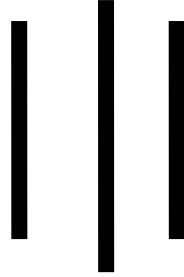
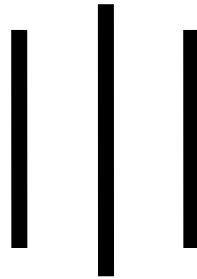




TB Nepal



Nepalgunj TB Referral Centre



Annual Report

2081-082

Nepalgunj - 4 Salyanibag, Banke

Shrawan ,2082

TB Nepal
Nepalgunj TB Referral Centre
Nepalgunj-4 Banke
Annual Report of 2081/082

Summary of Target Vs achievement				
Main Activities	Carried out activities	Annual Target (2081-082)	Annual achievement (2081-082)	Progress in %
क्षयरोग बहिरंग सेवा (TB OPD)	Patients Visited in OPD.	30000	27936	93%
	Presumptive TB cases Examined	14000	8582	61%
	TB cases Diagnosed among Presumptive TB	1000	1107	111%
	TB Cases referred to other health facilities for treatment	988	1100	111%
	TB cases enrolled in treatment including referred form other treatment centers	12	7	58%
	TB DOTS visit	10000	19300	193%
	Health education about TB.	24000	27936	116%
क्षयरोग अन्तरंग सेवा (TB In-patients)	TB patient's admission in ward for complication management.	700	707	100%
	TB In-patients death rate	< 2 %	<0.1%	
	Bed occupancy rate	75 %	63%	
	Average length of stay (days).	6 Days	8 Days	
प्रयोगशाला (Laboratory)	TB new sputum smear test	10000	17086	171%
	TB follow-up sputum smear test.	1500	2093	139%
	Gene X-pert test for TB diagnosis.	1500	4661	311%
	Sputum sample send to reference Laboratory for Culture / drug sensitivity test.	100	235	235%
	HIV Test in new TB	1000	1078	108%
	Montoux test	500	323	65%
	Leprosy new skin smear test.	200	72	36%
	Leprosy follow-up skin smear test	50	6	12%
	Other general test (Basic Blood test)	20000	26228	131%
असाहाय सहयोग कोष (Charity Provision)	Charity provided based on Socio-economic assessment (Food, accommodation, medical investigation, general medicine and Patients travel	7700	5471	71%

	cost etc).			
क्षयरोग व्यवस्थापन (General TB)	TB Treatment Success rate	90%	89%	
जिर्ण क्षयरोग व्यवस्थापन (MDR TB)	Presumptive DR TB cases screened in OPD	1500	646	43%
	Presumptive DR TB cases examined	1450	646	43%
	DR TB Cases Diagnosed from sputum examination	60	36	60%
	DR TB Cases referred for treatment to other health facilities	12	15	125%
	DR TB cases enrolled in treatment including referred form other treatment centers.	50	39	78%
	On treatment DR TB Cases	50	44	88%
	DR TB Treatment Success rate	70%	63%	

Abbreviation

NTRC : Nepalgunj TB Referral Centre

DR TB : Drug Resistance Tuberculosis

MDR : Multi Drugs Resistance

HIV : Human Immunodeficiency Virus

AIDS : Acquired Immune Deficiency Syndrome

DOTS : Directly Observed Treatment Short-Course

CB DOTS: Community Based Directly Observed Treatment Short-Course

OPD : Out Patient Department

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1. INTRODUCTION

TB Nepal is a non-religious, non-political, non-profitable and non-governmental organization working in the field of health particularly in TB / DRTB diagnosis, treatment, complication management, awareness raising and Community based DOTS Programme are the main component having 25 bed inpatient services and 20 beds DR TB hostel. It was legally registered at District Administration Office Nepalgunj, Banke (Regd. No 489 / 2060- 5 -10 B.S) and affiliated with Social Welfare Council, Kathmandu, Nepal (Affiliation No. 15748 / 2060 - 9 - 25 BS). The organization is dedicated to support the TB control program of Nepal. Additionally, the organization was established by the group of TB / Leprosy work experience staff in 2003 AD. Now TB Nepal is running the provincial level Nepalgunj TB Referral Centre in Banke District.

1.1 Organization Vision

To make Nepal free from Tuberculosis and Leprosy.

1.2 Organization Goal

To make community free from Tuberculosis, Leprosy and HIV/AIDS through preventing transmission and reducing morbidity and mortality rate of TB.

1.3 Organization objectives and strategies

- To control tuberculosis, Leprosy and HIV /AIDS.
- To provide DR TB service for MDR TB patients.
- To save poor and vulnerable communities people from TB, Leprosy, TB/ HIV and MDR TB.
- Provide quality based microscopic center.
- Increase awareness programs including health education about TB, Leprosy and HIV.
- Reduce social and economic burden raised from Tuberculosis, Leprosy and HIV.
- To provide equity service.

1.4 Project Goal:

To decrease incidence rate from 238 in 2020/21 to 181 patients per 100,000 population by 2025/26 and decrease mortality rate from 58 in 2020/21 to 23 per 100,000 by 2025/2026. End TB epidemic by 2035; eliminate TB by 2050 and reduce the catastrophic cost to zero.

