

Treating Patient, Not Disease: People-Centered Approach

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Transition from hospital-based care to primary health care:
optimization of TB services in Kyrgyzstan

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TB in the Kyrgyz Republic

- Socio-economic decline in the late 90's, sharp decline in the budget allocation for healthcare
- Problems with TB drugs supply
- Treatment quality failing to meet modern requirements
- Lack of social support for patients during treatment
- Deterioration of the epidemiological situation: TB incidence has reached 100 cases per 100 thousand population, and TB mortality — 16 cases per 100 thousand population

Measures for reduction of TB in the KR

- An appropriate regulatory framework for TB control was developed
- Implementation of the WHO's DOTS strategy was started, which aimed at detecting and treating infectious forms of TB
- The country receives effective TB drugs, laboratory and diagnostic equipment
- TB diagnostic and treatment services are provided free of charge

Measures for reduction of TB in the KR

- Law of the KR “On Protection of the Population against TB”
- Four programs were approved and implemented in 1996–2016:
 - Tuberculosis 1 for 1996–2000
 - Tuberculosis 2 for 2001–2005
 - Tuberculosis 3 for 2006–2010
 - Tuberculosis 4 for 2013–2016
 - **Tuberculosis 5 for 2017–2021**
- TB has become a priority component of the *Manas* and *Manas Taalimi* National Programs for Health Care Reform and the *Den Sooluk* Program

**Action Plan for optimization of TB services
in the Kyrgyz Republic in 2017–2026
(Government Decree No. 9-r, Jan 17, 2017)**



Action plan (Road map) for optimization of TB services in the Kyrgyz Republic for 2017–2026



Goal

Reduction of the incidence of TB and MDR-TB, increase of effectiveness of the use of available resources aimed at providing TB services to the population of the Kyrgyz Republic



Action plan (Road map) for optimization of TB services in the Kyrgyz Republic for 2017–2026



Components

Restructurization of the network of TB hospitals and optimization their activities

Strengthening the integration of TB services at PHC level and scaling up the outpatient care for TB patients

Improvement of TB laboratory diagnostic services



Action plan (Road map) for optimization of TB services in the Kyrgyz Republic for 2017–2026



Expected outcomes

- Annual detection of at least 70% of TB cases at PHC institutions;
- TB treatment success rate of at least 85% in PHC institutions;
- Downsizing TB beds in hospitals by 40% (1040) by 2020, and by another 20% (320) by 2026 as compared to 2016;
- Annual reduction of unjustified hospitalization rates in TB facilities by 10%;
- Economical effectiveness from the restructuring and optimization of TB facilities of 139.7 million KGS by 2020

Road map: Periods of implementation

Short-term
period
(2017–2019)

Mid-term
period
(2020–2022)

Long-term
period
(2023–2026)

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Components

Strengthening of the integration of TB services into PHC and scale up of outpatient care for TB patients

- Building the capacity of PHC institutions in TB care
- Provision of incentives to PHC healthcare workers for detected and successfully treated TB cases
- Development of a referral and re-referral system of TB patients
- Review TB functions of PHC institutions

Restructurization of the network of TB hospitals and optimize their activities

- Reorganizing the network of TB facilities
- Optimization of their activities
- Reduction of the number of inefficient beds and hospitals
- Reduction of the expenses on hospital infrastructure and bed capacity
- Reduction of the risk of nosocomial spread of MDR TB

