01. Operational research skills in one day

Wednesday, 29 October 2014, 09:00 - 17:00

Room 113

Type: Workshop
Track: Tuberculosis
Topic: Other
Organised by: International Union Against Tuberculosis and Lung Disease
Duration: Full-day
Max attendees: 150
Meeting type: Open meeting

Description:
This is a one-day workshop on operational research, providing an overview of the topic, the Union-MSF model of operational research capacity building, how to develop a protocol, how to use EpiData to undertake data collection and analysis, how to write a paper and have it accepted for publication and how to change policy and practice. This workshop is designed to show participants what operational research is all about and show how it can help in changing policy and practice in low- and middle-income countries.

Target audience:
The workshop is for any individual working in the field of Tuberculosis, HIV or lung health, who is interested in operational research.

Objectives:
1. To provide an overview of operational research and how this can lead to changes in policy and practice
2. To present the WHO-Union-MSF (SORT IT) model of capacity building
3. To show how to develop a research protocol and perform data collection and analysis using EpiData
4. To understand the principles of writing a paper for publication
5. To demonstrate how to move and monitor research to policy and practice

Expected outcome:
Participants will finish the one-day workshop understanding the basic principles of operational research and the capacity building that is needed to develop operational research at a country or programmatic level.

Keywords:
Operational research; capacity building; policy and practice; EpiData

Coordinator(s):
Rony Zachariah (Luxembourg), Anthony David Harries (UK)

Chair(s):
Tony Reid (Belgium), Vibeke Johnsen (Norway)

Presentations:
1. Operational research, what, why and how?
   Rony Zachariah (Luxembourg)
2. Operational research capacity building
   Anthony David Harries (UK), Andy Ramsay (Switzerland)
3. Principles and structure of a research protocol
   Anthony David Harries (UK)
4. Collection and organisation of data and using EpiData
   Hans L. Rieder (Switzerland), Ajay Kumar (India)
5. Writing the scientific paper and keeping the editor happy
   Tony Reid (Belgium)
6. An example of writing a scientific paper
   Anthony David Harries (UK)
7. Moving research to policy and practice
   Rony Zachariah (Luxembourg)
02. Community-driven solutions to the MDR-TB epidemic in the European region

Wednesday, 29 October 2014, 09:00 - 12:30

Room 114

Type: Workshop
Track: Tuberculosis
Topic: Other
Organised by: WHO Regional Office for Europe
Duration: Half-day
Max attendees: 100
Meeting type: Open meeting

Description:
Communities are rarely involved in supporting TB prevention and care in the European region. This session will be an opportunity for practitioners, NTP managers and communities from high burden MDR-TB countries to discuss and find ways to collaborate. Involving communities affected by the disease and civil society representatives in planning, implementing & monitoring national TB programmes is crucial. The workshop will serve as a platform of exchange between communities and national programmes and will help WHO Europe and the TB Europe Coalition develop guidelines on cooperation in the region.

Target audience:
Health practitioners, NTP managers, WHO, civil society organisations, international organisations.

Objectives:
1. Raise awareness among NTP managers on added value of CSOs and community involvement
2. Raise awareness among community and CSOs on existing mechanisms of collaboration with national programmes
3. Exchange best practices on NTP-community cooperation across the region
4. Establish guidelines and best practices on community involvement in the European region

Expected outcome:
Enhanced cooperation between communities, CSOs and national TB programmes in the European region.

Keywords:
Civil society; TB; MDR-TB; Europe; community; NTP

Coordinator(s):
Andrea Corazza (Belgium), Martin Van Den Boom (Denmark)

Chair(s):
Fanny Voitzwinkler (Belgium), Masoud Dara (Denmark)

Presentations:
1. Implementation of the consolidated action plan to prevent and combat M-XDR-TB, 2011-2015: CSO’s perspective
   Nonna Turusbekova (Netherlands)
2. Ways to increase efficiency of treatment of TB patients: best practices in the Russian Federation
   Teresa Kasaeva (Russian Federation)
3. Involving people affected by the disease: a key aspect of the fight against TB in the European region
   Safar Naimov (Tajikistan)
4. Involving CSOs in every aspect of the TB programmes: the Bulgarian experience
   Tonka Varleva (Bulgaria)
5. Advocating for resource mobilisation and better TB policies in Moldova
   Lilian Severin (Moldova)
### Session N.00368

