

**Manage TB**  
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**Lecture – 67**  
**TB Notification**  
**Session 02**

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**Registration of health establishment for notification**

**Health Establishment Registration Form**  
(In TB notification)

1.	Name of Health Establishment
2.	Sector <input type="checkbox"/> Public <input type="checkbox"/> Private/NGO
3.	Type of Health Establishment <input type="checkbox"/> Laboratory <input type="checkbox"/> Private Practitioner /clinic (single) <input type="checkbox"/> Hospital / Clinic / Nursing Home (multi)
4.	HQ/Hospital/Clinical Registration Number
5.	Authorized Contact Person
6.	Designation of Contact Person
7.	Email
8.	Land Line Number (with STD Code)
9.	Mobile Number
10.	Complete Address
11.	PN Code

For Office Use

Registration Form Received on \_\_\_\_\_

Mode of Receipt  E Mail /  Post /  By Hand /  Fax

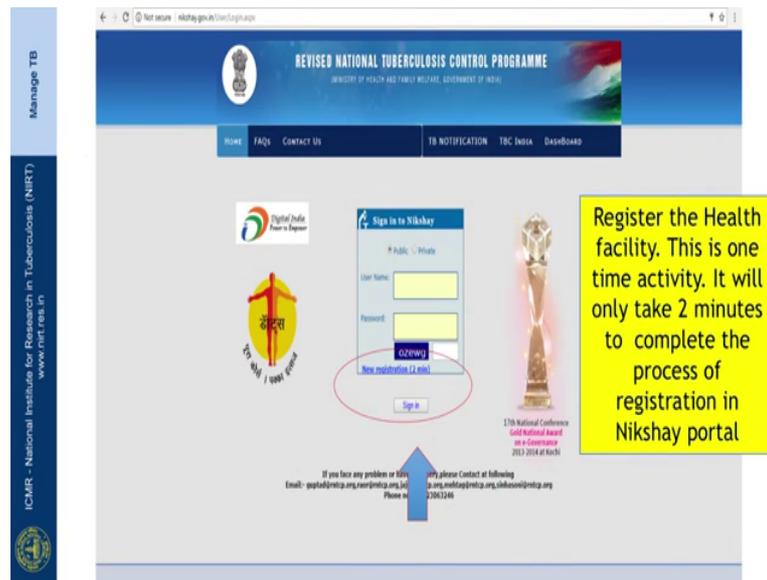
Verified By \_\_\_\_\_

Verified On \_\_\_\_\_

- Registration form can be availed from the nodal officer for TB Notification or from [nikshay.gov.in](http://nikshay.gov.in)
- Each registered health establishment will receive the unique number for further correspondence

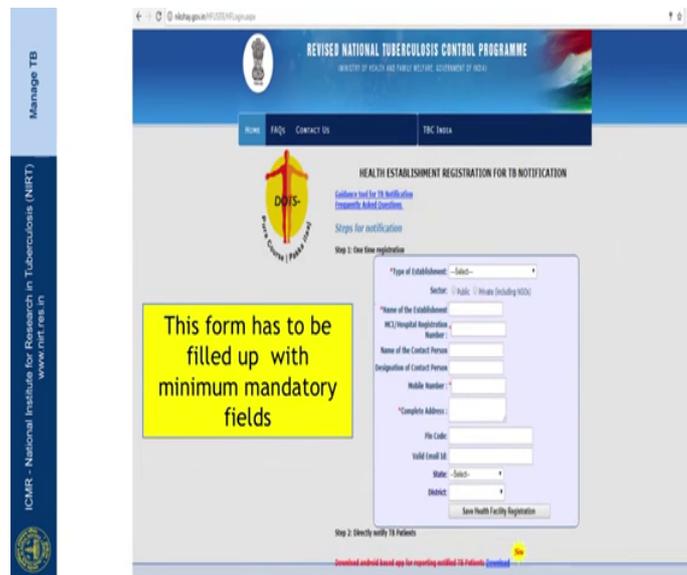
Now, what are the steps? The first step is to register as a health establishment for notification; it can be done directly the form case is available on the [nikshay dot gov dot in](http://nikshay.gov.in) portal, each registered health facility or establishment will receive the unique number for further correspondence.

