### Session N.00293

# 09. Establishing community MDR-TB programmes

## The Union

#### THE 46<sup>TH</sup> UNION WORLD CONFERENCE ON LUNG HEALTH

CAPE TOWN, SOUTH AFRICA 2-6 DECEMBER 2015

## Thursday, 03 December 2015, 13:00 - 16:00

Room MR 1.42

Type of session Post-graduate Course Track Drug-resistant TB care and treatment, including trials Track2 (optional) Patient-centred care Duration Half-day Max attendees 75 This course will provide practical information regarding decentralised community-based MDR-TB treatment Description programmes. Topics will provide participants information related to successful design, implementation and monitoring of community MDR-TB services based on population needs. The course will cover planning and budgeting, provider/personnel training, information and data sharing, adherence and retention in care, use of technology, and quality assurance. The outcome will be a stronger understanding of the elements to provide effective, patient-centered decentralised MDR-TB treatment 1. Policy-makers Target audience 2. TB and MDR-TB programme managers 3. TB and MDR-TB clinicians and nurses 1. Describe detailed steps to design, plan and run a programme for community-based management of MDR Objectives ΤВ 2. Provide practical examples of the initiation of community based MDR-TB services in a variety of contexts 3. Describe approaches to improve patient-centred care for MDR TB patients Programmatic Management of Multidrug-resistant TB (PMDT); community-based; patient-centred care Keywords Coordinator(s) Alisha Smith-Arthur (USA), Manith Hang (USA) Refiloe Matji (South Africa), Paul Daru (Bangladesh) Chair(s) 1. Designing a community-based MDR-TB programme: key considerations Presentations Refiloe Matji (South Africa) 2. Developing community support cadres for MDR-TB treatment in Indonesia Esty Febriani (Indonesia) 3. Approaches to working with private providers to improve access to MDR-TB services in local communities in Georgia Tamar Gabunia (Georgia) 4. Strengthening referral linkages and follow-up in decentralised MDR-TB systems of care Robert Makombe (South Africa) 5. Planning and building coalitions between providers and service points Samson Haumba (Swaziland) 6. Incorporation of mHealth solutions to support case management in Bangladesh Paul Daru (Bangladesh) 7. Incorporating social support and ensuring patient-centred care Jennifer Furin (USA)