**03. Complexities of molecular and phenotypic diagnostics in clinical management**

**Wednesday, 29 October 2014, 13:30 - 17:00**

**Room 114**

<table>
<thead>
<tr>
<th>Type</th>
<th>Workshop</th>
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<tbody>
<tr>
<td>Track</td>
<td>TB Bacteriology and Immunology</td>
</tr>
<tr>
<td>Topic</td>
<td>TB diagnostics and drug susceptibility testing</td>
</tr>
<tr>
<td>Organised by</td>
<td>World Health Organization (WHO), Center for Disease Control and Prevention (CDC)</td>
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<tr>
<td>Duration</td>
<td>Half-day</td>
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<td>Max attendees</td>
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<td>Meeting type</td>
<td>Open meeting</td>
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<tr>
<td>Description</td>
<td>This workshop provides a platform for the continued debate on the complexities of molecular and phenotypic diagnostics in clinical management. Due to the overwhelming demand stemming from a symposium organized by the same group at the 44th Union World Conference, the session will navigate diagnostic challenges from both the TB clinicians and scientists’ perspective. The workshop will consist of a series of presentations from a panel of TB experts followed by a discussion in which concerns and gaps in research can be identified. Delegates are encouraged to participate.</td>
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<tr>
<td>Target audience</td>
<td>TB and HIV clinicians, researchers, scientists, policymakers, guideline-development committee members, national TB programme heads, diagnostic industry, TB laboratory personnel and anti-TB drug development scientists</td>
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| Objectives     | 1. To present updated research data on gene mutations conferring resistance to TB drugs, including PZA  
2. To provide a forum for clinicians to voice their interpretation of diagnostics in clinical management of TB  
3. To identify key concerns and gaps in research appertaining to molecular and phenotypic diagnostics  
4. To discuss development of a training manual on molecular and phenotypic diagnostics for clinicians  
5. To engage in discussions with the panel regarding TB gene mutations and their clinical relevance |
| Expected outcome| Participants will complete the workshop with a deeper understanding of the advantages and pitfalls of molecular and phenotypic diagnostics when applied to clinical management. The delegates would have also contributed towards the first steps of developing a training manual on molecular and phenotypic diagnostics, for clinicians. A full workshop report will be written and disseminated. |
| Keywords       | Clinical management; diagnostics; MDR-TB; XDR-TB; pre-XDR-TB; resistance; dissemination; HIV |
| Coordinator(s) | Lynsey Isherwood (South Africa), Siva Danaviah (South Africa) |
| Chair(s)       | Stefan Niemann (Germany), Christopher Gilpin (Switzerland) |
| Presentations  | 1. WHO Global Surveillance Project  
Christopher Gilpin (Switzerland)  
2. Whole genome based diagnostics: the data to knowledge challenge (including PZA)  
Stefan Niemann (Germany)  
3. To what extent can genotypic DST replace conventional phenotypic techniques? The case of fluoroquinolones and injectable drugs  
Van Deun Armand (Belgium)  
4. The use of Xpert MTB/RIF for diagnosing rifampicin resistance and concordance with DST: the South African experience on 2million Xpert tests  
Wendy Stevens (South Africa)  
5. rpoB genotyping:connecting the DOTS by reading between the lines  
Marinus Barnard (South Africa)  
6. Evidence-based clinical decision making and public health policies with genotypic tests: what evidence?  
Richard Lessells (UK)  
7. Making clinical decisions using genotypic data (with particular focus on clinical and financial considerations)  
}
04. Practical aspects of microbiological diagnostic evaluation in childhood TB

Wednesday, 29 October 2014, 09:00 - 12:30
Room 115

Type: Workshop
Track: Adult and Child Lung Health
Topic: TB in children and LTBI treatment

Organised by: ANRS, Liverpool School of Tropical Medicine, MSF, Stellenbosch University

Duration: Half-day
Max attendees: 100
Meeting type: Open meeting

Description: Laboratory diagnosis of childhood TB remains challenging due to the paucibacillary nature of the disease and the difficulties in obtaining good quality respiratory samples. Optimisation of sampling methods and sample processing represent a critical aspect to address in order to improve current practice for childhood TB diagnosis. This workshop will address practical aspects of microbiological diagnostic evaluation for TB in children at different levels of health care. It will provide participants with state of the art knowledge on methodological approaches and offer a forum for sharing lessons learnt.

