Strategies to Improve Case Detection, Case Holding, and Cure Rates among TB Patients in South Africa

(USAID supported)

URC

(University Research Co., LLC)

SWOT analysis

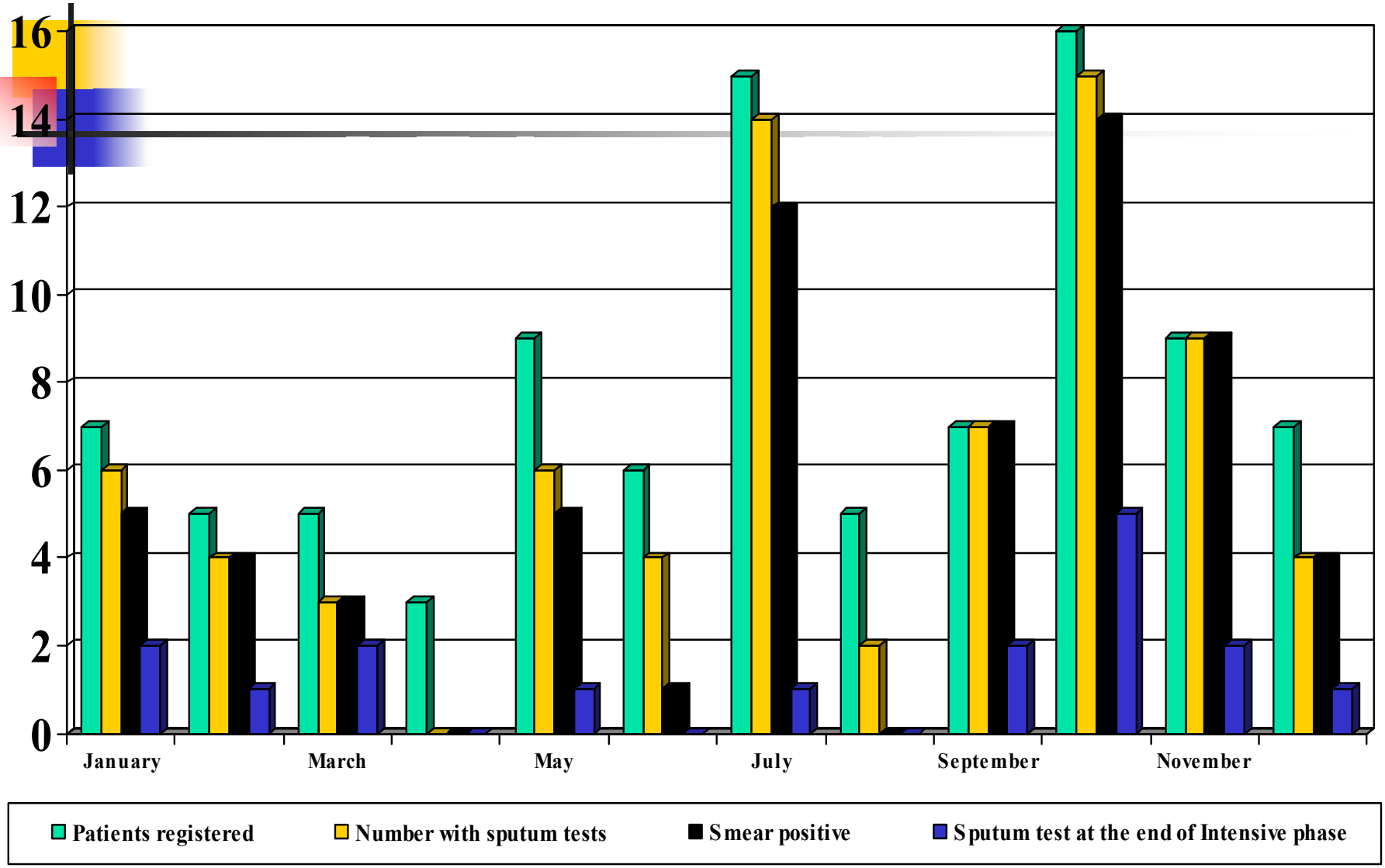
- **Strengths**
- 60% of health workers are trained in TB management
- Each ward has DOTS supporters
- Home based care available in all areas
- Traditional healers trained on TB
- TB patients are counseled for VCT

