

NATIONAL ACADEMY OF SCIENCE AND TECHNOLOGY 20 June 2022 Session 2

Panel Discussion on Government and Private Sector Collaboration in the PH TB Elimination Program: Perspectives and Best Practices

Cleotilde Hidalgo How

Philippine Pediatric Society
PhilCAT Section on Child and Adolescent TB

INITIATIVES OF PEDIATRIC SECTOR TOWARDS PUBLIC PRIVATE COLLABORATION:

2012-2013 : PHILCAT PRECONVENTION WORKSHOPS

2020-2021 : MEETINGS ON PPM

2021-2022: PPS-PHILCAT/CAT SXN-DOH



Stepping Up the PPS Engagement in TB Care and Prevention through Public-Private Collaboration

JOSELYN A. EUSEBIO, MD

President, Philippine Pediatric Society

EDWIN V. RODRIGUEZ, MD, MHPEd

Trustee, Philippine Pediatric Society

January 19, 2022

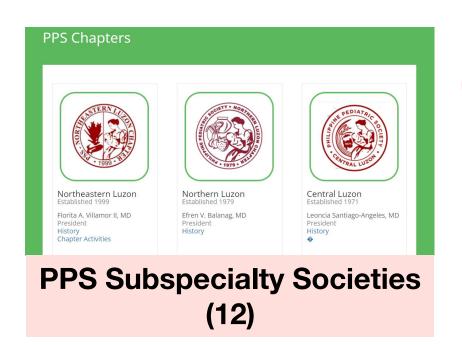


Contents

- Infrastructure Alignment of PPS in the National Framework of TB Care and Prevention
- Scope of Work
- Institutionalization of childhood TB Care and Prevention in
- IEC materials for childhood TB Care and Prevention
- Monitoring and tracking of program milestones and accomplishments



- Infrastructure Alignment of PPS in the National Framework of TB Care and Prevention
 - Channels for Program Download



>6000 members



ACCREDITED TRAINING HOSPITAL
(As of January 2022)

HOSPITAL CHAIRMAN ADDRESS TEL NO.

NATIONAL CAPITAL REGION - 52

Adventist Medical Center Aurora Gloria I. 1975 Donada St., cor. San Juan, Pasay Manila Libadia City

Amang Rodriguez Medical Blandina Trinidad F. Ferrera

Marikina City 941-3441

HAB Hospitals (112)

NCR = 52 /Subspecialty = 2/ Northeastern Luzon = 3 Northern Luzon = 5/ Central Luzon = 8/Southern Tagalog = 5/ Bicol = 2 Central Visayas = 11/ Eastern Visayas = 3/ Negros Occidental = 4/ Western Visayas= 5 Davao Southern Mindanao = 7/ North Central Mindanao = 4/Southwestern Mindanao = 1

Chapters (13)



Infrastructure Alignment of PPS in the National Framework of TB Care and Prevention

Organizational Alignment in PPM Structure Matrix

	Tier 1
"Bidirectional program implementation"	Tier 2
	Tier 3
	Tier 4

Philippine Pediatric Society	PhilCAT	Department of Health
President	President	Secretary Department of Health
Trustee-designate Chair, Committee on Child and Adolescent TB	Chair Child and Adolescent TB Sect	Undersecretary/Assistant Secretary/ Project Lead Designate
President Chapters Specialty Societies	Chair PhilCAT Local Coalition	Regional/Provincial TB Program Coordinator
Chairperson, Department of Pediatrics Chapter – HAB accredited training hospitals Chairperson, Designate Committee Subspecialty Societies	Chair PhilCAT Local Coalition	City/Municipal (LGU) TB Program Coordinator



PPS Recommendations:

- 1. Use of a **generic template/framework for bidirectional implementation** of childhood disease initiative with high public health impact.
- 2. Operational alignment of stakeholder functions.
- 3. Standardization of indicators and metrics of program success.
- 4. Simplification and harmonization of all operational aspects of the program.
- 5. Active and functional **oversight committee** from major stakeholders which will provide status of the program and needed measures to navigate the program towards completion and success.
- **6. Institutionalization** of childhood TB in medical curriculum, post-graduate residency training programs and continuing professional education requirements.