Target audience: NTP personnel, paediatric care providers including maternal and child health, researchers, lab personnel

Objectives:
1. Provide practical knowledge on sample collection for children, sample storage and processing methods
2. Review critical aspects of the operational implementation of diagnostic approaches for childhood TB
3. Discuss most advanced technologies in the TB diagnostic pipeline and their application to children
4. Review critical aspects of the design and implementation of clinical research on diagnostic tools in children

Expected outcome: A formal workshop report will be generated, with the view of future publication. If sufficient interest is generated, it is anticipated that a formal childhood TB diagnostics working group will be established in the future.

Keywords: Tuberculosis; children; diagnosis; laboratory; sample collection; sample processing

Coordinator(s): Olivier Marcy (Cambodia), Martina Casenghi (Switzerland)

Chair(s): Anneke Hesseling (South Africa), Luis Cuevas (UK)

Presentations:
1. Optimising sample collection in children: practical guidance
   Elisabetta Walters (South Africa), Carlos Perez-velez (USA)
2. Field perspectives - implementation challenges at the programme level: what specimen collection methods can be implemented and where?
   Fajardo (South Africa)
3. Field perspective - implementation challenges at the nurse level: tolerability, acceptability and feasibility of sample collection methods
   Laurence Borand (Cambodia)
4. Laboratory perspective to optimise specimen yield: sample processing, lab optimisation methods, transport and storage
   Andrew Whitelaw (South Africa)
5. Update on novel tools, platforms and strategies and their application to children: improving use of Xpert MTB/RIF for paediatric TB diagnosis
   Mark Nicol (South Africa)
6. Diagnostics pipeline and application to children: next generation NAAT-based test and urinary LAM
   Luis Cuevas (UK)
7. Critical aspects of study design and implementation for diagnostic studies
   Anneke Hesseling (South Africa), Patrick Jean-philippe (USA)
05. Civil Society, tuberculosis and the Global Fund processes

Wednesday, 29 October 2014, 13:30 - 17:00
Room 115

**Type**
Workshop

**Track**
Civil Society

**Topic**
Partnerships

**Organised by**
Stop TB Partnership

**Duration**
Half-day

**Max attendees**
100

**Meeting type**
Open meeting

**Description**
Effective strategies of CSOs engagement in the Global Fund processes will be presented. The workshop will give the latest of community systems strengthening, improving constituency representation, gender mainstreaming and involvement of CSOs and KAPs in TB programmes. This is an invitation to all stakeholders; TB patients, KAPs, CSOs, national TB programmes, technical partners and donors to discuss sustainable community-driven solutions in the framework of Global Fund grants. Focusing on multi-sector collaboration in advocacy for increased domestic financing for TB response will be addressed too.

**Target audience**
National TB Programmes, technical partners, donors, CSOs, community based organisations, key affected populations, (former-) TB patients and activists, community based organisations, international organisations, freelance consultants, networks

**Objectives**
1. Exchange best practices of CSO engagement in various Global Fund processes
2. Discuss how to practically promote community-driven solutions
3. Stimulate dialogue on how to effectively involve CSOs/KAPs by community systems strengthening
4. Discuss multi-sector collaboration to increase domestic financing, including its availability for CSOs

**Expected outcome**
1) Sharing of the effective strategies of civil society organisations’ (CSOs) participation in strategic planning, country dialogue, country coordinating mechanisms, concept note development, grant monitoring and other Global Fund processes.
2) Discuss practical recommendations on how to increase the engagement and representation of key affected populations (KAPs) by means of community systems strengthening.
3) Promote stakeholders’ collaboration and engagement of CSOs and KAPs to advocate for sustainability, increase in domestic financing and making it available to support CSOs’ work in TB.

