GOVERNMENT OF WEST BENGAL

DEPARTMENT OF HEALTH & FAMILY WELFARE

WBSAP&CS

1st floor, Swasthya Bhavan, Wing- B, GN-29, Sector V, Salt Lake, Kolkata-700091 Ph: 2333-0526, Fax: 2357-0122, Web Site: www.wbhealth.gov.in/wbsapcs

Memo No. :- ACS/TB-001-2011/ 150 8

Date: 04-12-2015

To
The Addl. DHS (TB) & State TB Officer
State TB Cell
Department of Health & Family Welfare
Swastha Bhawan.

Sub:- Resolution of State TB-HIV Working Group Meeting held on 17.11.15 at Conference Room of WBSAP&CS.

Sir,

I am hereby forwarding you Resolution of State TB-HIV Working Group Meeting held on 17.11.15 at Conference Room of WBSAP&CS for your perusal please.
Thanking you.

Memo No.:- ACS/TB-001-2011/ 1508/1(13)

Joint Director (BSD)

WBSAP&CS

4/12/15

Date: -04-12-2015

Copy forwarded to:-

- 1) Project Director, WBSAP&CS
- 2) Addl. Project Director, WBSAP&CS
- 3) Dr. P.K.Mondal, Joint Director (CST), WBSAP&CS
- 4) Dr. Santanu Halder, Addl. DHS (TB) & STO, Deptt. of H&FW, Govt. of West Bengal
- 5) Dr. Anindya Sen, Regional Co-ordinator (CST), NACO
- 6) Dr. Bipra Bishnu, RNTCP Consultant, WHO
- 7) Dr. Surjabanshi Sanjay, RNTCP Consultant, WHO
- 8) Dr. Suman Ganguly, Consultant (PPTCT), WBSAP&CS
- 9) Mr. Soumya Mondal, Assistant Director (M&E), WBSAP&CS
- 10) Mr. Saibal Maity, AD(PPTCT), WBSAP&CS
- 11) Dr. Papia Sen, Addl. Programme Officer, State TB Cell, Deptt. of H&FW, Govt. of West Bengal
- 12) Dr. Rammohan Parya, TB-HIV Co-ordinator, State TB Cell, Deptt. of H&FW, Govt. of West Bengal
- 13) Dr. Rashbihari Dutta, Dy. DHS (TB), State TB Cell, Deptt. of H&FW, Govt. of West Bengal

Joint Director(BS WBSAP&CS

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1st Floor, Swasthya Bhawan, GN29, Sector V, Salt Lake, Kolkata – 700 091

Resolution of TB- HIV Coordination meeting:

Venue: Conference Hall of West Bengal State AIDS Prevention & Control

Date: 17.11.2015 Time: 11:00 a.m. Society, Swasthya Bhawan, Wing-B, 1st Floor, Kolkata- 700 091

Attended by:

- 1) Dr. N. K. Halder, Joint Director (BSD), WBSAP&CS
- 2) Dr. P.K.Mondal, Joint Director (CST), WBSAP&CS
- 3) Dr. Santanu Halder, Addl. DHS (TB) & STO, Deptt. of H&FW, Govt. of West Bengal
- 4) Dr. Anindya Sen, Regional Co-ordinator (CST), NACO
- 5) Dr. Bipra Bishnu, RNTCP Consultant, WHO
- 6) Dr. Surjabanshi Sanjay, RNTCP Consultant, WHO
- Dr. Suman Ganguly, Consultant (PPTCT), WBSAP&CS
- 8) Mr. Soumya Mondal, Assistant Director (M&E), WBSAP&CS
- 9) Mr.Saibal Maity, AD(PPTCT), WBSAP&CS
- 10) Dr. Papia Sen, Addl. Programme Officer, State TB Cell, Deptt. of H&FW, Govt. of West Bengal
- 11) Dr. Rammohan Parya, TB-HIV Co-ordinator, State TB Cell, Deptt. of H&FW, Govt. of West Bengal
- 12) Dr. Rashbihari Dutta, Dy. DHS (TB), State TB Cell, Deptt. of H&FW, Govt. of West Bengal

