

# **Overview of new and updated TB indicators in the Global Fund GC7 Modular Framework**

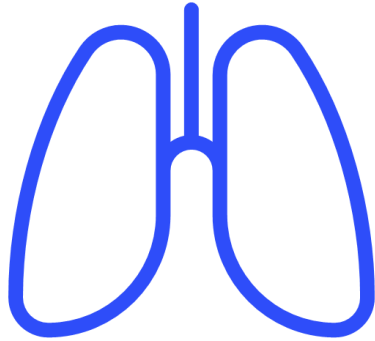
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18<sup>th</sup> April 2024

- **Background**
- **Overview of the GC7 TB Modular Framework**
- **Summary of new and revised TB indicators**
- **Group 1 TB indicators and KPIs**
- **TB Program Essentials**
- **Q/A**

# Global Fund's New Strategy: TB Sub-Objectives

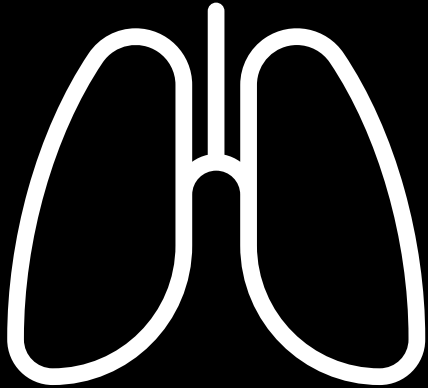


**The Global Fund Strategy (2023-2028) is an enabler to achieve global goals. Country ownership is still at the core of the Global Fund partnership and in-country partners are encouraged to adapt their responses according to context.**

- **Find and treat all people** with drug-susceptible TB (DS-TB) and DR-TB through equitable, people-centered approaches.
- **Scale-up TB prevention** with emphasis on TB preventive treatment and airborne infection prevention and control.
- **Improve the quality of TB services across** the TB care cascade including management of co-morbidities.
- **Adapt TB programming** to respond to the evolving situation, including through rapid deployment of new tools and innovations.
- **Promote enabling environments**, in collaboration with partners and affected communities, to **reduce TB-related stigma, discrimination, human rights and gender-related barriers** to care; and advance approaches to address catastrophic cost due to TB.

# Key Messages

## Rationale for updating the TB Modular Framework



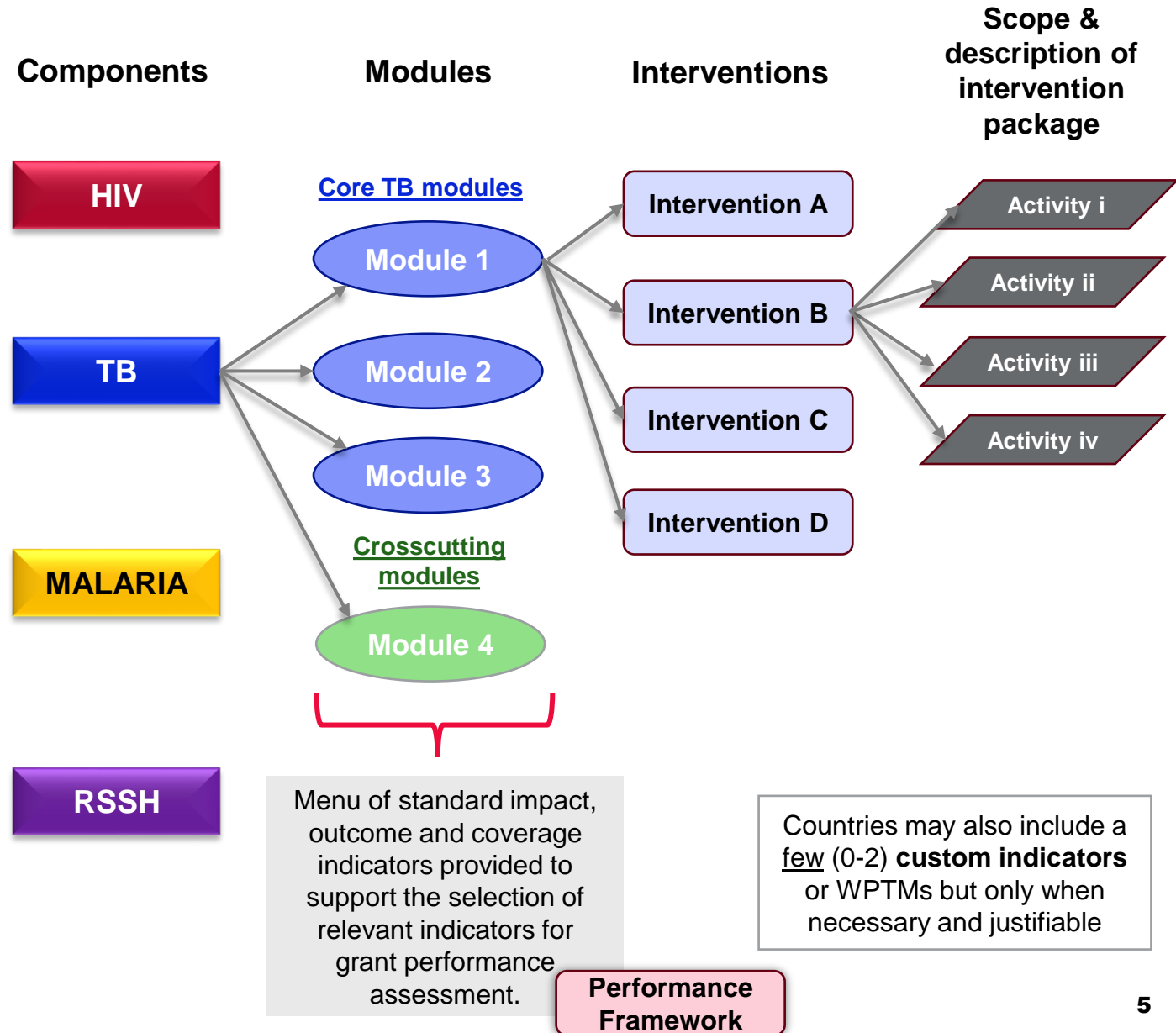
**Revision of activity descriptions and language to align with latest guidance and recommendation.**