**Keywords**
Civil society organisations; community-driven interventions; tuberculosis; key affected populations; the Global Fund; domestic financing; strategic planning; country dialogue; country coordinating mechanisms; concept note development

**Coordinator(s)**
Nonna Turusbekova (Kyrgyz Republic), Alberto Colorado (Mexico)

**Chair(s)**
Blessina Kumar (India), Lucica Ditiu (Switzerland)

**Presentations**
1. Mapping of civil society organisations working in TB and TB/HIV in the six WHO regions
   Lucy Chesire (Kenya)
2. Country Dialogue, TB and the rights of the Key Affected Population: who are they?
   Alberto Colorado (Mexico)
3. Best practices from Eastern Europe & Central Asia: CSO involvement in Global Fund processes
   Nonna Turusbekova (Kyrgyz Republic)
4. Ensuring adequate and effective representation for TB-affected communities on Global Fund Country Coordination Mechanisms in seven African countries
   Carol Nawina Nyirenda (Zambia)
5. NFM and the Power of the Civil Society/People living with TB/HIV in MENA region in monitoring the Global Fund grants: Reality and Expectations
   Rawan Ababneh (Jordan)
6. Preparing for the unimaginable: Increasing domestic financing before Global Fund withdrawal in Romania, a middle-income country with a high TB burden
   Jonathan Stillo (USA)
7. Domestic financing: civil society’s role in leveraging financing to health in country dialogues
   Beatrijs Stikker-muller (Netherlands)
06. Participatory development of guiding principles for migrant community-driven projects to eliminate TB

Wednesday, 29 October 2014, 09:00 - 12:30
Room 120/121

Type: Workshop
Track: Tuberculosis
Topic: TB in special populations and institutions
Organised by: LHL International, WHO (WPRO Office), IOM, Migrant Clinicians Network
Duration: Half-day
Max attendees: 75
Meeting type: Open meeting

Description: Among the three million people suffering from TB and not diagnosed or treated each year, how many are migrants? With 215 million people living outside their countries of birth, and over 700 million migrating within their countries, we can assume that working with the migrants to further TB elimination is essential. Migrants are hard to reach, have poor access to TB services and are at higher risk of infection. We want this to change and we need guidance. Please join us to develop a tool useful to all stakeholders interested in reaching and supporting the migrant communities.

Target audience: Patients, migrants associations, advocates, NGOs, policy-makers, public health officials, healthcare professionals, international organisations, WHO, donors

Objectives:
1. To provide an overview of various strategies used in reaching and working with migrant communities worldwide
2. To outline previous successful strategies used in general (as well as individual) circumstances
3. To guide the audience on ways to build and sustain community-driven projects addressing migrant communities
4. To guide the audience on how to build community-driven projects targeting migrant communities
5. To provide opportunity for ongoing dialogue with interested participants in formalising guidance

Expected outcome: An overview of various strategies used in reaching and working with migrant communities worldwide will be provided. Four specific and successful examples of community-driven projects targeting migrant communities will be presented. Building on these foundations, the attendees, in three groups facilitated by moderators, will brainstorm, share and develop collectively a guidance for healthcare community-driven projects targeting migrants.

Keywords: Tuberculosis; migrants; guidance; tool; community-driven; active participation

Coordinator(s): Gilles Cesari (Singapore), Deliana Garcia (USA)
Chair(s): Davide Mosca (Switzerland), Laia Ruiz Mingote (Spain)

Presentations:
1. Ensuring regular and irregular migrants access to TB care: experiences from a Somali diaspora community and LHL International in Norway
   Ingunn Nordstoga (Norway)
2. Overview of various strategies used in reaching and working with migrant communities worldwide
   Poonam Dhavan (Philippines)
3. Recent changes in state policies towards migrants with TB, and how to maximise this progress
   Rima Kalush (Bahrain)
4. The impact of massive immigration in Barcelona on TB epidemiology: the role of community health workers in the TB Programme
   Caylà (Spain)
5. Group work facilitated by Nobuyuki Nishikiori (WHO, Philippines), Poonam Dhavan (IOM, Philippines) and Rima Kalush (Migrants-Rights.Org, Bahrain)
   Poonam Dhavan (Philippines), Rima Kalush (Bahrain)
There remains an urgent need to address the barriers which prevent an estimated 3 million people with TB from accessing treatment and care. The strategic emphasis now placed on patient-centred care is a vital step forward. Of paramount importance is the full adoption and implementation of global policies which embrace patient-centred, ethical and human rights-based approaches to TB care. This workshop will include short presentations from a variety of perspectives with time allowed for discussion about the potential for co-ordinating efforts across the workstreams of different partners.