- **Opportunities**
- Training, continuous counseling of families

- **Weaknesses**
- Poor attitude of health workers
- Community stigma
- Late diagnosis
- Poor compliance with treatment
- Lack of knowledge

- **Threats**
- MDR x 3
- Mortality
- Re-treatment
- HIV/AIDS

Measuring Impact of TB Quality Improvement Activities

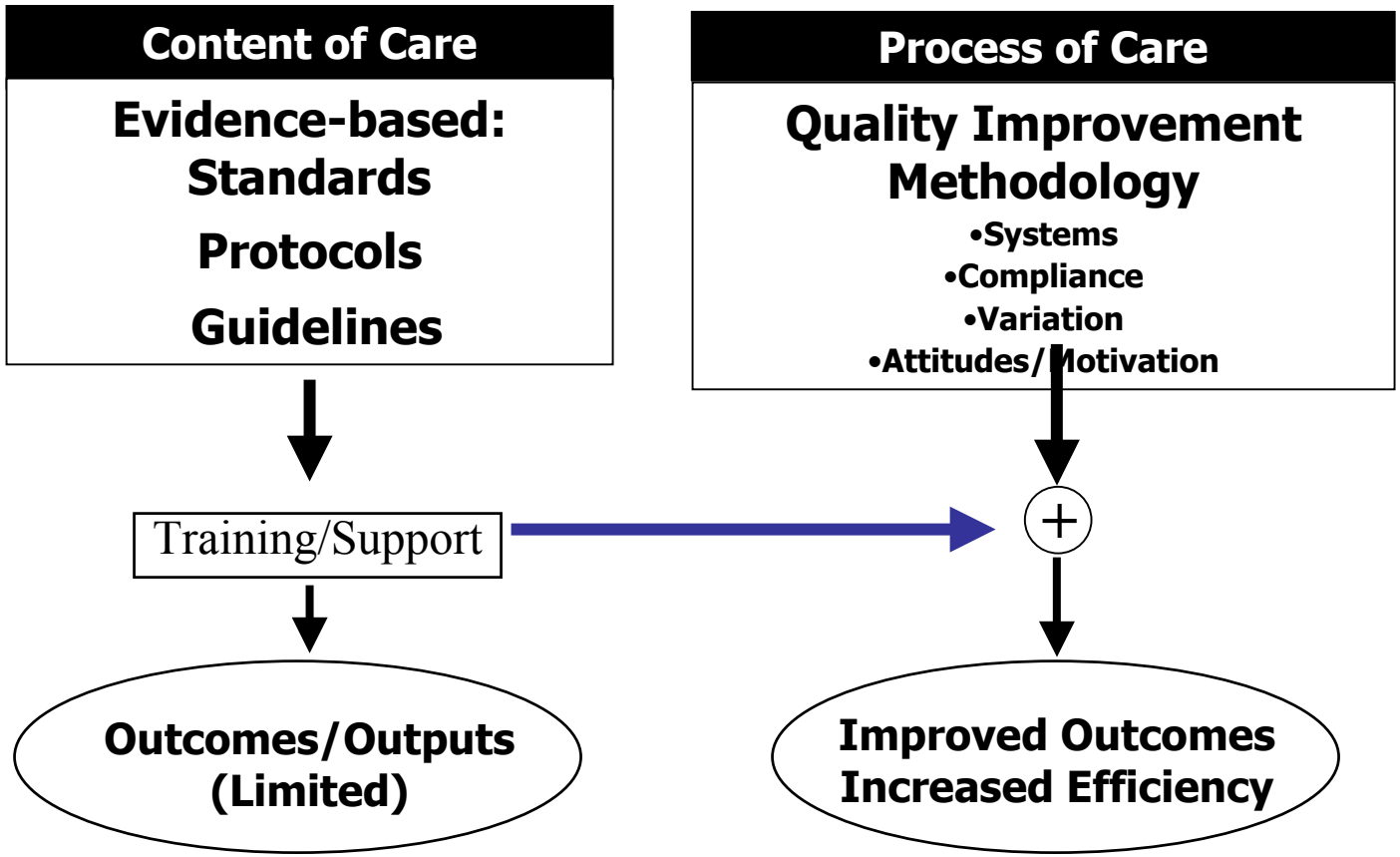


QAP-South Africa

Quality Management Approach

- Institutionalizing an integrated and sustainable QA system
- Use a team approach
- Use QA structures that already exist
- Using available resources
- Systems oriented
- Data driven