**Streamline the current Modular Framework, avoiding repetitions and overlapping among interventions.**

**Ensure key interventions and key populations are prioritized through new modules and interventions.**

# What is the Global Fund Modular Framework?

- The **Modular Framework Handbook** is a guidance document that provides **standard modules, interventions and performance indicators** to support applicants and implementers in the development of funding request to the Global Fund (since 2014).
- It includes guidance for developing the Detailed Budget template, Performance Framework, the Health Product Management Tool (HPMT) etc.
- The modules further divided into a comprehensive set of interventions designed to address the three diseases and RSSH. The illustrative list of activities under each intervention is intended to guide applicants and Principal Recipients in selecting and organizing financial, procurement and programmatic information by strategic priority areas.
- **Note:** that M&E-related investments across HIV, TB and Malaria grants are budgeted under the relevant intervention areas under the RSSH: Monitoring & Evaluation Systems module



# The [TB Modular Framework](#) is linked to other Global Fund application materials and reflects global guidance and metrics.

## Information Notes

- The TB Modular Framework is aligned with the revised [Global Fund TB Information Note](#) and Program Essentials.
- Guidance to applicants preparing funding requests for tuberculosis programs and for [RSSH](#).

## Additional Resources

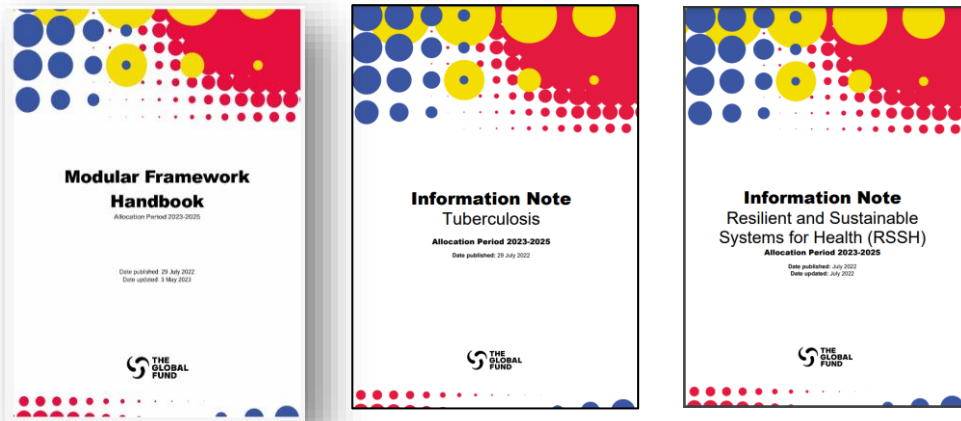
### 1. Global Fund Strategy 2023-2028

### [2. Technical Briefs](#)

Related Global Fund [technical briefs](#) and [briefing notes](#)

### 3. Global Guidelines

- Current international guidance/guidelines including WHO recommendations.