Target audience
Programme managers, donors, civil society, community, key affected populations, healthcare workers, researchers, civil society organisations

Objectives
1. To share lessons learnt in the field by implementers of patient-centred care for those affected by TB
2. To reach some consensus regarding the crucial elements required to implement patient-centred care
3. To establish a network with a commitment to co-ordinate efforts on agreed priorities and next steps

Expected outcome
Consensus will be built on priority challenges in relation to adopting patient-centred planning, funding and implementation. Plans will be made to take advantage of opportunities to reinforce work going forward. A network of interested partners will be established to co-ordinate across work streams and opportunities will be sought to draw in new partners. A report will be written by the co-ordinators and made available to participants within two weeks of the Union Conference. A symposium proposal will be submitted for the Union conference in 2015 to report progress and share lessons learnt.

Keywords
Patient-centred care; implementation; networking; priority-setting; collaboration; linkage; co-ordination.

Coordinator(s)
Virginia Williams (Switzerland), Netty Kamp (Netherlands)

Chair(s)
Elena Mcewan (USA), Ernesto Jaramillo (Switzerland)

Presentations
1. The theoretical context: what do we mean by patient-centred care?
Bruno Dujardin (Belgium)
Diana Weil (Switzerland), Sara L.m. Davis (Switzerland)
3. Personal experiences: patient and provider perspectives on patient-centred care
Lynette Mabote (South Africa), Phetsile Mamba (Swaziland)
4. A patient-centred approach to the programmatic management of DR-TB
Ernesto Jaramillo (Switzerland)
5. Country examples of effective patient-centred planning and implementation strategies
Manfred Daniolovits (Estonia), Daniel Datiko (Ethiopia)
**Session N.00212**

**08. Addressing challenges of MDR-TB control in the countries of the former Soviet Union (FSU)**

**Wednesday, 29 October 2014, 09:00 - 17:00**

**Room 122/123**

**Type**
Workshop

**Track**
Tuberculosis

**Topic**
Medical management of TB and drug resistant TB

**Organised by**
WHO Regional office for Europe, UN City, Marmorvej 51, Copenhagen, Denmark (www.euro.who.int)

**Duration**
Full-day

**Max attendees**
80

**Meeting type**
Open meeting

**Description**
This initiative is built upon the successful workshop at the 2013 Union Conference in Paris. The countries of the region are implementing the Consolidated Action Plan to Prevent and Combat M/XDR-TB in the WHO European Region, 2011-2015. While FSU countries previously relied on a hospital-based model of care for TB control, an increasing number of examples have shown that ambulatory or community-based care for most patients is feasible and cost-effective in the FSU settings. This workshop will discuss achievements and challenges facing MDR-TB control programmes from a health system perspective.

**Target audience**
National TB programme managers, TB specialists, health policy-makers, academicians, TB consultants, TB specialists, nurses.

**Objectives**
1. To share experiences and lessons learnt in addressing challenges in MDR-TB control in FSU countries
2. To discuss challenges and next steps in adapting a health system approach to MDR-TB control in FSU countries

**Expected outcome**
On the basis of the discussion a report will be presented that will describe best practices from pilots in the countries and lessons learnt from the region in the areas of scaling-up of MDR-TB control, community involvement and ambulatory models of TB care, participation of civil society organisations and addressing the needs of TB patients from vulnerable groups (prisoners, patients with alcohol addiction).