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Now, we will see how to do this; this is the home page of nickshay dot gov dot in; for the first time any health facility it wants to register can enter the details and register the health facility. This will take that not more than 2 minutes and the process can be completed on this nikshay portal.

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The form which is seen has bare minimum variable as what is the name of the health facility, what is the registration number, the MCI registration number, address and

mobile number, it will not take more than 2 minutes and these are the mandatory fields for registration.

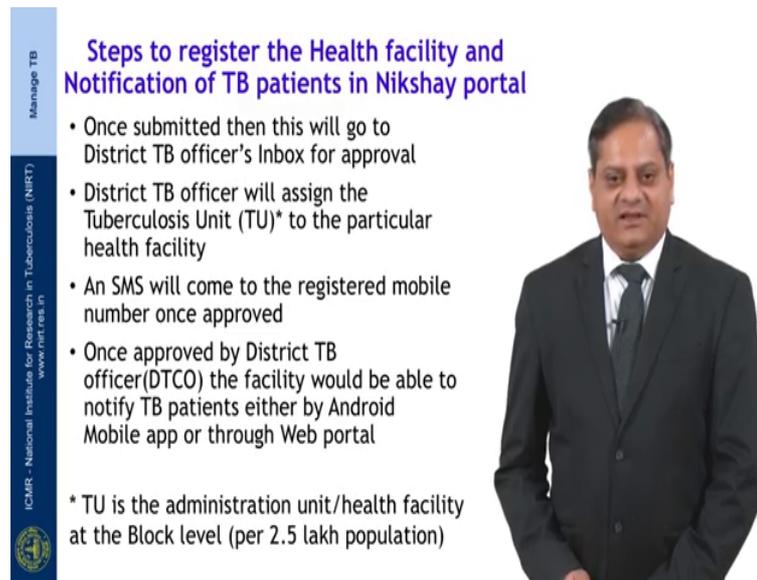
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Once submitted HFID would be generated and This will be used as User ID for future login and mobile number is the password

This is with the way as sampling registration is done on the nikhshay portal. Once the health facility enters all these details registration is done.

There will be a message that the registration process is completed and the unique ID will appear on the screen. The unique ID that is appearing on the screen at the end of the registration is the login ID for the health facility and the mobile number is the password, for all future logins and correspondence this login ID and password can be stored and can be updated from time to time once the registration is completed.

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**Steps to register the Health facility and Notification of TB patients in Nikshay portal**

- Once submitted then this will go to District TB officer's Inbox for approval
- District TB officer will assign the Tuberculosis Unit (TU)\* to the particular health facility
- An SMS will come to the registered mobile number once approved
- Once approved by District TB officer(DTCO) the facility would be able to notify TB patients either by Android Mobile app or through Web portal

\* TU is the administration unit/health facility at the Block level (per 2.5 lakh population)

So, after registration there is one formality once it is submitted it will go to the district TB officers inbox for approval, the district TB officer will assign the tuberculosis unit this is one small step that is added to facilitate time to time support from the district TB officer through the tuberculosis unit. The tuberculosis unit is an administration unit or a health facility usually at the block level on an average at 2 to 3 lakh population in the country.

So, the district TB officer will ensure that which tuberculosis unit will be assisting the health facility for the notification purpose and the follow up actions subsequently. On completion the SMS will be sent to the registered mobile number to the practitioner all the health facility once it is approved and it does not take more than 24 to 48 hours.

The once approved the district TB officer and facility will be able to health facility will be able to notify the patients both from the online portal as well as the mobile application.