1.5 Major Objective of the project:

1. To build and strengthen political commitment, sustainability and patient-friendly health system to end TB.
1. To ensure the identification of TB diagnosis, quality treatment and prevention.
2. To Increase case notification through improved health facility based diagnosis; increase diagnosis among children and those with diabetes mellitus.
3. To expand case finding by engaging providers for TB care from the public sector, medical colleges, NGO sector and private sector through results based financing schemes, with formal engagements to notify TB cases.
4. To create a patient friendly ambience in the health facilities, advocacy for TB patients regarding their rights which will, in turn, contribute to the diagnosis and management of TB cases.
5. To contribute to health system strengthening through HR management and capacity development, financial management infrastructure, procurement and supply management in TB.
6. To develop and strength comprehensive monitoring and evaluation system.
7. To develop plans so that NTP can function even at times of crises like natural disasters or public health emergencies.

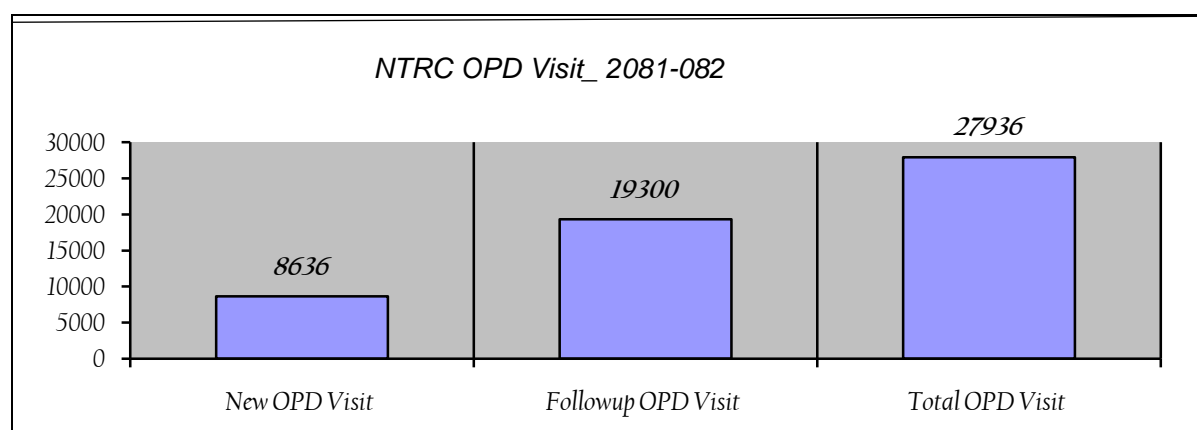
2. BACKGROUND

TB Nepal is located in Salyanibag Ward No. 4, in the heart of the Nepalgunj Sub-Metropolitan City. A rapidly expanding Sub-Metropolitan City, Nepalgunj is not far from the Indian border. It serves as the administrative center for the Banke district. The majority of the clients served by the TB Referral Center Nepalgunj are residents of Lumbini Province, Karnali province, Sudurpaschim province and the Indian border Region. Leprosy and Tuberculosis services are both offered by TB Nepal.

3. SERVICES AT TB NEPAL

3.1 OPD Service

Nepalgunj TB Referral Centre (NTRC) has two separate (TB and Leprosy) OPD services. TB suspect and TB patients visited for TB investigation, follow-up visit and their complication management at TB Nepal, Nepalgunj TB Referral centre Banke. In 2081-082, a total of 27936 patients (New OPD Visit 8636 and 19300 Followup OPD Visit) received OPD services.



Main Activities at OPD

- TB / Leprosy suspects' registration and screening.
- TB / Leprosy diagnosis's
- TB case registration and TB treatment on DOTS.
- TB/ Leprosy case Referrals after diagnosis.
- Counseling and advocacy of patients for appropriate care in respective center if needs.
- TB / Leprosy related Health education to inpatients and outpatients.
- Late or defaulted TB and Leprosy patients chasing.

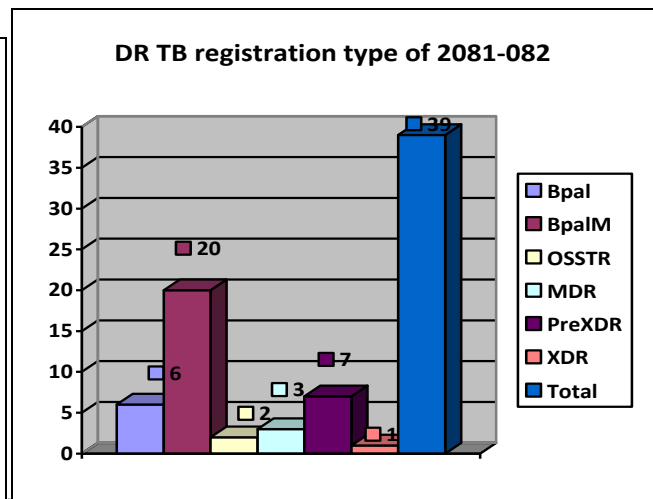
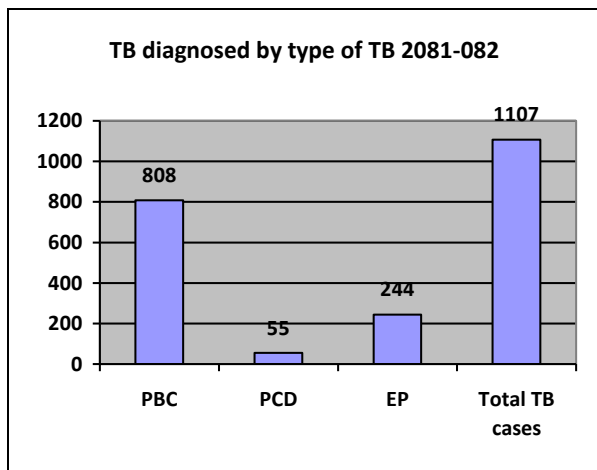