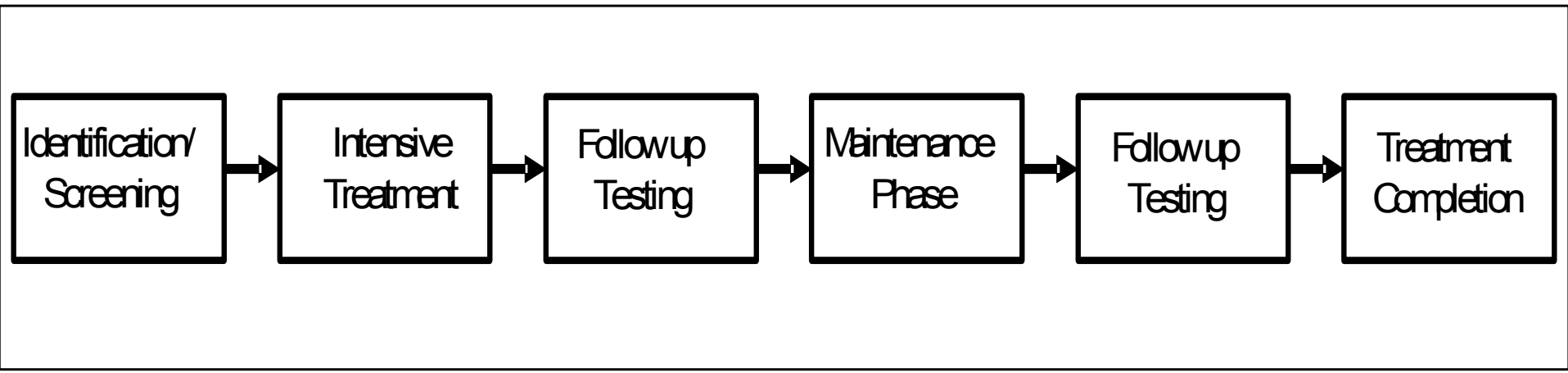
Improvement Strategies for specific Clinical Services



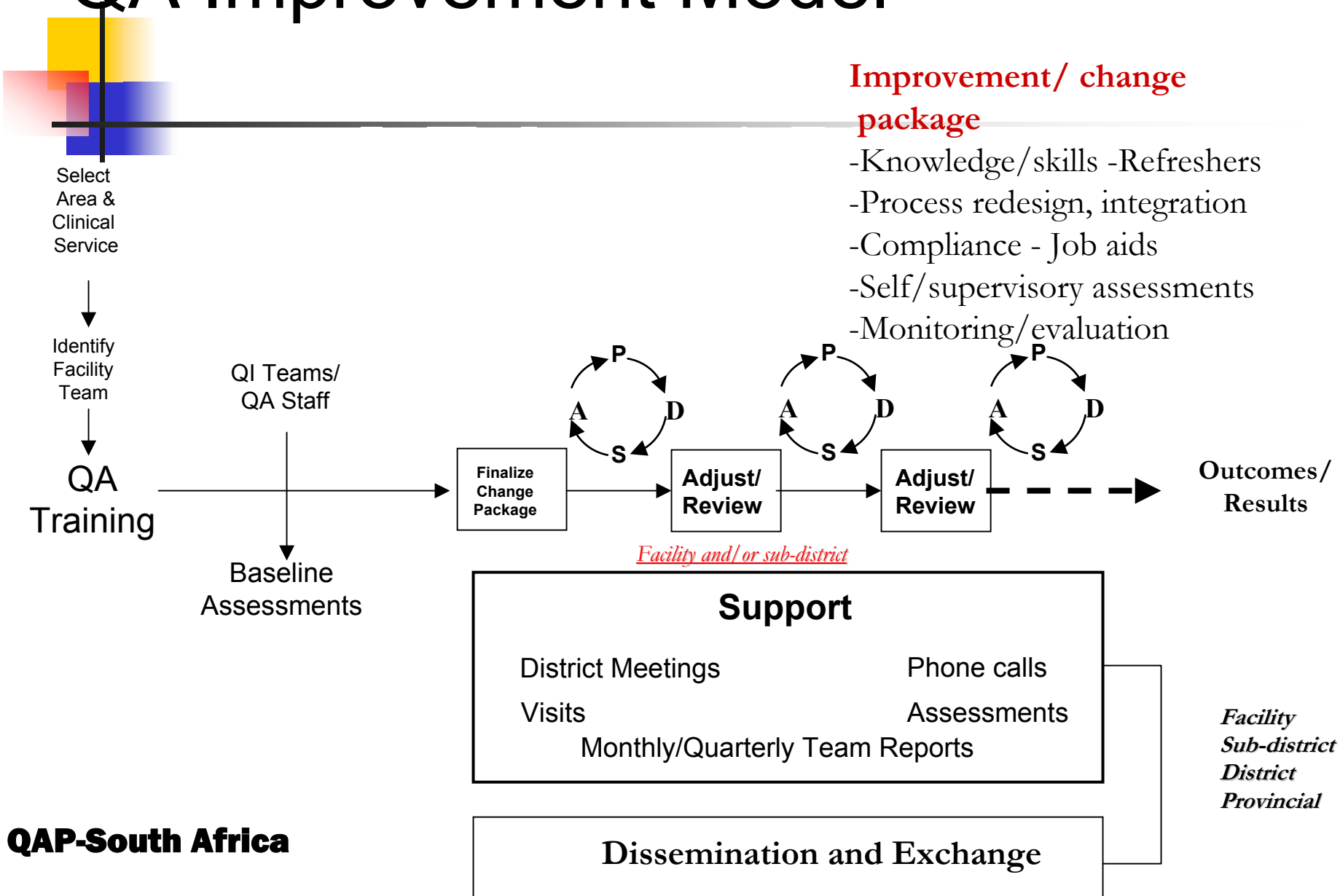
Adapted from:
Paul Balalden, Patricia Stoltz
A Framework for Continual Improvement in Healthcare
The Joint Commission Journal on Quality Improvement
October 1997