**Keywords**
TB control, MDR-TB, high-burden countries, models of care

**Coordinator(s)**
Valiantsin Rusovich (Belarus), Wayne Van Gemert (Switzerland)

**Chair(s)**
Masoud Dara (Denmark), Alena Skrahina (Belarus)

**Presentations**
1. Challenges of TB/MDR-TB/HIV co-infection in Belarus
   Alena Skrahina (Belarus), Varvara Solodovichka (Belarus)
2. Defining optimal models of care for MDR-TB patients in Vladimir region
   Grigory Volchenkov (Russian Federation)
3. Piloting interventions for TB/MDR-TB patients with alcohol addiction in Estonia
   Manfred Danilovits (Estonia)
4. Development and implementation of a multi-functional routine TB surveillance system in the megapolis of Moscow City
   Eugeny Belilovsky (Russian Federation)
5. Potential of Civil Society Organisations in addressing MDR-TB challenges in the countries of Eastern Europe
   Fanny Voitzwinkler (Belgium)
6. Financing reforms as a tool for improvement of TB in-patient and out-patient services in Armenia
   Hayrapetyan Armen (Armenia)
7. Scale up of programmatic management of drug-resistant TB in Kazakhstan
   Abildaev (Kazakhstan)
8. Addressing challenges of TB control in the penitentiary system in Moldova
   Svetlana Doltu (Moldova)
09. How global mechanisms for supply chain contribute to availability of TB medicines at Community level

Wednesday, 29 October 2014, 09:00 - 17:00

Room 124

Type  Workshop
Track  Tuberculosis
Topic  TB and non-communicable diseases/co-morbidities (non-HIV)

Organised by  Global Drug Facility and USAID's System for Improved Access to Pharmaceuticals and Services project

Duration  Full-day
Max attendees  60
Meeting type  Open meeting

Description  Global mechanisms such as GDF, WHO and Global Fund have immensely contributed to TB service provision and outcome at community level. GDF provided over 23 million first-line treatments valued at approximately 1 billion dollars (2002-2013) and over 100,000 second-line treatments (2007-2013) to more than 110 countries for their communities. USAID SIAPS project has worked with NTPs and counterparts to build capacity and strengthen TB supply chain systems to ensure access to medicines and services at community level. This workshop will discuss strategies and tools to improve access at community level.

Target audience  NTP managers, provincial or district TB coordinators, TB consultants, international and local partner organisations involved in TB programme, donors' representatives.

Objectives  
1. Describe concrete approaches contributing to availability of quality assured TB medicines at community level
2. Share country experiences of technical support and impact on availability of TB medicines at community level

Expected outcome  At the end of the workshop, participants will be expected to learn about available approaches, solutions and tools that can enhance community-based interventions to ensure availability of TB commodities and services.

Keywords  Global Drug Facility; GDF; SIAPS; Management Sciences for Health; MSH; TB medicines; pharmaceuticals; access; stock-out; supply chain;

Coordinator(s)  Kaspars Lunte (Switzerland), Chinwe Owunna (USA)

Chair(s)  Andre Zagorski (USA), Joel Keravec (Switzerland)

Presentations  
1. GDF’s model and evolving landscape of global mechanisms for TB medicine supply to ensure availability of quality assured medicines at the community level
   Joel Keravec (Switzerland), Kaspars Lunte (Switzerland)
2. Strengthening the capacity of national TB programmes to ensure zero stock-out of TB medicines at the community level
   Thierry Cordier-lassalle (Switzerland), Salama Mwatawala (Tanzania, United Rep.)
3. Enhancing the capacity of TB/HIV providers to promote safety of TB medicines at the community level
   Nomsa Shongwe (Swaziland), Chinwe Owunna (USA)
4. Community based retail outlets to enhance early case detection of TB infection
   Ayyaz Kiani (Pakistan), Edmund Rutta (USA)
5. QuanTB: forecasting, quantification and early warning for stock-outs at all levels of health system
   Andre Zagorski (USA), Mohammad Kibria (Bangladesh)
6. Are global mechanisms contributing to equitable access to TB medicine at community level?
   Andrea De Lucia (Switzerland), Salama Mwatawala (Tanzania, United Rep.)
10. Enhancing inter-personal skills of the healthcare providers for TB care and control

Wednesday, 29 October 2014, 09:00 - 17:00

Room 125

Type: Workshop
Track: Civil Society
Topic: Community outreach
Organised by: World Vision
Duration: Full-day
Max attendees: 60
Meeting type: Open meeting

Description: Timely and appropriate health seeking for TB is hampered by myths, stigma and discrimination. World Vision’s experiences indicate that effective and skilled communication can mitigate these challenges and improve case detection and patient compliance. This one-day workshop is designed to enhance soft-skills of the participants, and utilise them effectively during different phases of TB case management (following ‘cough to cure pathway’) with phase-wise objective/s setting, fixing roles and responsibilities of various service providers to achieve those objectives and measuring results.