**Translations exist for all the Global Fund application materials.**

# Consultative revision process (TB)



# Summary of Changes: Updated Core TB modules and interventions for the Grant Cycle 7 Period (2024-2026)

Revised modules/interventions	
Module	Intervention
<b>TB diagnosis, treatment and care</b>	TB Screening and Diagnosis TB Treatment, Care and Support
<b>DR-TB diagnosis, treatment and care</b>	DR-TB Diagnosis/ Drug Susceptibility Testing (DST) DR-TB Treatment, Care and Support
<b>TB/HIV Care</b>	TB/HIV Screening/testing TB/HIV Treatment, Care and Support TB Prevention for people living with HIV (PLHIV) Community TB/HIV care delivery TB/HIV for Key and Vulnerable Populations (KVP) TB/HIV collaborative interventions
<b>Removing human rights and gender related barriers to TB services</b>	9 interventions (4 new)

New modules (new/recategorized interventions)	
Module	Intervention
<b>TB/DR-TB Prevention</b>	Screening/testing for TB Infection Preventive treatment Infection Prevention and Control
<b>Key and vulnerable populations</b>	People in prisons/jails/detention centers Mobile population (migrants/refuges/internally displaced populations (IDPs)) Mining/mining communities Children and adolescent People with Co-morbidities Urban poor/slum dwellers Other KVP
<b>Collaboration with other providers and sectors</b>	Private provider engagement in TB/DR-TB care Community-based TB/DR-TB care Collaboration with other programs/sectors





# New and updated indicators: definitions and measurement



# List of TB Modular/Performance Framework Indicators

2023 – 2025 Allocation Period (1/2)

**39 indicators**  
(4 impact, 7 outcome, 28 coverage indicators)

Module	Type of Indicator	Indicator Description
Impact indicators (All modules)	Impact	TB incidence rate per 100,000 population
	Impact	TB mortality rate per 100,000 population
	Impact	RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB patients with RR-TB and/or MDR-TB
	Impact	TB/HIV mortality rate per 100,000 population
Outcome indicators (All modules)	Outcome	Treatment success rate of all forms of TB - bacteriologically confirmed plus clinically diagnosed, *includes only those with new and relapse TB
	Outcome	Treatment success rate of RR TB and/or MDR-TB: Percentage of patients with RR and/or MDR-TB successfully treated
	Outcome	TB treatment coverage: Percentage of patients with new and relapse TB that were notified and treated among the estimated number of incident TB in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)
	Outcome	Treatment coverage of RR-TB and/or MDR-TB: Percentage of notified people with bacteriologically confirmed, drug resistant RR-TB and/or MDR-TB as a proportion of all estimated people with RR-TB and/or MDR-TB
	Outcome	Percentage of people diagnosed with TB who experienced self-stigma that inhibited them from seeking and accessing TB services
	Outcome	Percentage of people diagnosed with TB who report stigma in health care settings that inhibited them from seeking and accessing TB services
	Outcome	Percentage of people diagnosed with TB who report stigma in community settings that inhibited them from seeking and accessing TB services
TB diagnosis, treatment and care	Coverage	Number of patients with all forms of TB notified (i.e. bacteriologically confirmed + clinically diagnosed), *Includes only those with new and relapse TB
	Coverage	Treatment success rate- all forms: Percentage of patients with all forms of TB, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB patients notified during a specified period, *includes only those with new and relapse
	Coverage	Percentage of notified patients with all forms of TB (i.e. bacteriologically confirmed + clinically diagnosed) contributed by non-national TB program providers – private/non-governmental facilities; *Includes only those with new and relapse TB
	Coverage	Percentage of notified patients with all forms of TB (i.e. bacteriologically confirmed + clinically diagnosed) contributed by non-national TB program providers – public sector; *Includes only those with new and relapse TB
	Coverage	Percentage of notified patients with all forms of TB (i.e. bacteriologically confirmed + clinically diagnosed) contributed by non-national TB program providers – community referrals; *Includes only those with new and relapse TB
	Coverage	Percentage of new and relapse TB patients tested using WHO recommended rapid diagnostic tests at the time of diagnosis
TB/DR-TB Prevention	Coverage	Number of people in contact with TB patients who began preventive therapy
	Coverage	Percentage of people who completed TPT out of those who initiated TB Preventive Treatment
	Coverage	Contact investigation coverage: Proportion of contacts of people with bacteriologically-confirmed TB evaluated for TB among those eligible