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Manage TB

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### What are the roles and responsibilities of public health staff?

- Regular visits to private health facilities in the area of work
  - ✓ Understand requirement
  - ✓ Facilitate Notification
  - ✓ Sensitize their staff
- Provide formats, guidance tool, mobile application etc
- Collect, collate and submit the TB Notification reports
- Ensure all TB cases notified by Health Establishments are entered in Nikshay
- Visit the TB patients notified by the Health Establishments in consultation with them



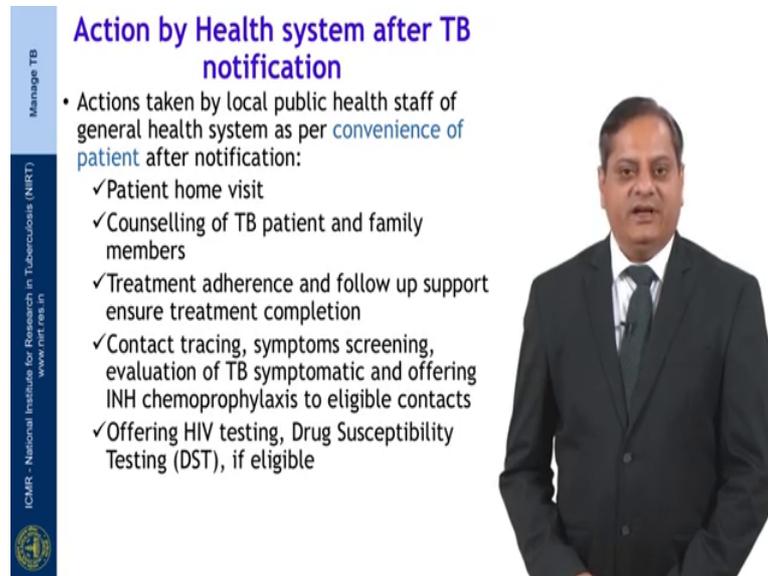
Now, once registered and the practitioner starts notifying TB cases; what are the roles and responsibilities of the public health staff? It is important that the regular visits are undertaken by the public health staff, to the private health facilities in their area of work to understand the requirement of notification as to what is convenient for them; do they want to send it from by hard copy or they want to they are happy or with the android application or is it that they can use it online portal or they want to use the call center in the toll free manner.

So, first understand those requirements, then facilitate notification if they are with only the hard copy then the staff has to go frequently and collect those hard copies and sensitize their staff as to what are the fields, the definitions for TB notification. So, this is an important task of the public health staff. Another thing is to give the formats, the guidance tool, the mobile application, installing it onto the mobile of the health facility or the practitioner, then collect collate and submit the TB notification reports to the district TB officials from time to time.

Ensure that all TB case is notified by the health establishments are entered in nikshay. If they are not directly reported from the nikshay portal or the android application, then visit this TB patients notified by the health establishment in consultation with them, this is very important. It is sometimes assumed that the health staff is going to visit the patient unnecessarily without his convenience, but it is not so.

The health public health staff has been sent sensitized and trained to ensure that they visit the notified TB patients from time to time based on the convenience of the TB patient.

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The slide features a vertical blue bar on the left with the text 'Manage TB' at the top, 'ICMR - National Institute for Research in Tuberculosis (NIRT)' in the middle, and the website 'www.nirt.res.in' at the bottom. The main title is 'Action by Health system after TB notification'. Below the title is a bulleted list of actions. To the right of the list is a photograph of a man in a dark suit and tie.

**Action by Health system after TB notification**

- Actions taken by local public health staff of general health system as per convenience of patient after notification:
  - ✓ Patient home visit
  - ✓ Counselling of TB patient and family members
  - ✓ Treatment adherence and follow up support ensure treatment completion
  - ✓ Contact tracing, symptoms screening, evaluation of TB symptomatic and offering INH chemoprophylaxis to eligible contacts
  - ✓ Offering HIV testing, Drug Susceptibility Testing (DST), if eligible

Now, what are the actions by the health system after this notification; once the information is available as per the convenience of the patient and only after the consent of the patient first important thing is patient home visit.