Process of Care—Quality Design Methodology, Case Management

- Maximizing high-quality outcomes, efficiency, and client satisfaction

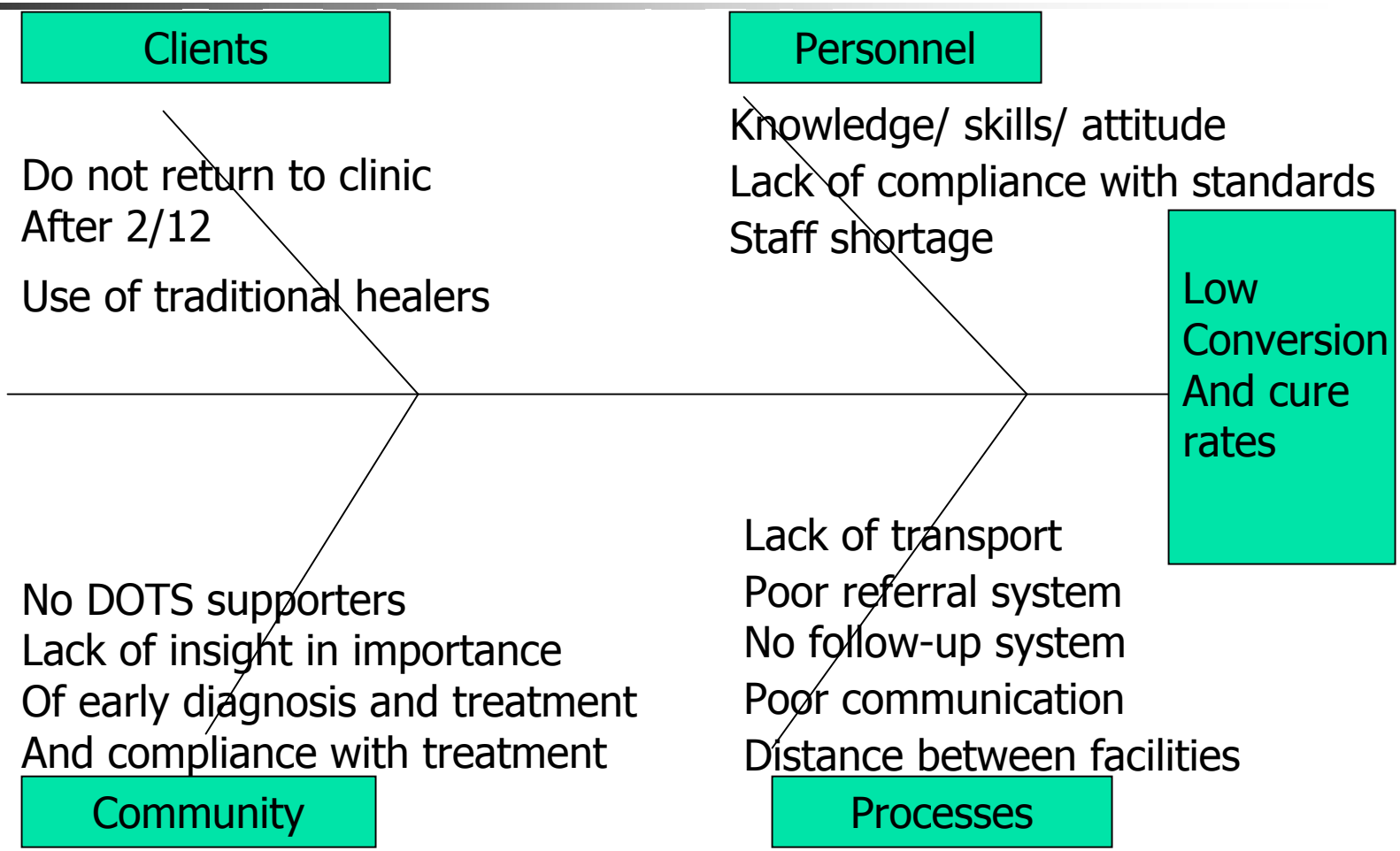


QA Improvement Model

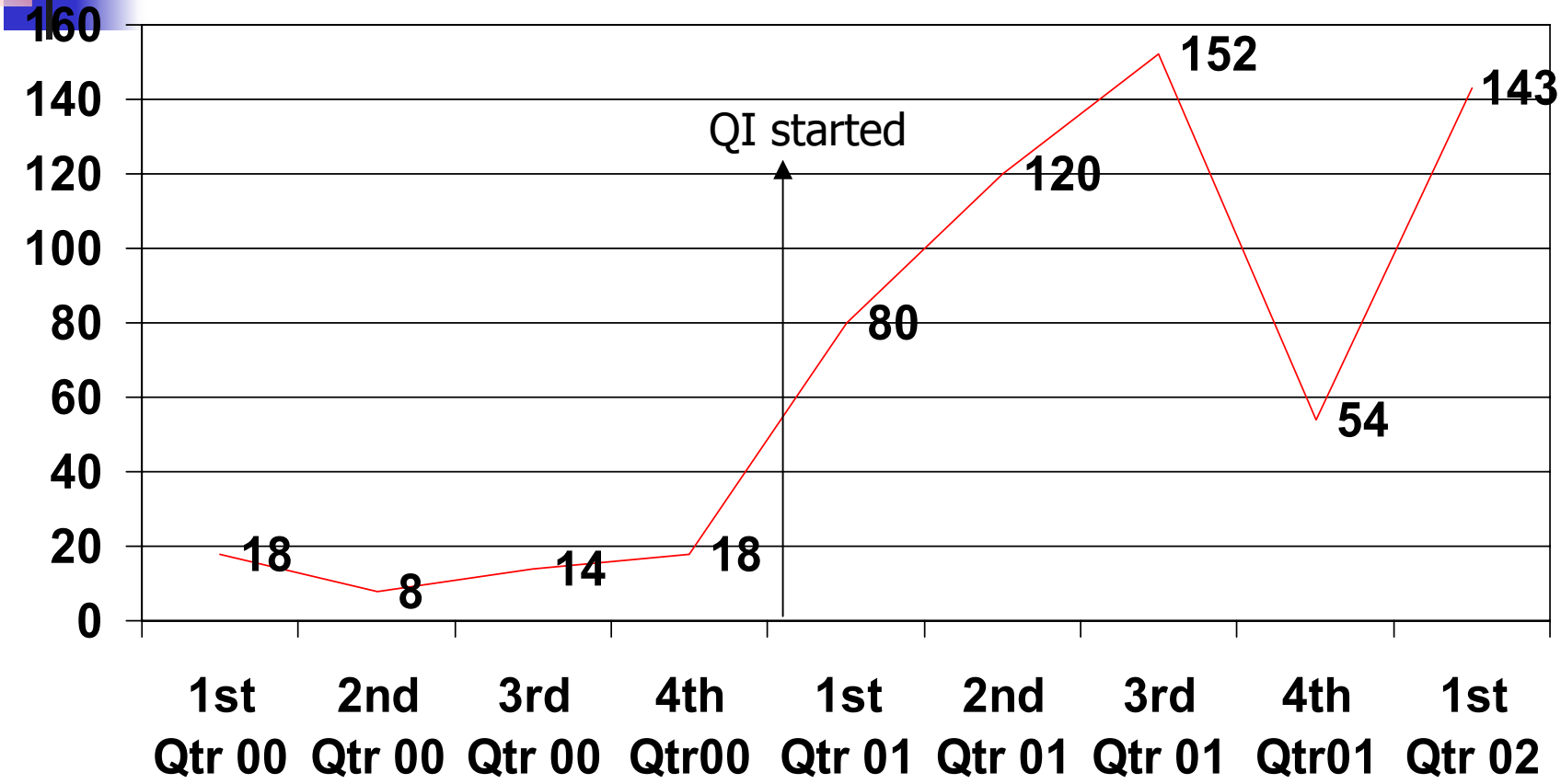


QAP-South Africa

Focus area: TB Management