# List of TB Modular/Performance Framework Indicators

2023 – 2025 Allocation Period (2/2)

Module	Type of Indicator	Indicator Description
TB/HIV	Coverage	Percentage of registered new and relapse TB patients with documented HIV status
	Coverage	Percentage of HIV-positive new and relapse TB patients on ART during TB treatment
	Coverage	Percentage of people living with HIV newly initiated on ART who are screened for TB
	Coverage	Percentage of people living with HIV currently enrolled on antiretroviral therapy who started TB preventive treatment (TPT) during the reporting period
	Coverage	Treatment Success Rate for HIV-positive TB patients: Percentage of HIV-positive TB patients, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated among all HIV-positive TB patients notified during a specified period; *includes only those with new and relapse TB.
DR-TB diagnosis, treatment and care	Coverage	Percentage of TB patients with DST result for at least Rifampicin among the total number of notified (new and retreatment) patients during the reporting period
	Coverage	Number of people with confirmed RR-TB and/or MDR-TB notified
	Coverage	Percentage of people with confirmed RR-TB and/or MDR-TB that began second-line treatment
	Coverage	Percentage of people with RR-TB/MDR-TB who did not start treatment and/or started on treatment for MDR-TB who were lost to follow up during the first six months of treatment
	Coverage	Percentage of DST laboratories showing adequate performance on External Quality Assurance
	Coverage	Number of people with pre-XDR/XDR TB enrolled on treatment
	Coverage	Treatment success rate of RR TB and/or MDR-TB: Percentage of patients with RR and/or MDR-TB successfully treated
	Coverage	Treatment Success Rate (TSR) for pre-XDR/XDR-TB: % of bacteriologically-confirmed pre-XDR/XDR-TB patients enrolled on treatment successfully treated
	Coverage	Percentage of TB patients with DST result for Isoniazid among the total number of notified people with TB (new and retreatment) in the same year
	Coverage	Percentage of Pre-XDR TB patients with DST results for Group A drugs, other than fluoroquinolones, among the total number of notified Pre-XDR TB patients (new and retreatment) in the same year
	Coverage	Percentage of RR/MDR-TB patients with DST results for Fluoroquinolone among the total number of notified RR/MDR-TB patients in the same year
Key and vulnerable populations – TB/DR-TB	Coverage	Number of people with TB (all forms) notified among prisoners; *includes only those with new and relapse TB
	Coverage	Number of people with TB (all forms) notified among key affected populations/ high risk groups (other than prisoners); *includes only those with new and relapse TB
Collaboration with other providers and sectors	Coverage	Treatment Success Rate (TSR) in private sector - % of TB patients, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated in the private sector

# Summary of Allocation Period 2020-2022 vs 2023-2025, by Module

## “TB” Indicators

Areas	2020-2022	→ 2023-2025						
	Total	Maintain =	Discontinue ×	Update →	New +	Moved ↻	Total	Net change
Impact (all modules)	4	3	0	1	0	0	4	0
Outcome (all modules)	8	3	1	4	0	0	7	-1
TB Diagnosis, Treatment and Care	10	1	1	5	0	3*	6	-4
Prevention	0	1^	0	0	2	0	3	+2
DR-TB Diagnosis, Treatment and Care	8	2	1	5	4	0	11	+3
TB/HIV	4	3	0	1	1	0	5	+1
Collaboration with other providers & sectors	0	0	0	0	1	0	1	+1
Key and Vulnerable Populations (KVP)	0	2^	0	0	0	0	2	+2
<b>Total</b>	<b>34</b>	<b>15</b>	<b>3</b>	<b>16</b>	<b>8</b>	<b>3</b>	<b>39</b>	<b>+4</b>

