

Cohort Review Session Information
Virginia Department of Health
Division Tuberculosis and Newcomer Health

Cohort review is a group process that has been demonstrated to provide TB program learning opportunities and to improve program performance through discussion of best practices and the setting of program goals. As a requirement of our CDC cooperative agreement, Virginia TB programs must participate in cohort review. A cohort is simply a group of cases counted during a specific period of time, usually annually. In Virginia, the plan is to review cases 9-12 months after they are counted, so that most of the clients will have completed treatment. Beginning in 2016, with the review of 2015 TB cases, 50% of counted cases will be reviewed.

Cohort review differs from the more familiar case review format in several significant ways. While case reviews look at ongoing case management with a process focus, cohort review is retrospective and looks at outcomes. It seeks to determine if the best case management possible has been provided to the client and assesses the degree to which action has been taken to prevent transmission of disease. The focus of cohort review in Virginia is very specific, with the plan for review of 2017 cases including twelve elements as follows:

1. Sputum-culture reported for those with pleural or respiratory site of disease
2. Sputum-culture conversion within 60 days of treatment for those with positive sputum cultures
3. Treatment initiation within 7 days for those with a positive AFB sputum smear
4. Drug susceptibilities if an *M. tb* culture is positive from any site
5. Initial standard 4 drug TB therapy
6. Completion of treatment within 366 days for those eligible
7. HIV result
8. Number of contacts identified, regardless of AFB sputa smear status
9. Number of all identified contacts that are fully evaluated
10. Number of contacts with new positive test for TB infection that begin LTBI treatment
11. Number of contacts with new positive test for TB infection that complete LTBI treatment
12. Calculation of the “Virginia Indicator”; a percentage of contacts with newly identified TB infection that complete treatment for LTBI relative to the total number of those with newly identified TB infection.

Preparation for the Cohort Review Session

The TB central office program staff will contact the district to set a time for cohort review. Based on program morbidity, a cohort (group of cases) will be chosen for review. Before the review the central office will fax the district a list of cases chosen for the review, along with additional information. The TB nurse case manager(s) then completes a one page Client Cohort Review Form on each TB case for use during the review session. In most cases several districts will be combined into a single cohort review session that will be conducted by video conference. At minimum, a cohort review session includes the TB PHN case manager(s), and TB program central office staff including TB nurse consultant(s) and surveillance staff. Others are encouraged to attend, and may include the health director and/or clinicians for the district’s TB program; nurse manager; program supervisor; outreach worker(s) and additional TB program central office staff. A copy of each Client Cohort Review Form should be faxed to the central office at least one week before the review, and copies should be available for each local participant. The client record should be available at the review session for reference if questions arise. If all the elements are present, a review of one case could take as little as three to four minutes.

During the Cohort Review

The original PHN case manager for each case, if at all possible, presents the details regarding management and outcomes of each case, including the following information:

- Identifying data, including client initials (first/last), age, VA case number (provided on the faxed client list), and medical provider (LHD, private MD or both)
- Site of disease
- Specimens collected to diagnose the case

- Treatment start date relative to first positive AFB sputum smear
- Sputa specimens collected to demonstrate culture conversion, and if it occurred within 60 days of treatment initiation
- If conversion was not documented, what efforts were made to identify the cause or to collect specimens
- Drug susceptibility testing/results if a culture for *M.tb* from any site is present
- Adequacy of the medication regime
- HIV status
- Treatment completion and adherence issues
- Contact investigation data *for all cases*, including number of contacts identified, and number identified that were fully evaluated, number with newly positive tests for TB infection that start treatment for LTBI and, of this group, the number completing treatment for LTBI.

During cohort review, discussion takes place on the outcomes of the case, as well as overall trends identified, areas of quality program performance, applicable TB program policies and potential areas for improvement. During the review, data will be collected so that feedback can be provided on achievement of national TB objectives. Data from the prior years will also be presented to provide a baseline for comparison. If possible, this information will be presented at the end of the session, or at least will be forwarded to the district following the review session.

If you have any questions, don't hesitate to contact:

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