Fig: 1 Patients screening in OPD by Medical Officer

3.2 TB Treatment Services

Nepalgunj TB Referral Center (NTRC) is one of the 24 hrs DOTS (Directly Observed Treatment Short course) center of the district. The center provides daily DOTS (Directly Observed Treatment Short course) to first line TB patients and second line TB (MDR TB treatment) service to Multi-drug resistant TB patients. The centre also supervises and monitors MDR TB activities in the 12 MDR TB sub-center of the various part of this province. In total 39 DR TB cases were registered with in the year 2081-082. Currently, 44 DRTB patients taking second line TB treatment from various center and sub- centre of the Province. DR TB treatment success rate of TB Nepal is 63%.

Trend of Drug Sensitive & Drug Resistance Tuberculosis Diagnosis type wise



5 years trend of DS and DR TB Treatment Success rate in TB Nepal

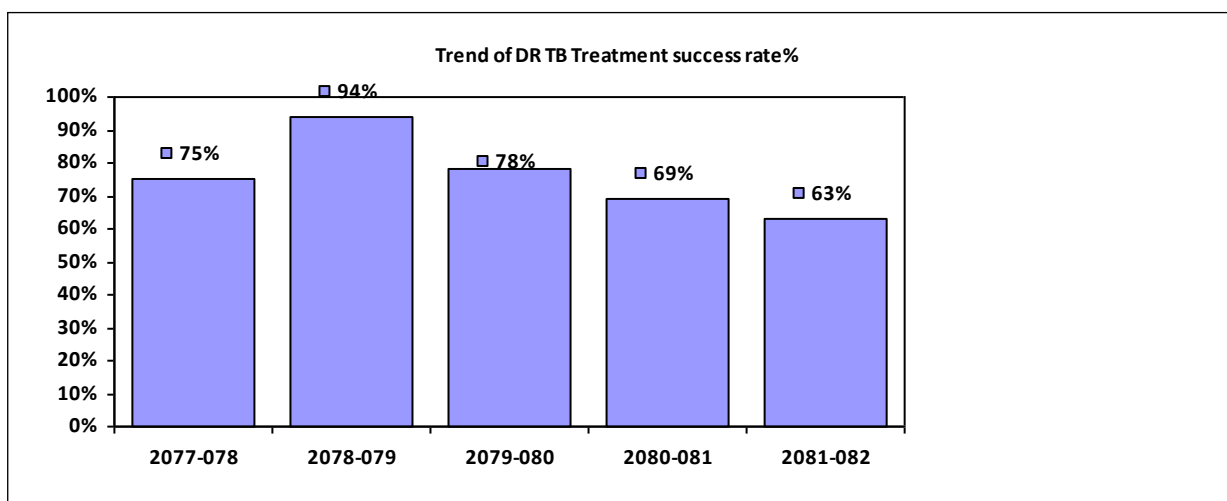
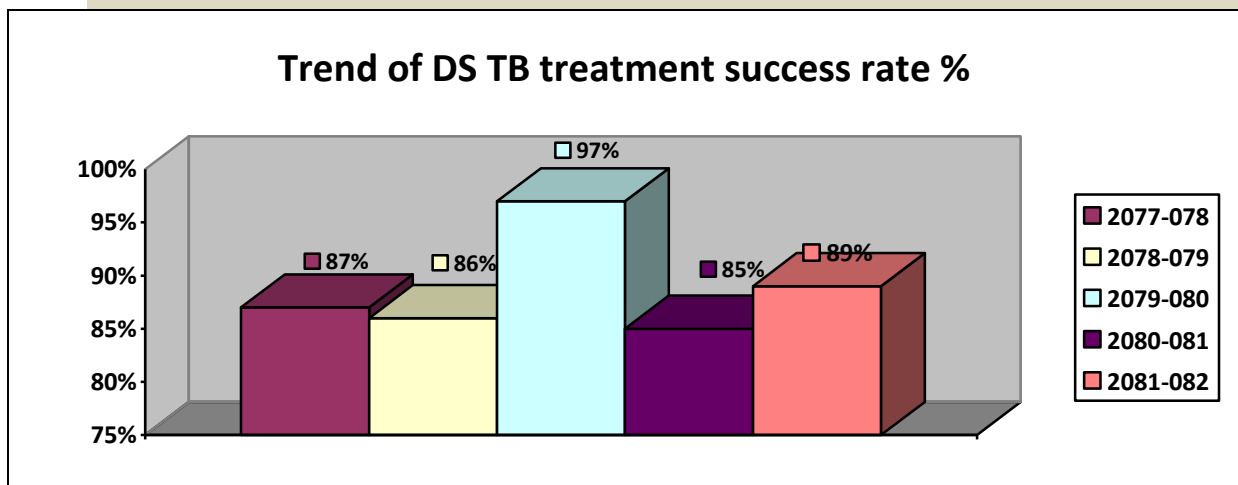




