

COHORT REVIEW

DIVISION OF DISEASE PREVENTION
TB CONTROL

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**WE HAVE TO KNOW WHERE WE
HAVE BEEN IN ORDER TO GET
WHERE WE NEED TO GO**



COHORT

- A group of individuals having a statistical factor in common in a demographic study
 - ALL VIRGINIA TB CASES
 - ALL VIRGINIA CONTACTS TO CASES

REVIEW

- To see over again to re-examine; to take a retrospective look again and to go over and examine critically and deliberately

CASE CONFERENCE

- In the moment
- Looking at what is going on while the case is still open and being treated
- Can still impact outcomes

WHAT IS COHORT REVIEW?

- Retrospective
- Systematic
- Individual client outcomes
- TB Program performance
 - Looking at the Forest vs. the trees
 - Strengths
 - Weaknesses
 - Training needs

COHORT REVIEW

- Implemented in Virginia about 10 years ago
- Many instances of corrective action could have been made if review sooner
- Practice abandoned in favor of case review sessions

VIRGINIA'S NEW COHORT REVIEW FOCUS

- Focus on NTIP objectives that need improvement
 - Completion of adequate treatment
 - Correct initial therapy

 - Sputum collection practices and reporting of results
 - Documentation of sputum conversion
 - Drug susceptibility results

 - HIV status

 - Initiation of LTBI treatment for infected contacts
 - Completion of LTBI treatment for infected contacts

VIRGINIA'S NEW COHORT REVIEW FOCUS

- Collaboration effort between state and local programs
- Focus on process and program improvement
 - Not punitive
 - Not threatening
 - Not “out to getcha”
- Plan to use data already collected for surveillance purposes
- Possible short form for limited other data needs

VIRGINIA'S NEW COHORT REVIEW FOCUS

- Initial years to focus on identifying each district's performance baseline for the objectives
- Beginning in 2012, each district will set local targets for improvement based on current performance identified through review process during 2010 and 2011
- For areas with low morbidity, may need to look at targets and performance regionally

CORRECT INITIAL THERAPY

- 4-Drug regimen started?
- Reason documented if not?
- Reason acceptable?
- Actions to correct regimen documented?
- Actions appropriate?

COMPLETION OF TREATMENT

- Correct regimen/doses?
- Completion within 12 months?
 - Documentation of reason why not?
 - Acceptable?
- DOT – Standard of Care
 - Documentation of reasons why not?
 - NO EXCEPTIONS FOR
 - Children
 - HIV+
 - Those with any resistance

SPUTUM COLLECTION AND RESULTS

- Sample collected and results documented for all with respiratory/pleural site of disease?
- Sample collected at two month post initiation of treatment to document status at 60 day point?
- Susceptibility results documented?
 - Actions to obtain results documented if not?

CONTACT INVESTIGATION

- Contact investigation forms fully completed?
- Documentation of efforts to initiate treatment of infected contacts?
- Documentation of efforts to complete treatment of infected contacts?
 - Referred to PMD is not an acceptable effort

KNOWN HIV STATUS

- Documentation of HIV results on chart?
- Documentation of efforts to either obtain sample or documentation of previous test results.

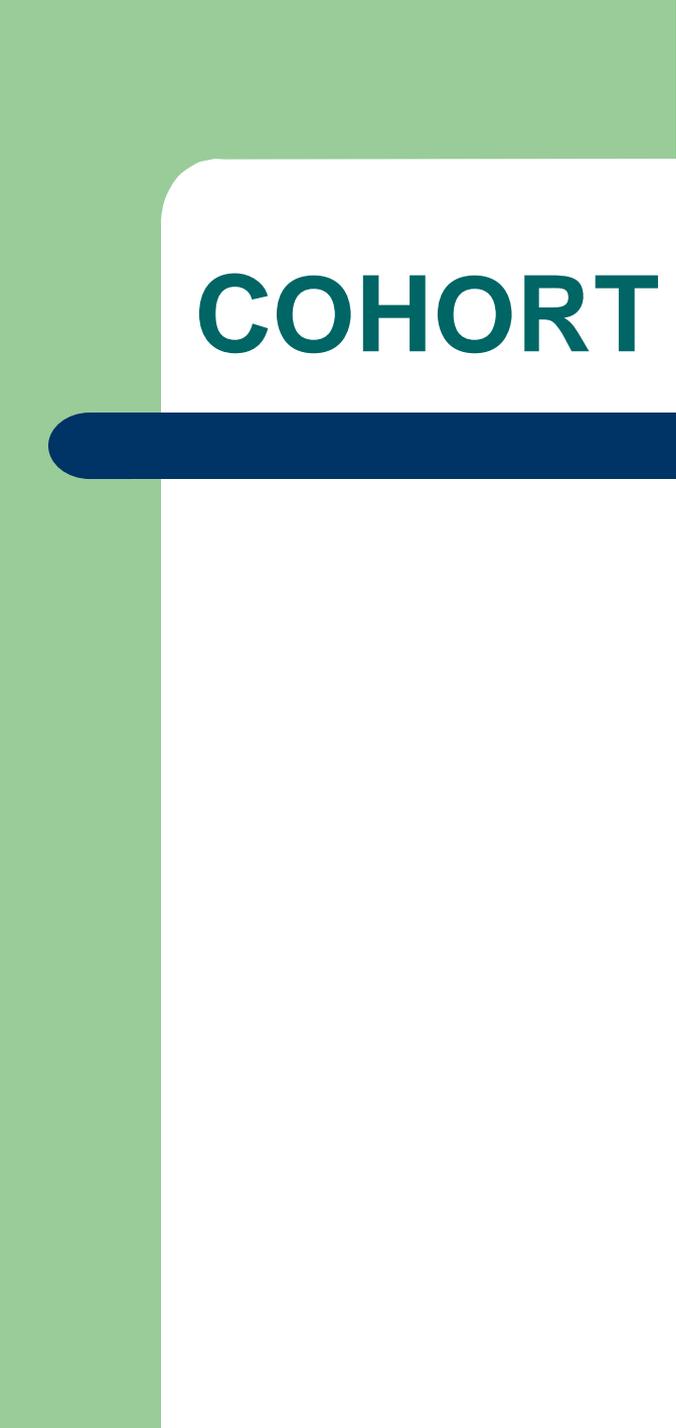
TB CONTROL

- Will give feedback to Districts after the quarterly Cohort Review Process

COHORT REVIEW SCHEDULE

Current cases counted	Will be reviewed the following year in
January - March	April - June
April - June	July - September
July - September	October - December
October – December	January - March

COHORT EXERCISE

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QUESTIONS?