\*3 former TCP indicators (now called TBDT indicators) were moved to other modules. They are TBP-1 (formerly TCP-5.1) – to the TB/DR-TB Prevention module; and KVP 1 & 2 (formerly TCP-6a and 6b) – to the KVP module.  
 ^ = Prevention and KVP modules did not exist previously

**Discontinued indicators:** MDR-TB 7.1 - % of confirmed RR/MDR-TB cases tested for resistance to second-line drugs, TB O-1a: Case notification rate per 100k, TCP-3 (EQA for smear microscopy)



# New TB indicators for GC7: 8 new indicators

Module	Indicator	Numerator	Denominator
Drug Resistant-TB diagnosis, treatment and care (4)	% of TB patients with DST result for Isoniazid among the total number of <u>notified people with TB</u> (new and retreatment)	Number of TB patients with DST results for Isoniazid in the specified reporting period	Total number of notified people with TB in the same reporting period
	% of RR/MDR-TB patients with DST results for Fluoroquinolone among the total number of <u>notified RR/MDR-TB patients</u>	Number of RR/MDR-TB patients with DST results for Fluoroquinolone in the specified reporting period	Total number of notified RR/MDR-TB patients in the same reporting period
	% of Pre-XDR TB patients with DST results for Group A drugs, other than fluoroquinolones, among the total number of <u>notified Pre-XDR TB patients</u> (new and retreatment)	Number of Pre-XDR TB patients with DST results for Group A drugs other than fluoroquinolones (BDQ and LZD) during the specified reporting period	Total number of notified Pre-XDR TB patients in the same reporting period
	<b>Treatment Success Rate (TSR) for pre-XDR/XDR-TB</b>	Number of patients with bacteriologically-confirmed pre-XDR/XDR-TB enrolled on pre-XDR/XDR-TB treatment during the specified reporting period who are successfully treated	Total number of patients with bacteriologically-confirmed pre-XDR/XDR-TB notified during the same reporting period