Then counseling of the TB patient and the family members which is equally important, treatment adherence and follow up support to ensure treatment completion which is usually lacking in the private sector patients, were treated by the private sector they get the best of the diagnosis and treatment. But at the same time there is no system to track this patient to support them over a period of time in an active manner.

So, this is one of the most important function of the public health staff to give them the treatment, adherence support, follow up to ensure treatment completion, then contact tracing symptom screenings among the contacts, evaluation of the TB; TB symptomatic, offering INH chemo prophylaxis to the eligible contacts is very very important and offering HIV testing because why policy globally all the TB patients are expected to be offered the TB HIV the HIV testing, the drug susceptibility testing to diagnose or rule out the drug resistance if they are eligible.

So, these are the actions which are required as a follow up of the TB notification.

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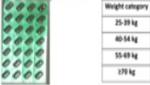
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## Patient benefits of TB notification ...1

Access to **FREE**

Diagnosis	Treatment
<p><b>Currently CBNAAT is provided for</b></p> <ul style="list-style-type: none"><li>✓ DST of re-treatment cases, follow up positives, PLHIV, contacts of MDR</li><li>✓ Diagnosis of TB in children, PLHIV, EP-TB</li><li>✓ Diagnosis of TB among CXR with abnormality</li></ul>	<p>Options for access to FDC from programme</p> <ul style="list-style-type: none"><li>✓ Linkages to access from public health facility</li><li>✓ Programme provided drugs at private practitioners</li><li>✓ Programme provided drugs at chemists</li><li>✓ Drugs from market (and reimbursed)</li></ul>



Weight category
25-39 kg
40-54 kg
55-69 kg
70 kg

Now, the most important thing as we said TB notification has to be patient centric. So, what are the benefits to the TB patients who have been notified by the private sector. First is access to free diagnosis and treatment; we all know that unless and until there is insurance the patient being treated by the private sector has to pay for it from his pocket.

But with this notification there are certain components of diagnosis and treatment by policy currently the CBNAAT or the gene expert available in the public sector has been offered the access has been offered by policy to all patients being diagnosed in the private sector for few purposes and those are that includes DST for retreatment cases, follow up of positives, PLHIV, contacts of multi drug resistant TB cases, diagnosis of TB in children, PLHIV, extrapulmonary TB, diagnosis of TB among chest X-ray with any abnormality.

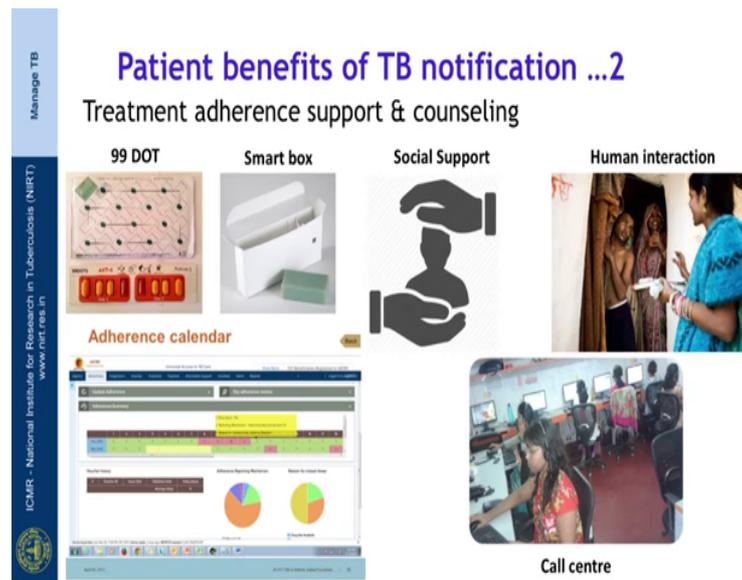
So, these are the cases and these 628 machines are available now; who can cater to and the access for diagnosis is available for the patients notified by the private sector.