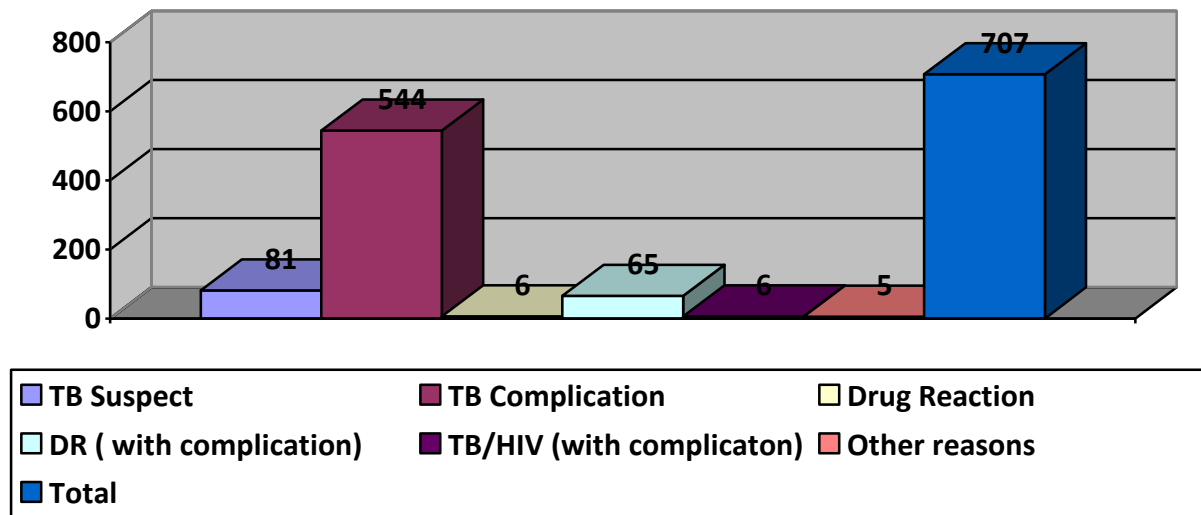
Fig: 2 Availability of 24 hours TB DOTS

3.3 In-patients service

The Nepalgunj TB referral Center has a 25-bed in-patient TB unit where care is given to very ill TB patients and TB suspects who need in-patient care but cannot receive such care elsewhere. The in-patient service is accessible around-the-clock every day. Both paramedics and medical professionals are always prepared for on-call duty and emergency management. For research and counseling, we have a very strong network with Medical College Hospital, Eye Hospital, Bheri Hospital, and different doctors. Patients with severe lung involvement, TB meningitis, spinal TB, MDR TB, TB patients with HIV/AIDS Co-infection, adverse drug reactions, and critically unwell TB suspects benefit from in-patient care. Patients and their family are also given access to patient recreation, counseling, advocacy, and health education services. Accommodation and nutritious food are free of charge. In the year 2081-082, a total of 763 TB patients were admitted. At the TB side, the average length of stay was 8 days and the bed occupancy rate was 63%. Patients admitted have a <0.1% mortality rate.