Target audience: Program managers, service providers, community caregivers, counselors, advocates, communicators who are involved in TB care and control and interested to improve quality of their services and TB treatment outcome through heightened soft skills.

Objectives:
1. To sharpen skills like communication, negotiation, time-management, team–building and conflict resolution
2. To help participants to utilise those skills effectively at different phases of cough to cure pathway
3. To equip participants with skills and tools to develop their organisational plan for soft-skill building

Expected outcome:
1) The participants will have clarity on a) the specific objectives set at different phases of ‘cough to cure’ pathway b) how to achieve those objectives through a set of appropriate and effective soft-skills and c) measure results. 2) They will be equipped with various soft-skills to establish effective, unbiased, transparent and supportive communication with TB affected and vulnerable population that can improve case detection, reduce defaulters, and ensure favourable treatment outcomes. 3) They will learn to develop realistic plans for soft-skills building for their organisations.

Keywords: TB control and care; soft-skills; cough to cure pathway; soft-skills building plan

Coordinator(s): Sugata Mukhopadhyay (India), Gagik Karapetyan (USA)
Chair(s): Vijay Kumar Edward (India), Dennis Thuralayil (USA)

Presentations:
1. Basic elements of communication in healthcare
   Blesson Samuel (India), Sugata Mukhopadhyay (India)
2. Role-plays to enhance communication & negotiation skills
   Sushma Cornelius (India), Gagik Karapetyan (USA)
3. Enhance your time-management skills
   Blesson Samuel (India), Jose ()
4. Conflict Resolution
   Blesson Samuel (India), Jose ()
5. How to work in a team
   Sushma Cornelius (India), Gagik Karapetyan (USA)
6. Setting specific objectives at different phases of cough to cure pathway
   Sugata Mukhopadhyay (India), Gagik Karapetyan (USA)
7. How to achieve those objectives by utilizing different sets of soft-skills effectively and how to measure the achievements
   Sugata Mukhopadhyay (India), Gagik Karapetyan (USA)
8. Soft-skills to handle special cases like Drug-Resistant TB, TB/HIV co-infection, and Childhood TB
11. Tuberculosis programme reviews and technical assistance

Wednesday, 29 October 2014, 09:00 - 17:00

**Type**
Workshop

**Track**
Tuberculosis

**Topic**
Other

**Organised by**
International Union Against Tuberculosis and Lung Disease (The Union)

**Duration**
Full-day

**Max attendees**
50

**Meeting type**
Open meeting

**Description**
This workshop will outline the rationale for providing technical assistance and conducting programme reviews, including expected outputs from a country-perspective. It will explain the difference and interdependence between technical assistance and programme reviews. Practical exercises will focus on the use and assessment of surveillance data. Specific topics will be addressed, including strategic planning, human resources, fundraising and different technical areas. Existing tools for assistance and reviews will be introduced.

**Target audience**
People involved in or interested in providing technical assistance or participating in programme reviews. Consultants, doctors, nurses, TB/HIV program staff, global fund staff, other technical and financial agencies.

**Objectives**
1. To define the purpose of technical assistance and TB programme reviews to country programmes
2. To present best practices for technical assistance and conducting programme reviews
3. To provide practical guidance on the use of surveillance data
4. To introduce important aspects of different technical areas to be considered during assistance and reviews
5. To outline how to support TB programmes in their strategic planning and fundraising activities

**Expected outcome**
Participants will finish the workshop understanding the basic principles and best practices for providing technical assistance to country TB programmes as well as conducting TB programme reviews.