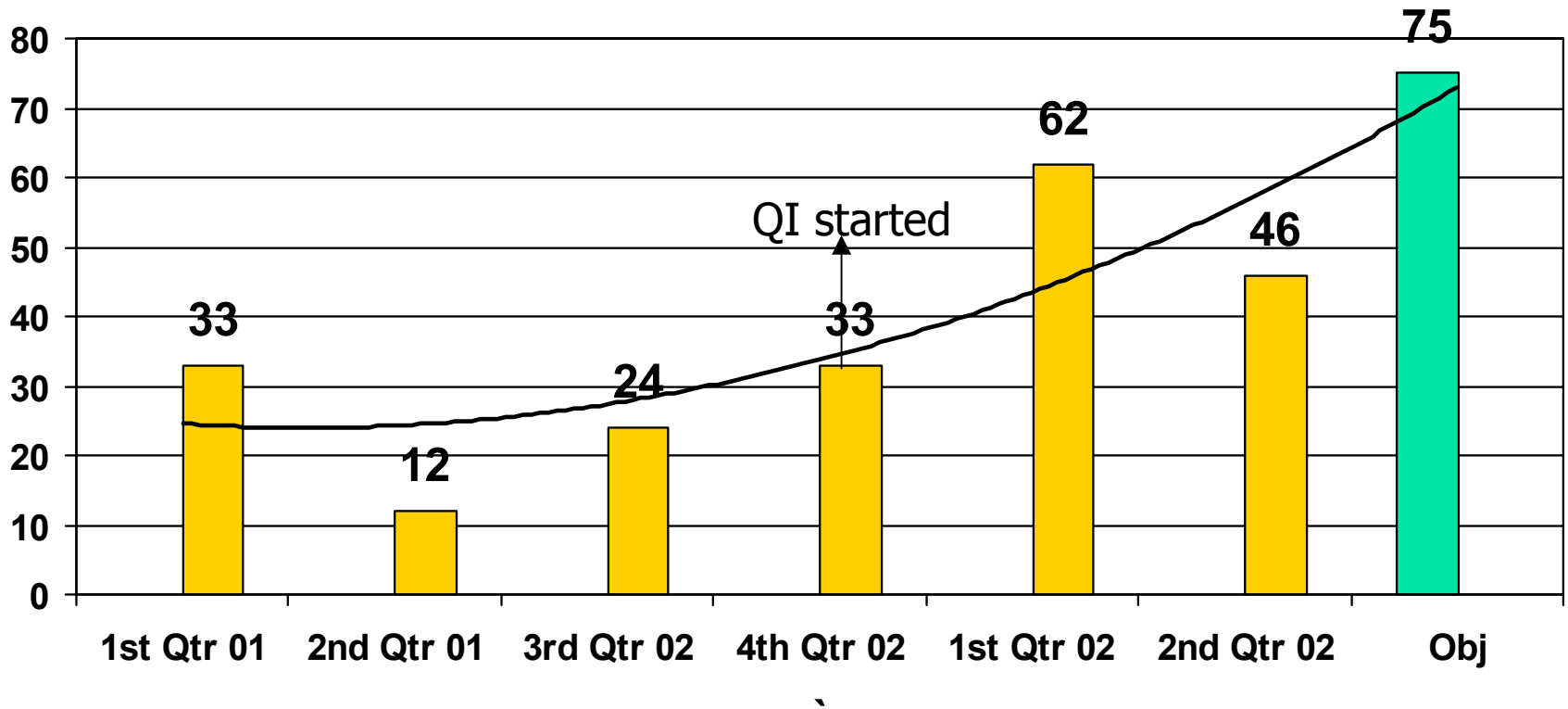


Philladelphia (Mpumalanga) sub-district
TB case finding
Number of new cases diagnosed per quarter