**Pre-XDR TB Diagnosis**

**XDR TB Diagnosis**

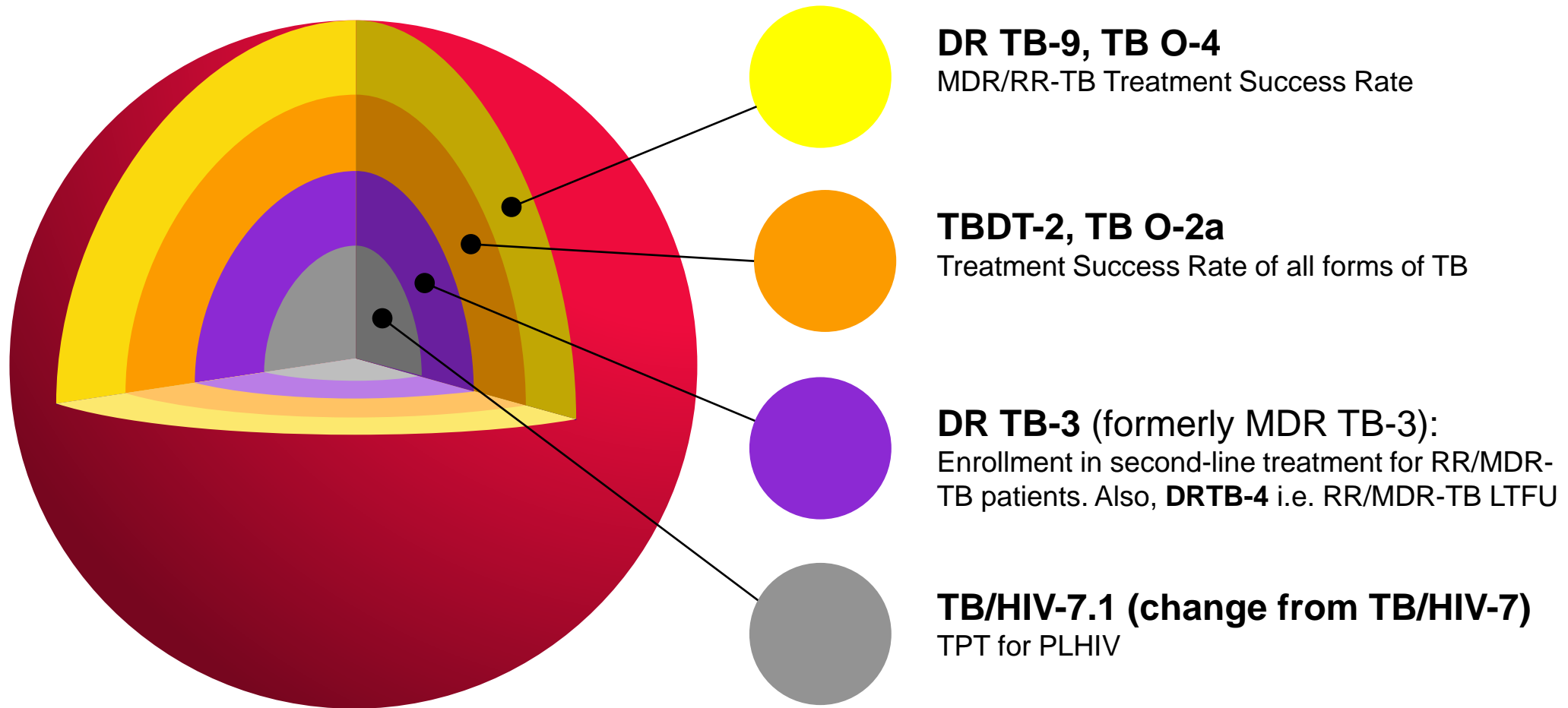


# New TB indicators for GC7: 8 new indicators

Module	Indicator	Numerator	Denominator
<b>Prevention (2)</b>	% of people who completed TPT out of those who initiated TPT	Total no. of people who completed a course of TPT during the specified reporting period	Total no. of people who initiated a course of TPT during the same reporting period
	TB contact investigation coverage	Number of HH contacts (and/or close contacts) of people with bact. confirmed TB who were evaluated for TB disease or infection	Total no. of eligible contacts of people with bacteriologically confirmed TB in the same reporting period
<b>TB/HIV (1)</b>	Treatment Success Rate for HIV-positive TB patients	Number of HIV-positive TB patients (i.e. bacteriologically confirmed plus clinically diagnosed) notified in a specified period who were successfully treated	Total number of HIV-positive TB patients (bacteriologically confirmed plus clinically diagnosed) notified in the same period
<b>Collaboration with other providers/ sectors (1)</b>	Treatment Success Rate in private sector	Number of people with all forms of TB (i.e. bacteriologically confirmed plus clinically diagnosed) in a specified period who subsequently were successfully treated in the private sector	Total number of people with all forms of TB (bacteriologically confirmed plus clinically diagnosed) notified in the private sector in the same period

# Indicator revisions with significant implications

*What are the key indicator revisions of note?*



# Indicator revisions with significant implications

*Why are the key indicator revisions of note?*

## DRTB-9, TB O-4

Revision of the denominators for Treatment Success Rates for RR/MDR-TB indicators from the 'total no. of bacteriologically confirmed patients **enrolled on second-line anti-TB treatment**' to the 'total no. of people with bacteriologically confirmed RR/MDR-TB **notified** during the year of assessment'.

This is to align with global best practice. It may have implications on target setting and indicator performance.

## TBDT-2, TB O-2a

Revision of the denominators for Treatment Success Rates for all forms of TB indicators from the 'total no. of all forms of TB cases **registered** for treatment' to the 'total no. of people with all forms of DS-TB **notified** in the same period'.

Also, to align with global best practice and may have implications on target setting and indicator performance.

## DRTB-3

Change from '**number (#)** of' to '**percentage (%)** of people with confirmed RR-TB and/or MDR-TB that began second-line treatment'.

This indicator now has a N and D. Numerator: Number of people with bacteriologically confirmed RR-TB and/or MDR-TB notified and started on second-line treatment regimen.

Denominator: Total number of people with bacteriologically confirmed RR-TB and/or MDR-TB notified during the same period

**DRTB-4 indicator** (formerly MDR TB-4) update: % **RR/MDR-TB who were lost to follow up** now refers to confirmed people with RR/MDR-TB **not started on treatment** and/or **confirmed patients started on SLDs who were LTFU by the end of the 6<sup>th</sup> month of treatment**