Similarly, for treatment; the whole country has recently shifted from intermittent regimen to daily regimen and fix those combination anti-TB treatment for first line drugs is available from the program to patients being treated in the private sector. The linkages are being established they can avail the drugs from the public health facility or program

can provide the drugs to the private practitioners or the program can provide the drugs through the chemist to all these patients being treated in the private sector.

And slowly it will be expanded across all the country, in some of the parts of the country drugs being sold in the market are being reimbursed and there is a plan of the program to expand and scale up the services across the country.

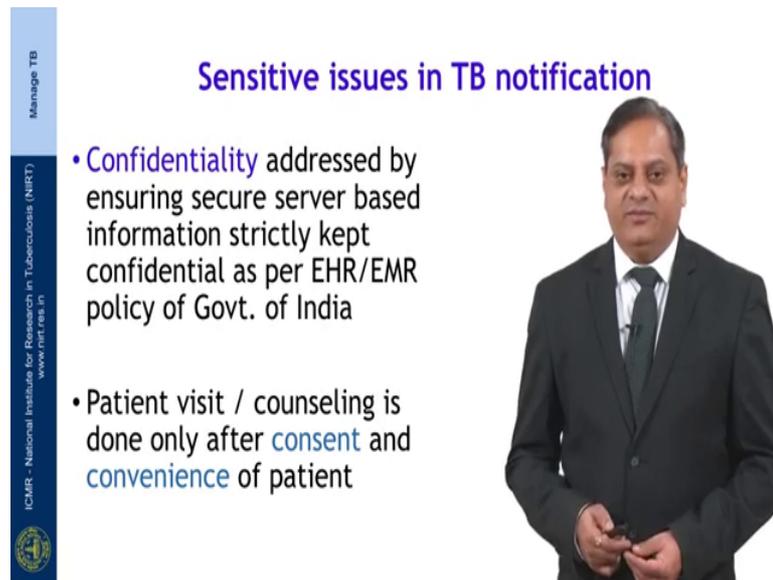
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The second and most important thing for completion of treatment is treatment adherence support system, information technology has come to our help and there are methods available now that includes 99 dots where the patient's taking the treatment just have to give a miss call on a particular number that appears after opening the spill.

There are smart box, there are other systems that includes video dot these things are being scaled up an ICT based treatment adherence support will be extended, is being extended to the patients not only in public sector, but also in private sector; that also includes human interaction, social support, linking with social welfare schemes and a big call center as a as we discussed in the previous session.

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### Sensitive issues in TB notification

- **Confidentiality** addressed by ensuring secure server based information strictly kept confidential as per EHR/EMR policy of Govt. of India
- Patient visit / counseling is done only after **consent** and **convenience** of patient



There are a few sensitive issues are about TB notification; whenever we discuss of course, there are certain things like confidentiality that needs to be ensured also because the information that is collected on TB notification is stored electronically through the nickshay portal on a centrally secured server. In the national data center of national informatics center and this is as per the EHR an EMR policy of government of India.

This is a regarding the data security, but at the same time please be rest assured that the information about the TB notification is not shared outside the health system; also the patient visit, the counseling is done only after that consent and the convenience of the patient so that no unwanted unauthorized access about either the information or the patient home visit is made by any of the health staff.



Recently the government has also started incentives for the private providers, the numbers may look small that is 100 rupees on notification and 500 rupees on completion per patient to the private provider for each TB patient notified and treatment completed.

But it is not a incentive per say a financial incentive per say it is just a compensation of small amount of 1 or 2 minutes that is taken for notification by a busy practitioner and even the government is thinking of increasing it to around 1000 rupees per patient.

