

## **TB REACH Wave-2**

### **EXAMPLES of suitable interventions**

- Contact investigation: appropriate implementation of systematic screening of contacts of TB cases in the household, workplace, and/or relevant settings, e.g. in congregate settings such as refugee camps and prisons.
- Intensified TB case finding and treatment among people with HIV including in community settings (using the new international recommendations of symptom based clinical algorithm), and ensuring the provision of isoniazid preventive therapy for those identified.
- Screening of clinical risk groups – such as people with diabetes or who are malnourished, smokers, previous TB patients.
- Screening of vulnerable and at-risk population groups, such as urban slum-dwellers, homeless, elderly, migrants, prison inmates or health workers in certain workplace settings.
- Innovations in sputum collection (i.e multiple samples collected during a single day at the point of seeking care, or at the patients residence/neighbourhood)
- Innovations in specimen collection sites and transportation to the laboratory.
- Strengthening and optimizing the smear microscopy services including fluorescent microscopy using LED microscopes.
- Introduction of Xpert MTB/RIF system at district and sub-district levels to diagnose additional TB cases using targeted algorithms.
- Innovative use of chest X-ray as a screening tool for TB in high-risk and vulnerable population, including the use of mobile digital X-ray with electronically transmissible results.
- Earlier and prompt TB screening and treatment among clients attending health facilities.
- Innovative approaches for systematically involving the communities and civil society organizations in detection additional TB cases.
- Innovative approaches for systematically involving private-for-profit health care providers in detecting additional TB cases.
- Systematic mapping and engagement of all relevant care providers, including pharmacists and traditional healers, in defined geographical areas to improve case detection.
- Working with large state and non-state hospitals to increase TB case notifications.
- Improved referral, transfer and tracking systems for suspected TB cases and patients especially in urban settings and in large hospitals in order to detect cases early and prevent loss of patients during diagnosis and treatment.
- Implementation of the Practical Approach to Lung Health (PAL) to improve the quality and early diagnosis of TB among patients who seek care for respiratory symptoms in primary health care settings.
- Innovations in ensuring increased access of vulnerable population and populations at risk to the health services for increased TB case detection.
- Innovative approaches for social mobilization and community involvement for promoting early diagnosis and treatment seeking and addressing barriers for accessing TB services.
- Innovative and sustainable models that use incentives and enablers for promoting early and increased case detection, including conditional cash transfer (CCT) models.
- Innovative approaches by international and national non-governmental organizations and community based organizations demonstrating effective linkage and working together with national programmes to ensure prompt and early TB case finding and treatment.

- Use of innovative e-health and m-health interventions (e.g. internet and mobile phones) to bridge the gap between patients and health care providers, promote early and increased case detection, track patients undergoing diagnosis and treatment, notify patients from all sources of care delivery and use as a channel for transmission of care and control related messages.
- Interventions for indigenous population groups, including provision of outreach services, more active forms of screening for diagnosis of TB, innovative models of linking with other indigenous population development projects to promote early detection and effective treatment of TB, etc.
- Developing new and innovative models of collaboration between TB services and maternal and child health services in order to detect additional cases of TB amongst women and children.
- Interventions already proven to detect additional TB cases in a cost-efficient and timely manner.