Memo No:- ACS/TB-001-2011/ 1 508

Date: 04-12-2015

The agenda of the meeting are as follows:-

- Mutual sharing of Lab Technician of both the programs
- Establishment of new FI-ICTCs in block level health facilities not covered by Stand alone ICTCs
- Development of training plan on both the programs
- Issuance of joint directives regarding TB-HIV collaborative activities
- Planning for implementation PITC in selected districts
- ICF activities at ART centres
- Miscellaneous

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The meeting was chaired by Dr. N. K. Halder, Joint Director (BSD), WBSAP&CS.

After the detailed discussion the following resolutions were adopted.

- It was decided that the Lab Technicians of 43 Stand alone ICTCs (being established 15 and already existing in 28) will be provided RNTCP training in phased manner. BSD will share the details of the ICTC Lab Tech. After training an order will be issued from SACS end to those trained LTs to perform Sputum microscopy in addition to their routine ICTC duties.
- After establishment of all the sanctioned Stand alone ICTCs, around 104 block level health facilities will be there without stand alone ICTCs where DMC Lab Technicians are in place. These facilities will be converted to ICTCs. These LTs will be trained by ICTC division for performing ICTC testing and the training will be completed by February'2016. Following that they will be performing the job of ICTC lab tech in addition their routine activity.
- STC will make necessary transfer of the LTs from block level facilities to PHC level DMCs and the sputum microscopy of the block level facilities will be performed by ICTC Lab tech. This process may be adopted for mutual benefit of the public health programs to combat the staff vacancy and shortage.
- PITC (HIV testing) of Presumptive TB cases [TB Suspects], will be launched in 2 districts i.e. Burdwan and Uttar Dinajpur to begin with and will be escalated gradually. For both the districts one day orientation will be given at the district level with state level representations from both the programs. The tests will be performed by the DMC Lab Tech using Whole Blood Finger Prick Test kits. The Kits will be supplied by SACS as of now.
- STC will try to factor budgetary provision in upcoming PIP for procurement of such kits. Regarding reporting mechanism of this testing performance, district level reporting mechanism in SIMS software may be followed. This may be worked out in details in consensus with both the divisions.
- Regarding testing of TB cases for HIV at subcentre level, STC will follow it up with Secretary PHP regarding approval and further planning.
- Data was shared by the Regional Coordinator, CST, NACO that there is gross underreporting of co-infected cases in RNTCP. Total number co-infected reported in CST division of WBSAPCS is nearly double the number reported in RNTCP Epicenter. The reason for this is poor quality of counseling of TB patients while sending them for HIV testing to ICTCs. This area needs to be looked into.
- As for visit of district TB-HIV Coordinators to ARTCs, it has come down drastically and needs to be reinstated and at two visits per month must be ensured by them. Also, presence of DTO or a representative to ARTC Coordination meeting need to be ensured to strengthen HIV-TB Coordination at ARTCs.
- With CBNAAT machines being installed at district hospitals and Medical Colleges, all the ARTCs will be linked with them, where all chest symptomatic PLHIV will undergo diagnostic test. In this context, it was

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decided that one of the two new machines that will be shortly provided to Kolkata will be installed at COE STM, to which all TB facilities in the district (Strand Bank Road) and all ARTCs in Kolkata will be linked.

Few districts are running shortage of Cotrimoxazole DS tablets for prophylaxis of the PLHIV, during last few months. CMOH of all districts to be advised to process procurement and supply of the same to ARTCs for PLHIVs in general and to DMCs for TB-HIV coinfected patients. Assessment of annual requirement for the same may be sought from DNOs (Dy. CMOH II) and DTOs respectively.

PPTCT Consultant,

WBSAP&CS