**Keywords**
TB technical assistance; TB programme reviews; surveillance data

**Coordinator(s)**
Anne Detjen (USA), Kitty Van Weezenbeek (Netherlands)

**Chair(s)**
Hans L. Rieder (Switzerland), Malgorzata Grzemska (Switzerland)

**Presentations**
1. Why technical assistance? Why Programme reviews?
   Chen-yuan Chiang (Taiwan), Malgorzata Grzemska (Switzerland)
2. Preparation, execution and follow-up of a programme review
   Kitty Van Weezenbeek (Netherlands), Malgorzata Grzemska (Switzerland)
3. Practical exercise: data collection and how to critically assess surveillance data
   Einar Heldal (Norway), Hans L. Rieder (Switzerland)
4. Impact evaluation: are we doing the right thing?
   Jaap Broekmans (Netherlands), Katherine Floyd (Switzerland)
5. Six practical examples: 1. Case finding and diagnosis: clinical skills, 2. Childhood TB
   Riita Dlodlo (Zimbabwe), Steve Graham (Australia)
6. 3. Laboratory diagnosis, 4. Programmatic management of drug-resistant TB
   Armand Van Deun (Belgium), Chen-yuan Chiang (Taiwan)
7. 5. Human resources and financing, 6. Evaluation of technical assistance
   Karin Bergstrom (Switzerland), Arnaud Trebuq (France)
8. What does a country want and what does it take from technical assistance and programme reviews
   Saidu Magoye Egwaga (Tanzania, United Rep.)
12. Practical laboratory issues in low-resource settings

Wednesday, 29 October 2014, 09:00 - 17:00
Room 111

Type: Workshop
Track: TB Bacteriology and Immunology
Topic: TB laboratories: quality management and TB laboratories’ network

Organised by: Centers for Disease Control and Prevention (CDC)

Duration: Full-day
Max attendees: 100
Meeting type: Open meeting

Description:
Laboratories play a major role in the early diagnosis and follow-up of TB cases. The use of proper diagnostics at appropriate levels in the country and for the vulnerable sections in the communities can help in the early detection of cases with disease or infection for a suitable treatment. Early detection of drug resistant cases can also ensure the proper regimen and control of drug-resistant TB. This requires strengthening of the TB laboratory services and support and co-operation of the national TB control programmes, epidemiologists, clinician and laboratorians. Important recent advances in TB laboratory diagnostics should now be correctly utilised in early case detection and in choosing appropriate treatment regimen. Lack of understanding, resources, and quality systems have resulted in the neglect of laboratory services including implementation of newer and rapid diagnostic methods. Laboratory safety is another least addressed area. The relative risk of TB infection for laboratorians and health care workers depend upon the type of work or technique they are using. Adherence to proper bio-safety techniques provides high level of safety.

Target audience: TB control programme managers, laboratory managers, epidemiologists, programme managers, clinicians, TB consultants, and trainers

Objectives:
1. To discuss practical solutions to the challenges encountered in the implementation of newer diagnostic methods at various levels in a country
2. To discuss bio-safety, bio security and bio-risk at laboratory and community levels
3. To discuss quality management systems and external quality assessment mechanisms for various techniques in the TB diagnostics
4. To discuss the role of culture and newer methods in drug susceptibility testing in identification of drug resistance cases

Expected outcome:
At the end of this workshop participants will be able to understand the challenges and solutions in the implementation of appropriate diagnostics at different level of services. The participants will have understanding on bio-safety, biosecurity, and biorisk related issues. Participants will understand the quality management systems and appropriate use of external quality assurance. Participants will have useful information to their common laboratory and programme specific problems related to training, quality testing, procurement, inventory, EQA, smear microscopy, culture and DST, and implementation of newer diagnostic methods. This will help in providing proper support by the programmes managers resulting in improved quality of laboratory results and appropriate use of laboratory services by clinicians and epidemiologists.

Keywords:
New diagnostic methods

Coordinator(s):
Pawan Angra (USA), Armand Van Deun (Belgium)

Chair(s):
Pawan Angra (USA), Armand Van Deun (Belgium)

Presentations:
1. Newer diagnostics
2. Biosafety, biosecurity and biorisk
3. Quality management system
4. External quality assessments
5. Microscopy
6. Accreditation