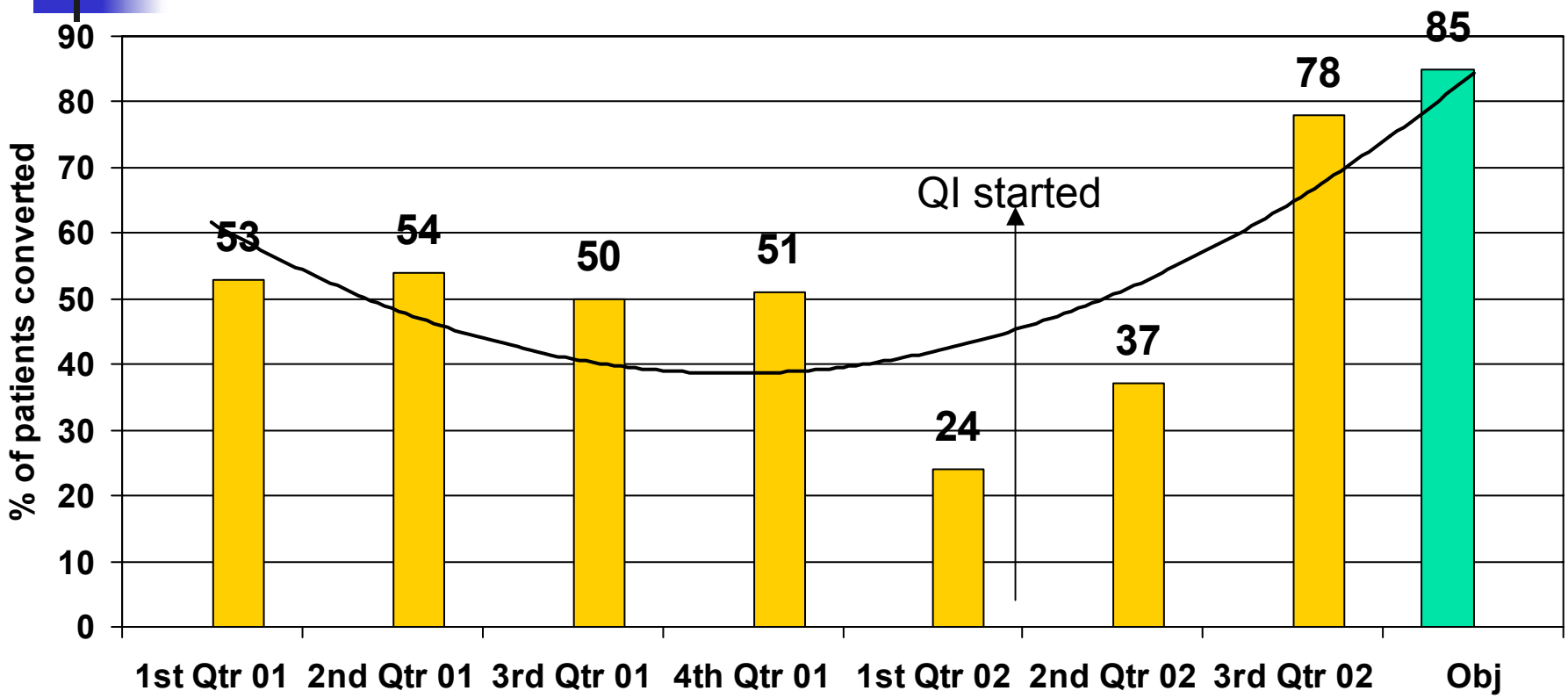
Ka-Bokweni (Mpumalanga) CHC TB Case finding

2001/02 Number of new cases diagnosed per quarter



TB Sputum Conversion - Matsulu Clinic

% of cases that converted from smear + to smear – at the intensive phase



Further QAP strategies

- Continuous monitoring
- Improve patient compliance
- Use model in other areas that request

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