PPS-PPM Childhood TB Survey 2022

Edwin V. Rodriguez. MD, MHPEd

16 February 2022







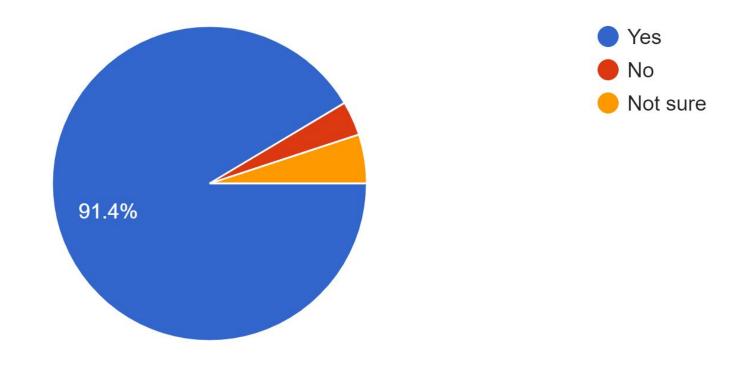
Rationale

- To situate the PPS with current knowledge, attitudes and practices in childhood TB care, a needs assessment survey was conducted.
- This will provide the PPS with baseline data on current experiences related to childhood TB care.
- Likewise, this will be a rich source of insights for future discussion on how best the PPS can be helped and how the PPS can help move forward to childhood TB agenda in the PH.

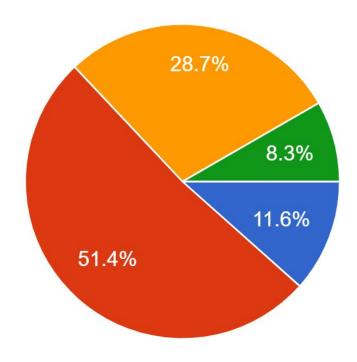
Objectives

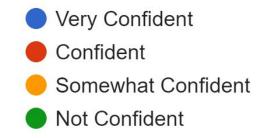
- Conduct an informal survey on needs and gaps from the experience and view point of pediatricians nationwide.
- Gather data on current practices in childhood TB care to serve as foundational bases of future plans and programs.
- Discover insights that can be used in drafting, designing or revising existing policies and guidelines used in childhood TB.
- Propose recommendations for improvement of existing initiatives towards this end.

Are you confident in identifying and diagnosing TB infection in children? 397 responses

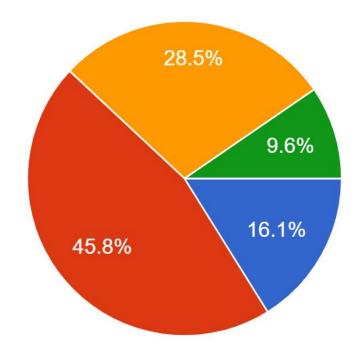


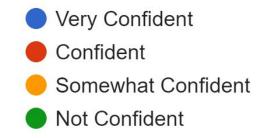
Are you confident in identifying and diagnosing extra-pulmonary TB in children? 397 responses



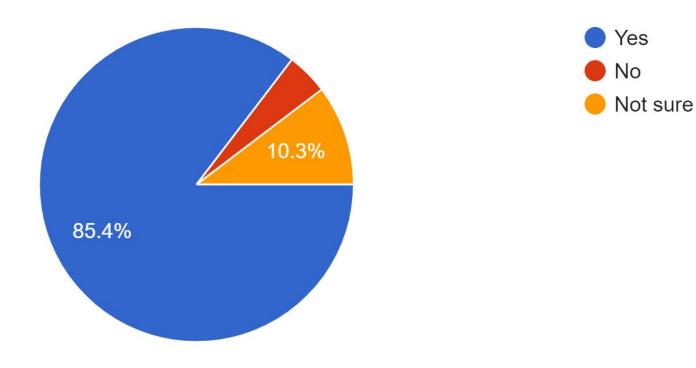


Are you confident in identifying and diagnosing latent TB disease in children? 397 responses