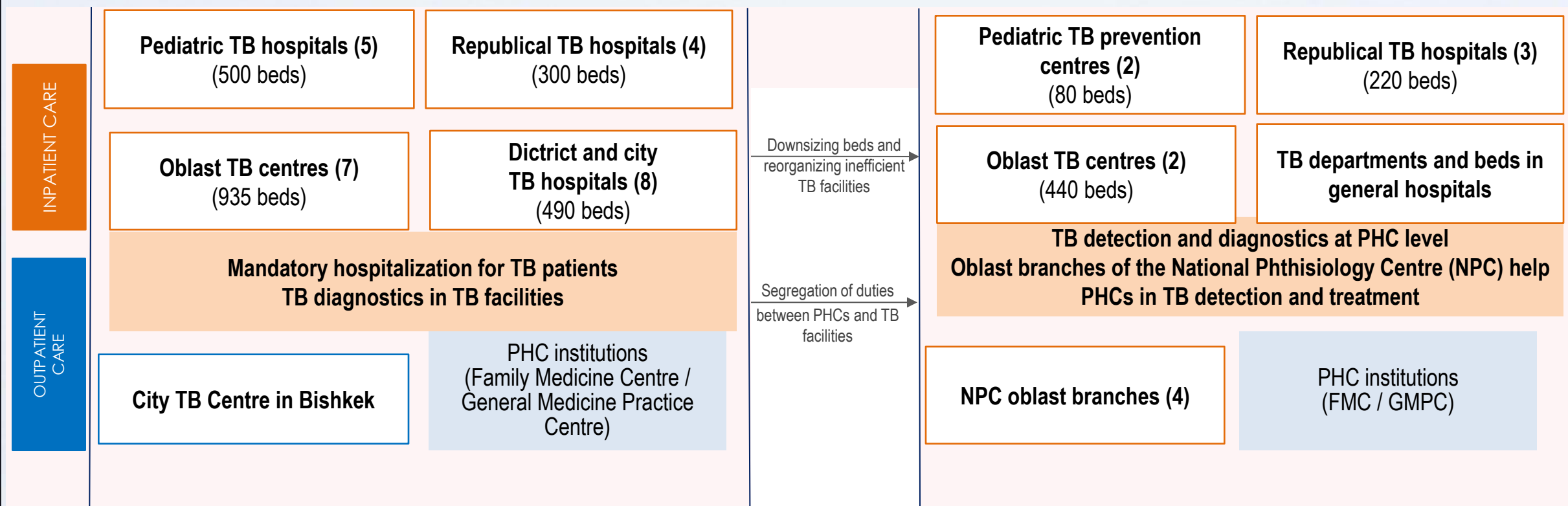
Improvement of TB laboratory diagnostic services

- Optimisation of the number of TB laboratories
- Implementation of a transportation system
- Provision of highly qualified laboratory diagnostics
- Access to Xpert MTB/RIF

TB services in the Kyrgyz Republic

Status as of 2015

Changes by the end of 2019



- Duplicated functions; no clear segregation of duties between TB facilities and PHC institutions;
- Lack of commitment in PHC institutions;
- Focus on inpatient care and risk of nosocomial spread of DR TB;
- Low TB prevention efforts and low-potent TB detection activities.

- + Strengthening of duties and responsibilities of PHC institutions in TB care
- + Decrease in drug resistance and TB stigma;
- + Effective operational use of resources.

Optimization of the network of laboratories performing microscopy

Regions	Current numbers	2017–2019	2020–2022	2023–2026
Bishkek city	28	9	5	3
Chuy oblast	13	6	4	3
Talas oblast	7	5	3	1
Issyk-Kul oblast	10	10	4	2
Jalal-Abad oblast	19	15	12	12
Naryn oblast	5	3	3	2
Osh oblast	17	9	9	6
Batken oblast	14	8	8	6
Osh City	14	6	3	2
Penitentiary system	4	3	3	3
Total	131	74	54	40

Problems during the implementation of the Action plan for optimization of TB services

- High MDR TB incidence rate
- Insufficient coverage with rapid diagnostic methods and DST
- Lack of commitment among administrations of TB hospitals to contribute to the optimization of TB services (decrease in hospital financing)
- Poor interagency cooperation
- Insufficient capacity and resources at PHC level to provide outpatient TB care, especially for DR TB
- High level of TB stigma and discrimination in the society

Priority actions

- Optimization and restructurisation of the system of provision of TB care in the Kyrgyz Republic;
- Improvement of the quality of TB diagnostics and treatment (incl. MDR TB) at the PHC institutions (access to Xpert, system of transportation of the pathological material);
- Introduction of the new system of payment for services of TB hospitals;
- Implementation of the results-based financing (RBF) for TB services at the PHC institutions;
- Development of plan for transition from drug donation programs to the state funding;
- Improvement of the system of TB patient registration and recording (TB e-database);
- Active engagement of the communities in TB detection and successful treatment efforts, with a focus on vulnerable groups of the population

Thank you for your attention!