# Indicator revisions with significant implications

## TB/HIV-7.1 (change from TB/HIV-7)

Indicator	Indicator description	Numerator	Denominator
<b>TB/HIV-7 (previous)</b>	% of PLHIV on ART who initiated TB preventive therapy among those eligible during the reporting period	PLHIV on ART who initiated TB preventive therapy (TPT) during the reporting period (#)	PLHIV on ART who are eligible for TPT during the same reporting period (#)
<b>TB/HIV-7.1 (new)</b>	% of PLHIV <b>currently enrolled</b> on ART who started TB preventive treatment (TPT) during the reporting period	Total number of PLHIV currently enrolled on antiretroviral therapy who started TPT during the specified reporting period	Total number of PLHIV currently enrolled on antiretroviral therapy during the same reporting period

- The new indicator is one of the two global TPT for PLHIV indicators to be reported through the **UNAIDS Global AIDS Monitoring system (GAM)**. It is also a **GF HIV KPI**
- **Note:** When reporting the denominator results, the PR/country should also provide data on the 'number of PLHIV currently on antiretroviral therapy who have ever received at least the 1<sup>st</sup> dose of TPT' (i.e., excluding those who received it during the current reporting period), if data is available. The data should be reported separately in the PU/DR. This helps in understanding the 'number of PLHIV not previously initiated on TPT' which serves as the proxy for eligibility for this indicator.
- If a country's HMIS/data system is unable to also provide separate information on the 'number of PLHIV currently on ART who have ever received TPT', when reporting this indicator's denominator, the PR should include a comment in the PU/PUDR highlighting the unavailability of this contextual data

# Group 1 TB indicators and TB KPIs (GC7)

- All indicators once included in the PF are of equal value. Classification as Group 2 or 3 does not make the indicator non-essential or less important. It is to help selection of appropriate indicators to track Global Fund investments consistently across portfolios.
- **Group 1 indicators:** These are selected HTM, RSSH and CRG KPIs and indicators critical for monitoring success of GF strategy - to be included in all grants.
- Group 1 indicators are all coverage indicators. Compulsory for modules supported by the grant with the possibility to opt out (with strong/valid reasons).

KPI code	List of Group 1 indicators	TB KPI?
T1	# of people with all forms of TB notified	Yes
T2	TB Treatment Success Rate	Yes
T3	% with confirmed RR/MDR-TB on treatment	Yes
T4	DR-TB Treatment Success Rate	Yes
T5	TB contacts on preventive therapy	Yes
T6	ART coverage for HIV-positive TB patients on treatment	Yes
H7	PLHIV currently on ART who initiated TPT	No (HIV)
	% of TB patients tested using WRDs at the time of diagnosis	No
	# of people with confirmed RR/MDR-TB notified.	No

# Program Essentials

## What are they?

Program Essentials are **key evidence-based interventions and approaches** to address the ambitious goals set out in **the HIV, TB, and Malaria global strategies**

They will support **the Global Fund's key strategic objectives** to:

- *'maximize people-centered integrated systems for health to deliver impact, resilience and sustainability'*
- *'maximize health equity, gender equity, and human rights'*

As such, Program Essentials should be **addressed in all national disease programs** supported by the Global Fund (regardless of who is funding them)

## How were they selected?

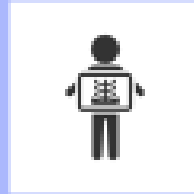
Elements **recommended by technical partners** (WHO, UNAIDS, Stop TB, RBM) and further described in their respective technical guidelines

**Critical interventions needed to achieve outcomes and impact** set out in global strategies (WHO, UNAIDS, Stop TB, RBM and the Global Fund)

**Crucial to ensure equity in access** to highly impactful interventions

# TB Program Essentials: Improving quality and innovations:

## 1. TB Screening & Diagnosis



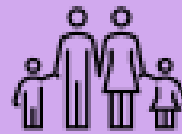
- Systematic screening using CXR +/- CAD
- Rapid molecular assays as first diagnostic test
- Testing for at least rifampicin resistance in bacteriologically confirmed TB
- Efficient TB diagnostic networks

## 2. TB Treatment & Care



- Child friendly formulations, 4-month regimen for non-severe DS-TB in children
- Shorter all-oral regimens for DR-TB
- People-centered support for treatment completion

## 3. TB Prevention



- TB Preventive Therapy available for all eligible people: PLHIV, children, eligible household contacts of people with bacteriologically confirmed TB.
- Shorter TB Preventive Therapy regimens

