education sessions of the Joint Effort for Elimination of Tuberculosis (JEET) project.

Capacity building on counselling for RNTCP staff

KHPT organized a ToT on counselling skills in the last week of October in Bengaluru with the aim of enabling RNTCP staff to better engage with patients as they offer care and support services. Nine RNTCP staff, including Senior Treatment Supervisors and TB Health Visitors, participated in the three-day training.

Monitors the collection of patient follow-up data using a mobile application. The application was tested on the field, and patient data was synced to a live server in December, allowing the monitoring and evaluation (M&E) team to immediately access data from patient visits and the improved monitoring of data.

Data quality assessed in Bengaluru

The M&E team assessed data quality and flow at different levels during a three-day Data Quality Audit from November 19-22. The team visited the field, interacted with service providers, patients and field staff, and verified data collection and reporting mechanisms.

Community Initiatives

From school students to TB Champions

THALI’s program team in Bengaluru piloted an innovative approach to the sensitization of school students on TB, using a ‘Child-to-Child’ concept which aims to create TB champions in the community. THALI staff liaised with one school, engaging 35 students in the eighth grade for 45 minutes each week over a month-long period. The children were oriented on TB through cultural activities and arts, and went on to sensitize older students in the ninth and tenth grades, as well as their families, on the symptoms, treatment for and prevention of TB. This transfer of knowledge is expected to continue in the community even during active case finding activities.

Empowering patients to be outspoken leaders and advocates for TB control

Divya is a slightly-built 18-year-old, living with her mother and sister in Bengaluru. The family has been snares in a relentless cycle of disease, recovery and relapse for over three years. Divya first had TB, followed by her mother, and a year later, her sister. While Divya and her mother completed treatment in the first instance, her older sister discontinued taking medication. Earlier this year, Divya began to cough again, but this time the TB had spread from her lungs to her abdomen. Further testing would show that her mother and sister had relapsed as well.

TB had weakened her heart, liver and pancreas, and Divya was hospitalized for over two weeks, often shuttling between facilities to get the right treatment. The THALI program staff was by her side at all hours, arranging services from hospital transfers to linking bank accounts for direct benefit transfer payments, even counselling her at midnight. The team raised money through a crowdfunding program to tide the family over a tough period when Divya’s mother Subamma, the sole earner for the family, had lost her job as domestic help. “If we did not have their support (the THALI staff), I don’t know if I would be alive today,” Subamma says. “Because we have been supported, we have the courage to speak out.” Divya is ready to speak as well. “I will tell these patients that you need to complete treatment, or you will end up as sick as I was.”

Innovations presented at USAID Health Marketplace

KHPT joined USAID partners from across the country at the Health Marketplace, an event in New Delhi showcasing the initiatives and innovations implemented by organizations to improve health outcomes in urban settings. KHPT presented highlights from the THALI project, including the TB Careline, a phone-based counselling service, and the differentiated care model, which prioritizes care for vulnerable populations, to a USAID contingent led by Barbara Hughes, the Director of the Office of MCH & Nutrition at the Bureau of Global Health, USAID.

Products developed

Reports

Briefs
- Technical brief on the Specimen Collection and Transportation system (https://bit.ly/2Qz9wK)

Aids for Patient Care and Support
- Recipe book for TB patients
- Counselling cards for CHWs (Kannada)
- Cards on the Differentiated Care Model (Kannada)

Patient Services

Monitoring, Evaluation, Research and Learning (MERL)

PCS mobile application rolled out

In November, all THALI CHWs were trained to collect patient follow-up data using a mobile application. The application was tested on the field, and patient data was synced.

St John’s Medical College, KHPT’s technical support partner, conducted trainings on Technical and Operational Guidelines and the Programmatic Management of Drug-Resistant TB (PMOT) in collaboration with the State Task Force- Karnataka. 73 participants from colleges in Gulbarga, Mysore, Bengaluru and Mangalore divisions participated in these trainings.

Communications

The participants of a training session in Bengaluru

Participants applaud a young girl who wrote a song on TB during school sensitization sessions

“After they (CHWs) told us about cough hygiene, I realized that I should not spit inside the school premises, so others will not get sick.”

- Anusha, a fifth grade student in Hyderabad

“Last year, we were sending samples through courier services. We would call them, but they wouldn’t come for two-three days. They didn’t know how to handle the samples and they would leak during transport. We had to start treatment with just sputum testing. Now, we have sample collection every day. We are getting results much more quickly.”

- Anita, Lab Technician, Nelamaheswari DMC, Bengaluru Urban district

For more information on the above activities, please contact Vrinda Manocha, Sr. Communications Officer, at vrinda.manocha@khpt.org