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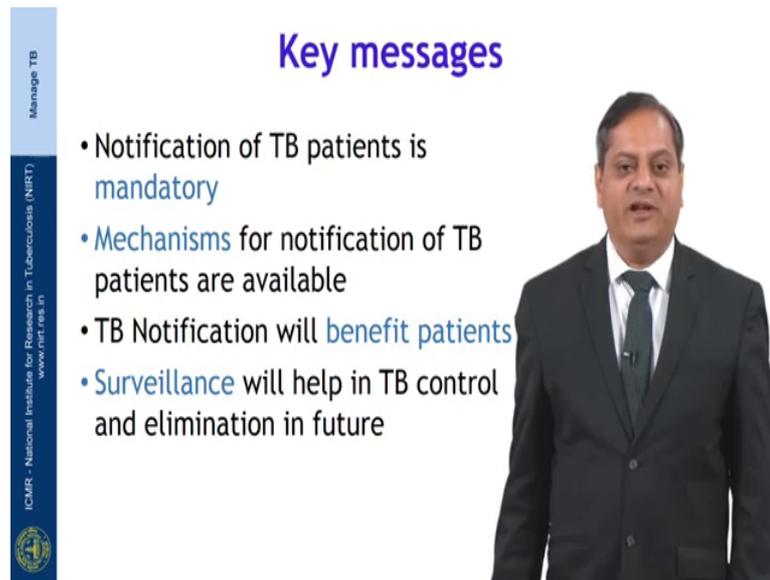
The slide features a vertical blue bar on the left with the text 'Manage TB' and 'ICMR - National Institute for Research in Tuberculosis (NIRT) www.nirt.res.in'. The main title is 'Next steps in TB notification'. To the right of the text is a photograph of a man in a dark suit and tie. The bullet points are as follows:

- In the next amendment, Government is making TB notification mandatory for all **Chemists & Druggists** by implementation of 'Schedule H1' as all anti-TB drugs are under this schedule
- Getting notification is one step, but Govt. is expanding the **free diagnostics** and **drugs services** after notification to all patients in private sector
- ICT based **treatment support** services are planned to be scaled up for all patients
- Increased financial service to patients and providers

Now, what are the next steps in TB notification? In addition to the laboratories and the hospitals and the clinics which are expected to do TB notification; the government of India is planning to increase the coverage and reach by including the chemist and druggist to allow TB notification and implementation of schedule H 1, which includes anti-TB drugs. Free diagnostics and free drug services are being expanded across the country not just in public sector, but for all TB patients in the private sectors if they are notified.

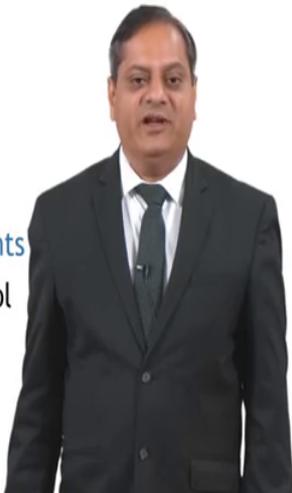
ICT based treatment support services are planned to be scaled up for all TB patients. There are increased financial services to patients and providers as has been planned in the national strategic plan and which will be implemented from 2018 onwards.

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The slide features a vertical blue bar on the left with the text 'Manage TB' at the top, 'ICMR - National Institute for Research in Tuberculosis (NIRT)' in the middle, and 'www.nirt.res.in' at the bottom. The main title 'Key messages' is in blue. The list of points is as follows:

- Notification of TB patients is **mandatory**
- **Mechanisms** for notification of TB patients are available
- TB Notification will **benefit patients**
- **Surveillance** will help in TB control and elimination in future



So, what are the key messages? Notification of TB patients is mandatory, mechanisms for notification of TB patients are available, they are convenient, TB notification will benefit patients and surveillance will help in TB control and in long run TB elimination in future.

Thank you.