## 4. TB/HIV Collaborative Activities



- All PLHIV with active TB started on ART early as per recommendations

## 5. Cross-cutting areas

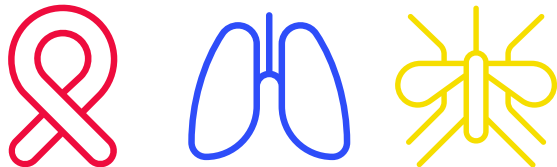


- Real-time digital case-based TB surveillance
- Private sector engagement
- Decentralized, community & home-based people centered services
- Human rights & gender-responsive programming

# How will Program Essentials be used in the GC7 period?

## Overall objective

Encourage countries supported by The Global Fund to **make progress toward achieving the Program Essentials** in their national disease programs (whether through GF grants or other means)



## *How will Program Essentials be used to meet this objective in the GC7 funding period?\**

- ① Countries will be asked to **outline their “level of advancement”** toward achieving the Program Essentials and identify any gaps
- ② Countries will **determine which interventions to address unmet Program Essentials** should be included in their funding request, guided by country and disease context
- ③ Where countries have **prioritized the introduction and acceleration of Program Essentials in funding requests**, the Global Fund – contingent on TRP / GAC review – will support countries in achieving and sustaining them
- ④ The Global Fund **will track and review progress against the Program Essentials** through established indicators and monitoring processes

**Program Essentials Summary (W1-W4): Largest gaps are in Systematic screening, Private Sector Engagement, real-time digital case-based surveillance & human-rights based programming.**

% of W1-4 countries reporting "yes"      % of W1-4 countries reporting implementation scale over 50%

TB Screening and Diagnosis	1.1 <b>Systematic TB screening is provided for those at highest risk</b> (key and vulnerable population), including through the use of <b>Chest X-rays, with or without computer aided detection</b> (currently recommended for people aged 15 years and older).	85%	46%
	1.2 Multiyear plan to achieve <b>universal use of rapid molecular assays as the initial test to diagnose TB</b> for all people with presumptive TB, with implementation on track.	96%	57%
	1.3 <b>All people with bacteriologically confirmed TB are tested for at least rifampicin resistance</b> and for those with RR-TB further tests are conducted to rule out resistance to other drugs.	90%	72%
	1.4 <b>TB diagnostic network operates efficiently</b> to increase access to testing and includes specimen transportation, maintenance of equipment, connectivity solutions, biosafety, quality assurance and supply system.	94%	62%
TB Treatment and Care	2.1 <b>Child friendly formulations, all oral regimens for DR-TB, and 4-month regimen</b> for non-severe, DS-TB are used for TB treatment in children.	68%	53%
	2.2 People with <b>DR-TB</b> receive <b>shorter, all oral regimens or individualized longer treatment regimens as recommended by WHO.</b>	96%	88%
TB Prevention	3.1 <b>TB preventive treatment</b> (including shorter regimens) is available for all eligible PLHIV (adults and children) and for all eligible household contacts of people with bacteriologically confirmed pulmonary TB.	97%	54%

**Program Essentials Summary (W1-W4): Largest gaps are in Systematic screening, Private Sector Engagement, real-time digital case-based surveillance & human-rights based programming.**

% of W1-4 countries reporting "yes"      % of W1-4 countries reporting implementation scale over 50%

TB/HIV	4.1 All people living with HIV with active TB are started on ARV treatment early as per recommendations.	98%	93%
	5.1 Establish, progressively scale-up and maintain a comprehensive, <b>real-time, digital case-based TB surveillance systems.</b>	79%	44%
Cross-cutting Areas	5.2 <b>Prioritized interventions are informed by cascade analysis</b> throughout the pathway of TB care, including for TB preventive treatment.	90%	65%
	5.3 <b>Engagement of private healthcare providers</b> is on a scale commensurate with their role in the healthcare system.	59%	25%
	5.4 Decentralized, ambulatory, <b>community-and home-based</b> , people-centered services are provided across the continuum of TB care	90%	66%
	5.5 <b>All TB programming must be human rights-based, gender-responsive</b> and informed by and respond to analysis of inequities; and include stigma and discrimination reduction activities for people with TB and TB-affected populations; legal literacy and access to justice activities; as well as support for community mobilization and advocacy and community-led monitoring for social accountability.	90%	43%



*Thank you*  
*Asante Sana*



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AIDS, Tuberculosis and Malaria

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# Q&A

