

PROGRAM EVALUATION – NAVIGATING THE FUTURE IN TB CONTROL

**Virginia Performance Revisited
New TB Indicator Goals for 2020
Completion of Treatment Study**

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TB and Refugee Nurse Training



Past Achievement on NTIP Indicators

Where we have been...

2015 NTIP Objectives Met

- Sputum culture result for those with respiratory TB
- Sputum culture conversion within 60 days
- Recommended Initial Therapy
- HIV known/tested
- Contacts identified

2015 Objectives NOT Met (%)

	2013 Achieve- ment	2015 Target
Drug Susceptibility Testing	97.1	100
Completion of Treatment	90.5	93
Contacts Completely Evaluated	83.8	93
LTBI Treatment Initiation	53.8 or 46.7??	88
LTBI Treatment Completion	81.7	79

The Virginia Indicator

Measure of TB Prevention=
 $\# \text{Completed Rx} \div \# \text{Infected}$

44.0% of infected completed LTBI Rx in
2013

These will be the TB cases of the future.

INH/Rifapentine Regimen (3HP)

- A Valuable Tool to Increase LTBI Treatment Completion
 - ▣ Completion of LTBI treatment at 87% in Virginia
 - ▣ Side effect rate low at 5%



The New 2020 NTIP Indicators

The next step towards improvement...

New 2020 TB Indicator Targets (%) (1)

	2015	2020
Sputum Culture	95.7	98
Sputum Culture Conversion	61.5	73
Recommended Initial Therapy	93.4	97
HIV Known (alive at Dx)	88.7	98
Completion of Treatment	93	95
Drug Susceptibility Testing	100	100
Case Treatment Initiation	NEW	97

New 2020 TB Indicator Targets (%) (2)

	2015	2020
Contact Elicitation	100	100
Contact Examination	93	93
LTBI Treatment Initiation	88	91
LTBI Treatment Completion	79	81



The Program Evaluation Project

Completion of Treatment Study

A Change in Plans – Two Fold Concern

- Concern re: those treated over 1 year
- Concern re: those not treated long enough
 - ▣ Multidrug resistant
 - ▣ Alternate regimens
 - ▣ Dose counts short of recommendations

Completion of Treatment (COT) – A VDH Quality Indicator

- The Goal of the Study –
 - ▣ Identify factors that impact treatment duration
 - ▣ Increase clarity on the impact of private provider treatment decisions relative to COT
 - ▣ Identify interventions to support a shortened or sufficiently long COT
 - ▣ Consider policy revisions and training topics

Completion of Treatment (COT) – A VDH Quality Indicator

- The Process – Interview with Case Manager
 - ▣ In 2015 - Interview re: all 2014 TB patients with treatment >366 days
 - ▣ In 2016 - Interview re: those in 2014 with treatments short of recommendations

TB Cases Excluded – Patients with:

- Rifampin-resistant
- Meningeal
- Bone or the skeletal system
- Central nervous system
- children \leq age 14 with disseminated TB
- Death within 366 days of treatment start
- Move out of the U.S within 366 days of treatment start with no return

Potential Contributors to Performance

- For those taking >366 days to complete:
 - Intolerance with regimens lacking a rifamycin
 - Intolerance resulting in gaps in therapy
 - Non-compliance with DOT
 - Failure to convert sputa by 60 days after treatment start that may result in need for 39 week treatment

Potential Contributors to Performance

- For those with treatment that is too short per standards:
 - ▣ 6 month treatment = 26 weeks (NOT 24!)
 - ▣ Count doses and convert to weeks /
don't count weeks on the calendar
 - ▣ Regularly update private MDs as to weeks completed
 - ▣ Document doses converted to weeks on Completion of Treatment form sent to the TB Program

Time Frames for Treatment Segments*

- 8 week Initiation Phase
 - ▣ Complete within 3 months
 - ▣ If not possible, RESTART REGIMEN!
- Continuation Phase
 - ▣ 4-month continuation phase completed within final 6 months
 - ▣ 7-month continuation phase within remaining 9 months

*Treatment of Tuberculosis, pg. 40

Time Frames for Treatment Segments



- Total Treatment Length
 - ▣ All 6-month regimens complete within 9 months
 - ▣ All 9-month regimens complete within 12 months

When is Treatment Complete?

- Completed the planned course of treatment per
 - ▣ Treatment guidelines
 - ▣ Based on dose count
 - ▣ In proper time frames, or
- Completed all of the initiation phase and at least 80% of continuation phase if pulmonary and initially smear negative

Resources for Determining COT

- See the TB Website for:
 - ▣ “Guidelines for Determination of Completion of Treatment for Active or Suspected Tuberculosis Disease”
 - ▣ New in 2015! Revised!!
TB Case Completion/Discontinue Report & Worksheet

VDH Public Health Nurses

An amazing group of case managers..
Can accomplish amazing results!