Trend of Inpatients Admission and Bed occupancy rate in TB Nepal

Inpatient admission of TB Related 2081-082



5 years trend of Inpatient bed occupancy rate in TB Nepal

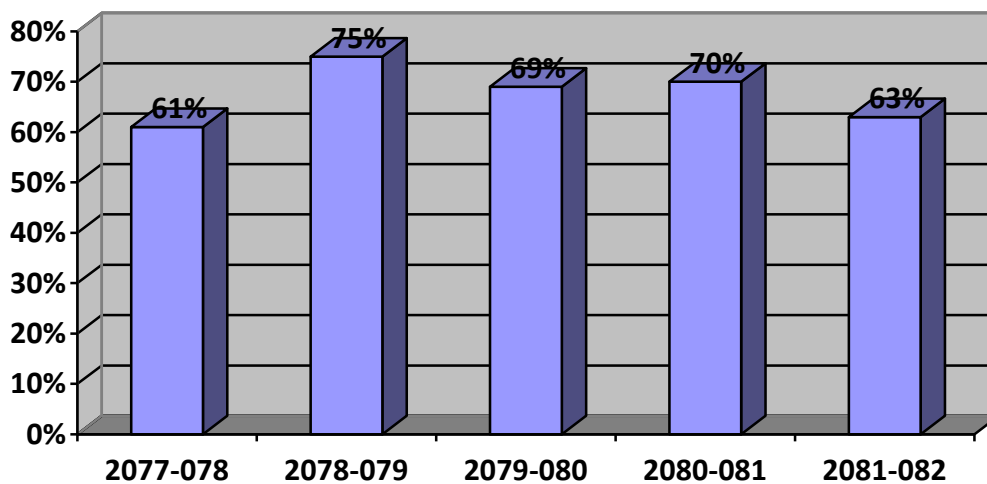




Fig:3 Inpatient care at TB Nepal



Fig:4 Extraction of fluid for Tuberculosis diagnosis by experience doctor

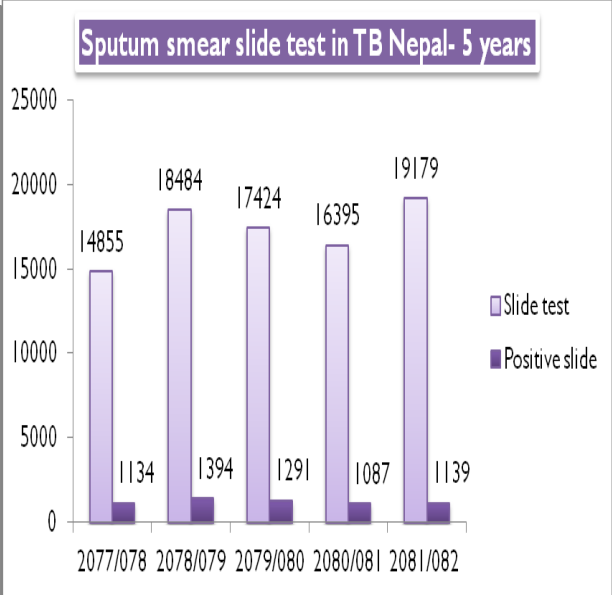
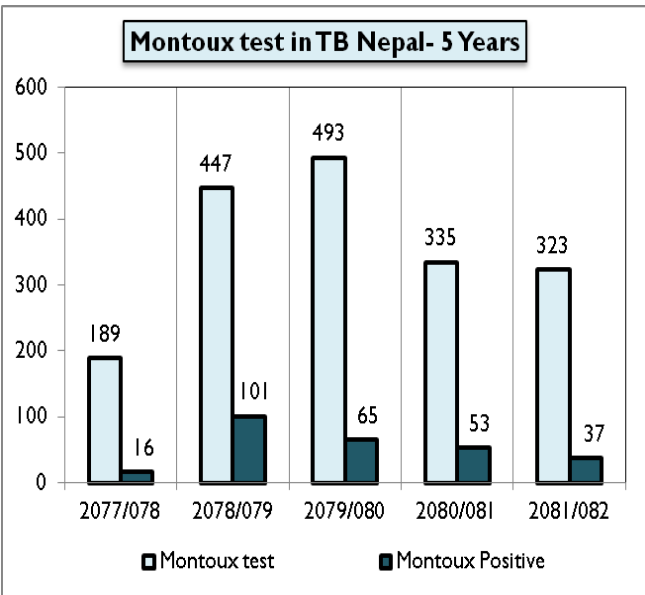
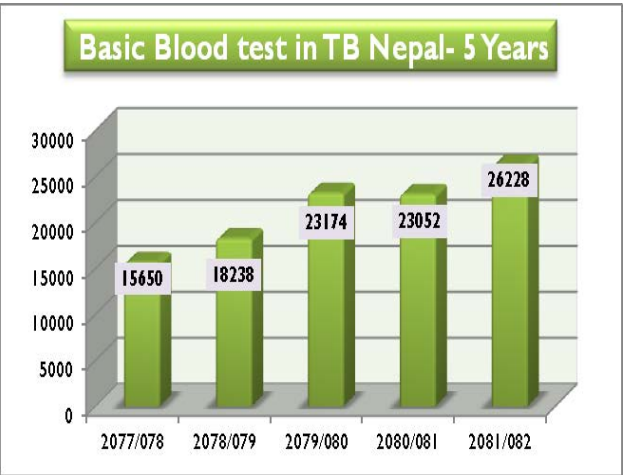
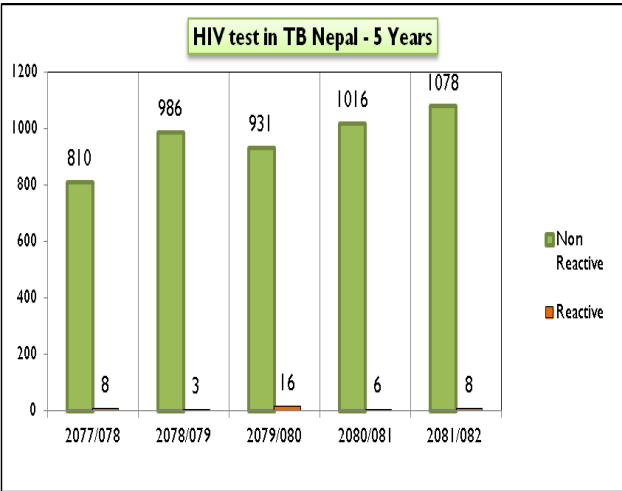
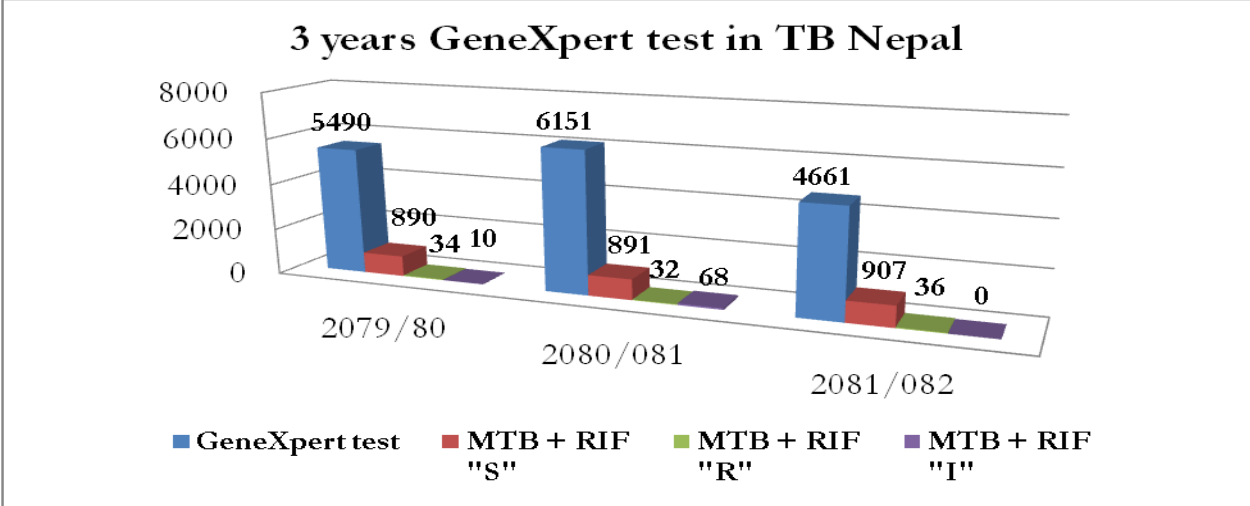
3.4 Laboratory