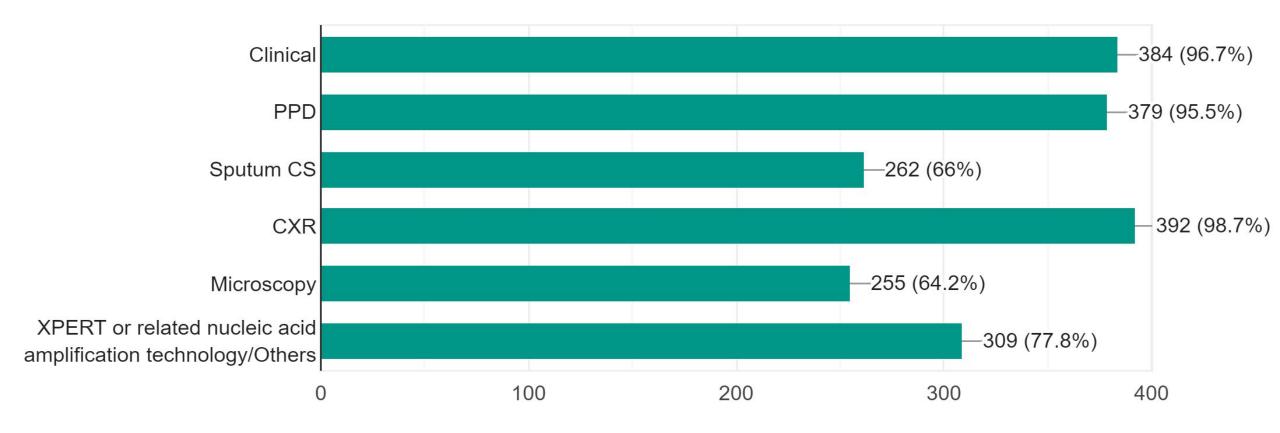


Are you aware of the current guidelines in the diagnosis of TB in children and adolescents? 397 responses



In your present workplace, which of the following are you using as diagnostic tool for TB in children? (Check all modalities available in your workplace)

397 responses





OTHER SURVEY QUESTIONS 397 RESPONDENTS	Yes (%)
AWARE OF CURRENT CHILDHOOD TB GUIDELINES?	90.7
TB MEDICATIONS AVAILABLE IN WORKPLACE?	95.0
CONFIDENT/VERY CONFIDENT TO MANAGE?	84.1
INTEGRATED/COMPREHENSIVE CARE?	67.3
PROVISION FOR COMMUNITY-BASED TREATMENT?	69.3
COMPLETE/CONCRETE TRACKING/ MONITORING ADHERENCE	43.6
ACTIVE TB SCREENING?	60.7

PEDIATR	ic s	
	OPPORTUNITIES TO TEACH PREVENTION?	YES 82.4
1947	HOUSEHOLD CONTACTS TRACED & SCREENED?	69.5
	SPECIAL TEST (HIV, MDR-TB?	66.0
	ACTIVE REGISTRY?	57.4
	DOCUMENTATION & DATA SECURITY?	65.5
	SUSTAINED MONITORING & SURVEILLANCE?	66.8
	RESEARCHES?	23.7 vs NO 41.1
	REFERRAL SYSTEM (for complicated cases)?	66.8
	DEDICATED TEAM FOR CHILD TB?	54.9
	ADEQUATE MANPOWER RESOURCE	44.6
	REGULAR TRAINING & CAPABILITY BUILDING	39.3
	COMMUNITY-BASED CAMPAIGNS?	51.9
	DEDICATED FUNDING?	15.9
	URGENT NEED FOR TB CARE?	84.8

Please rank the following areas of TB care from 1 to 5 as follows. 1 - needed now 2 - needed as soon as possible 3-needed but can wait 4 - not badly needed 5 - not needed at all



KEY AREAS OF CONCERN	NEEDED NOW/ASAP	CAN WAIT	NOT
FUNDING	59.2	27.3	13.5
MANPOWER SUPPORT	57.2	25.7	17.1
TRAINING/CAP BLDG	60.6	22.1	17.5
REFERRAL SYSTEM	56.3	20.5	23.0
GUIDELINES	57.2	15.8	17.1
AXS TB MEDS	51.7	11.7	26.5
ADVANCED CARE	53.7	19.8	26.4
RESEARCH	52.3	31.7	16.0
DISEASE REGISTRY	59.8	21.2	18.9
ADVOCACY/COMM MOBIL	60.8	19.4	19.7
PPM	60.6	21.7	17.6
MULTIDISCIPLINARY team	58.2	19.0	22.8
EDUCATION resources	60.4	18.4	21.2

It is apparent that from this preliminary survey, we will need a more extensive coverage for specific areas to uncover their unique gaps and needs as well. THANK YOU!