The laboratory at the Nepalgunj TB Referral Center is fully stocked with the essential tests to diagnose Tuberculosis. Our laboratory's primary role is sputum testing. Additionally, various tests are performed in the lab, including routine blood testing, HIV, Mantoux tests, urine tests, and stool tests. TB Nepal has a colter machine for hematological analysis as well as a chemical analyzer for laboratory testing. For the TB investigation, this center has a facility for fluorescence microscopy, Gene X-pert testing and LPA testing. For sputum culture and drug sensitivity testing, we have a strong network with the national reference laboratory. 235 samples of sputum were sent to Genetup Kathmandu this year for culture and sensitivity testing. This year, our laboratory conducted 19179 sputum smear slide tests & 1139 Positive Slide, 1078 HIV testing & 8 HIV Positive , 323 Mantoux tests, near to 26228 routine blood tests, 4661 Gene X-pert tests, and 4396 individual tests. Our four-monthly quality control report is outstanding, according to the Government Quality Control Laboratory.



Fig:5 Sputum microscopy and Gene X-pert service

Trend of GeneXpert test, Basic Blood test, HIV test , Montoux test and Sputum Smear Slide test in TB Nepal



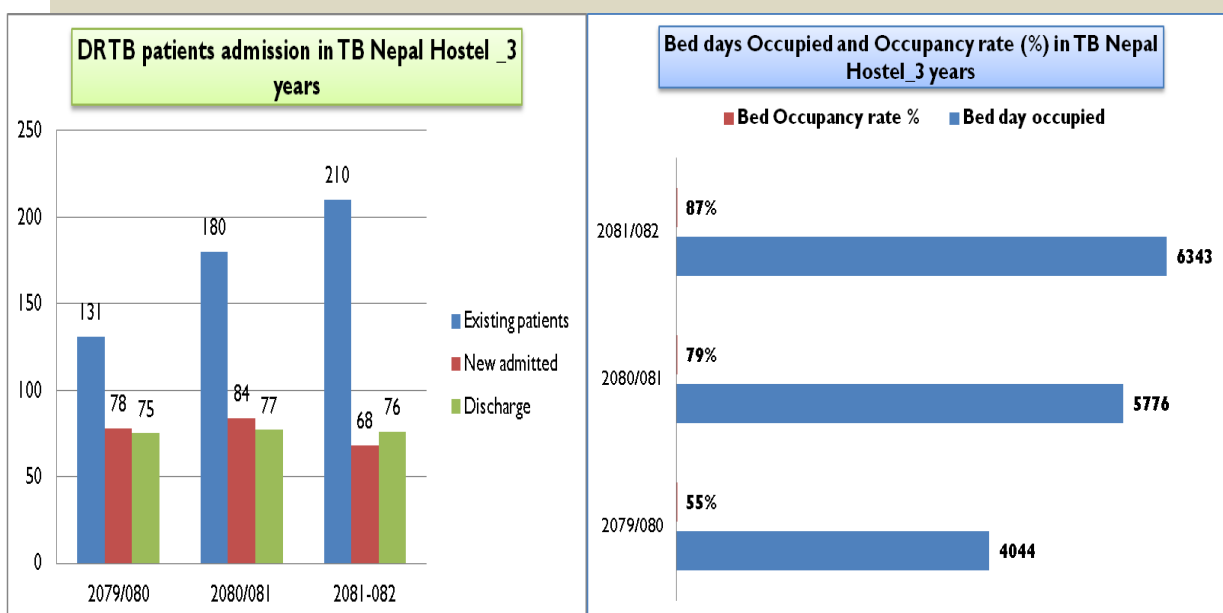
3.5 DR TB Hostel service

Nepalgunj TB Referral Centre is strategically based in Banke districts headquarter. The surrounding areas are highly affected by TB and there is still a high prevalence rate in the country. MDR TB Patients are from different parts of the Lumbini province, Karnali province and sudharpachim province for DR TB service. TB related medicines are free supplying from the National Tuberculosis Center.

❖ **Problem facing to manage with DR TB patients are as below:**

- i. The duration of treatment period is long for 9 to 24 months and DR TB service is not available at all health facilities. DR TB patients are not allowed to take medicines to their homes as the medicines have severe reactions, side effects and being compulsory institution based DOTS.
- ii. Some of the patients escaped from the clinic for their own work and fun due to the weak infrastructure and open boundaries.

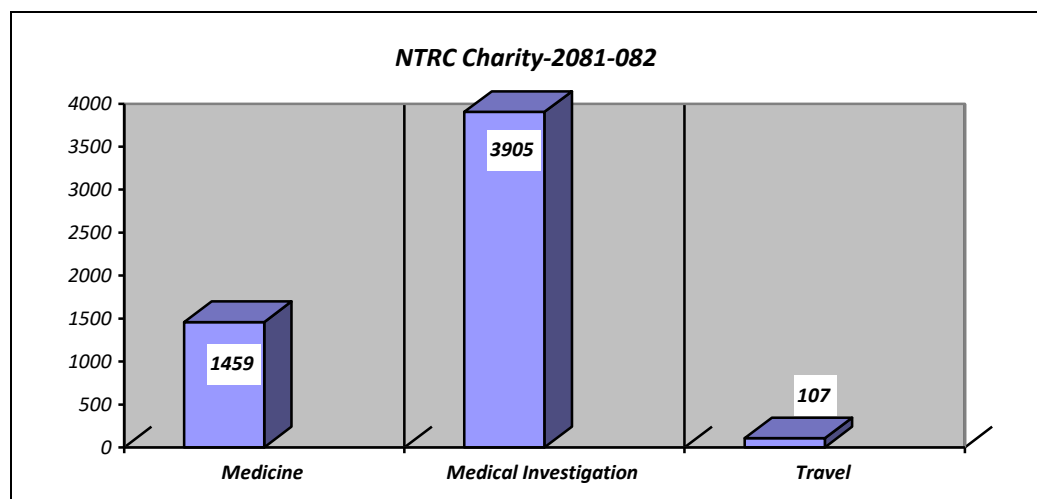
3 years trend of DR TB Patient's admission, Bed days occupied and Occupancy rate in TB Nepal Hostel



4. PROGRAMMATIC ACTIVITIES

4.1 Charity / poor fund

TB Nepal is managing charity fund for the vulnerable and ultra-poor. Nearly 5471 patients are being benefited from this Charity/Poor Fund in year 2081-082. Through medicine charity, investigation charity, support in transportation fare and food and accommodation. Charity is providing after the socio-economic assessment form filled from the patients and their families. Food and accommodation are free for all admitted patients.



4.2 Health Education Session

In addition to providing the usual services, the center actively engages in health education of patients about TB and its symptoms, transmission, diagnosis and treatment at OPD and in-patients



Fig: 6 conducting health education session by TB Nepal staff

4.3 Awareness Rising

Beside the regular services, the center was actively involved in awareness raising activities in World Tuberculosis Day, Leprosy Day and HIV/AIDS Day in coordination with the District public Health Office Banke.

4.4 Research (Study) activity

TB Nepal Nepalgunj TB Referral Center and the **BNMT Nepal** collaborated to launch the TARGET TB study activity. We also have collaboration with BNMT Nepal for the qualitative study research program on stigma and discrimination on TB patients.

We are also involved in the National TB Program's research on the issue of TB patient defaulter and sputum courier mechanisms. We contribute to field-level initiatives in Bardiya, Banke, Dang, Surkhet, and Salyan.



Fig 7: Involvement of NTP Research Program

4.5 Skill sharing and Field level activities

We provide technical support for the TB free initiative program in Rajapur Bardiya, as well as micro planning for municipality operations related to the TB free initiative to make the community free of Tuberculosis. We also continue to support the leprosy elimination campaign. We also assist Rajapur Municipality with leprosy elimination initiatives such as facilitation and active case finding.

During the current fiscal year, we share skills, to two lab assistants from Khajura Municipality on lab-related skills, including TB diagnosis tests and procedures.



Fig 8: Rajapur, Bardiya Municipality level orientation- TB Free initiative



Fig 9: Technical support to Municipality, Health Team

4.6 TB Day Celebrations

The Health Office, Banke organized World TB Day 2024, which was celebrated on March 24 with the theme "Yes! We can end TB!" Staff members from TB Nepal took an active part in the rally, which began from outside the Nepalgunj Sub-Metropolitan City Office area and wrapped up at the Nepalgunj Tuberculosis Referral Center with a speech from Health Office Banke. The celebration includes participation from NGO/INGOs, the private sector, and students studying health sciences from several colleges. Patients suffering from Tuberculosis who undergoes treatment to TB Nepal, received fruits and juice as part of their care.

We also celebrated World Milk Day, with respected Agriculture and Land Management Minister Mr. Bhandari Lal Ahir as our main guest, and we raised awareness and distributed milk to Tuberculosis patients, as well as shared information about the role of milk and other healthy foods in TB treatment success.



Fig 10: TB Day Celebration Rally



Fig 11 : Fruits and juice Distribution in TB Nepal



Fig 12 : World Milk Day Celebration with Agriculture and Land Management Minister Mr. Bhandari Lal Ahir

4.7 Blood Donation Program by TB Nepal

TB Nepal organized Blood donation program biannually in office premises for the TB patient's collaboration with Nepal Red Cross Society. The collection blood is used for the treatment of TB patients when needed. In the fiscal year 2081 the total 63 pint blood was collected.



Fig 15 : Blood donation program in TB Nepal

5. MONITORING AND EVALUATION

The Nepalgunj TB Referral Center maintains an up-to-date client and activity log. Staff from the TB Center attended a quarterly conference regarding TB held at the provincial, district, and Palika Levels. Supervisory visits by the Save the Children team, DTLO, RTLO, and NTCC supervisor occurred periodically. This year, NTCC and Save the Children/Global Fund performed a supervisory visit to assess and supervise the TB activities.

The Nepalgunj TB Referral Center conducts internal monitoring and evaluation of the center's performance on a monthly, quarterly, and annual

basis. This includes interviewing patients and having those interviews documented by a third party. TB Nepal is actively involved in Provincial-Level TB-related training, supervision, and meetings every four months.

ANNEXES

Annex I : Financial status

TB Nepal Total Income & Expenditure of FY 2081/082			
Particulars	Budget Rs.	Expenses Amount Rs.	Expense s %
Save the Children US/Global Fund (For Nepalgunj TB Referral Centre)	11686952	11686952	100%
UNDP Nepal / GF	6988800	6988800	100%
Lumbini Province (For Nepalgunj DR TB Hostel)	2957517.40	2957517.40	100%
Karnali Province (For Nepalgunj DRTB Hostel)	500,000	500,000	100%
DHO Banke (For DRTB Patients Nutrition allowance)	10,28000	10,28000	100%
TB Nepal Core fund	3408085	3363740.06	98.69%
Total Rs.	26569354.4	26525009.44	99.83%

Annex II: Name List of Staffs

S.N	Name of Staffs	Designation	Contact No
1	Mr. Hikmat Bdr. Khadka	Consultant Manager	9848029335
2	Mr. Kamal Dhakal	Clinic In-charge	9848086945
3	Mr. Mahesh Kumar Puri	Health Care Officer	9848056407
4	Dr. Satya Kumar Shahi	Medical Officer	9843414875
5	Mrs. Meena Regmi	Ward In-charge	9812517522
6	Mr. Chewan Kumar Sharma	Lab In-charge	9847892350
7	Mr. Amar Bahadur Sunar	Admin / Finance Officer	9866711012
8	Ms. Sanjita Chaudhary	ANM	9848109165
9	Ms. Megha B.K	Staff Nurse	9816506134
10	Mr. Karna Bdr Kc	Lab technician	9810910849
11	Mr. Prabin Chaudhary	Radiographer	9864865486
12	Mr. Narayan Chaudhary	CMA	9858034286
13	Ms. Bhimkala Pandey	Data Recorder / M&E	9864851627
14	Mr. Arjun Chaudhary	Admin Asst.	9745214385
15	Mr. Dharma Nath Yogi	Lab Assistant	9804545307
16	Mr. Bibek Regmi	Lab Asst.	9841895679
17	Mr. Suk Bahadur Roka	CMA	9816547833
18	Mrs. Manju Thapa	CMA	9800544243
19	Mr. Chandra Prasad Dangi	CMA/Dispenser	9848020609
20	Mr. Jag Bahadur Chaudhari	Defaulter tracker/chaser	9848198371
21	Mrs. Tej Kumari Bista	Lab Asst.	9804564702
22	Ms. Gita Kunwar	ANM	9844839792
23	Mrs. Sushma Thapa	Patients Advocator	9848135831
24	Mrs. Shova Regmi	Office Helper	9848199772
25	Mrs. Sara Thapa	Office Helper	9848174440
26	Mrs. Shobha Sunar	Office Helper	9815500143
27	Mr. Uttam Midhun Magar	Office Helper	9858043700
28	Mr. Baburam Tharu	Office Helper/Night watchman	9866728254

Annex III: New Building Construction photo of Nepalgunj TB Referral Centre Raptisonari GP-9 Dhakeri, Banke



We would like to express our hearty gratitude towards National Tuberculosis control Centre, Province Health Directorate, Nepalgunj Sub-Metropolitan Health Section, Health Office-Banke, UNDP Nepal/ GF, Save the children US/Global fund, BNMT Nepal and Leprosy control Division for proper guidelines and cooperation in relation to work. This is our opportunity to learn from National Tuberculosis Control Centre (NTCC) and save the children. We are proud to be a partner of NTCC, UNDP/ GF, save the children US / global fund, BNMT and Leprosy Control Division (LCD). Working with partnership with NTCC and LCD in controlling and treating Tuberculosis and Leprosy disease in the Lumbini province of the country. We would like to keep continue this relationships with NTCC , LCD , UNDP/ Global fund , Damien Foundation Nepal , BNMT, individual and other Funding agency for the help to the people affected by the TB / DR TB and Leprosy.