

Checklist for Visit of NTF/ ZTF/ STF members to Medical Colleges

1. Name of Medical College:
2. District (State):
3. Names of Team Members Visiting the Medical College:
 - a.
 - b.
 - c.

4. Diagnostic Activities:

a.	Is there a DMC in the Medical College hospital? <i>(If Yes, please record the information about the visit to the DMC in the table A below)</i>	
b.	Is there any other laboratory/ facility in the hospital where sputum microscopy is being performed?	
c.	If yes in "b", please name it: _____	
d.	Is this laboratory/facility (which is not a DMC) being quality assured for sputum microscopy under RNTCP?	

Table A: If there is a DMC in the Medical College, these aspects can be examined in the DMC:

	N	D	%
Proportion of TB suspects for whom 3 sputum smears were done for diagnosis? <i>(Can be estimated by examining a few pages of entries in the Lab register)</i>			
Proportion of TB patients for whom 2 sputum smears were done during follow-up examination? <i>(Can be similarly estimated by examining a few pages of entries in the Lab register)</i>			
No. of initial defaulters in the previous quarter:	Yes/No		

Is there a functional binocular microscope in the MC?	
Is a trained LT doing the sputum microscopy	
Are there adequate supplies of reagents, slides and other consumables for the next one-month?	
Are the lab reagents freshly prepared?	
If yes, where are they prepared (at MC/TU/District)?	
Are the names and addresses in the TB laboratory register written legibly?	
Are the positive results written in red & negative in blue/black?	
Is there a summary of the microscopy activities at the end of each month?	
Is the LT preserving slides for review by the STLS as per the quality assurance protocol?	
Is the STLS reviewing slides preserved by the LT during the on site evaluation?	
Is there evidence of EQA ('x', 'o' marks in the Lab register)	
Are the reports of On Site Evaluation done by STLS of the TB Unit available in the DMC (at least for last month)?	
Is corrective action as suggested in TU-OSE report being carried out by the DMC? (current status may be used as an assessment about the corrective actions taken)	
Is the DMC getting feedback on the results of RBRC done at district level? (Annex.D)	

Check one randomly selected positive and one negative slide. Is the quality of slides prepared satisfactory in terms of smear thickness, evenness, size and staining?	
Is the bio-medical waste from the DMC disposed as per Bio-Medical Waste (management and handling) Rules 1998?	

Is there a lab engaging in Mycobacterial culture and drug susceptibility testing in the Medical College: Yes/ No

If yes, does this lab intend to apply or has applied for accreditation under RNTCP? Yes/ No

5. Treatment Activities:

Are patient-wise drug boxes being marked and maintained for each outpatient receiving treatment at the DOT Centre in the Medical College?	
Are the facilities (clean water, disposable cups, privacy) for DOT satisfactory?	
Is there adequate arrangement available for providing Inj SM (if Cat II patients are receiving treatment at this DOT centre)?	
Is there consistency between the number of doses on treatment card and drug box? (check any 2 boxes)	
Box 1 (name_____)	Box 2 (name_____)
Are prompt home visits made to bring irregular patients back on treatment? <i>(For patients who have missed doses, the relevant section on treatment card can be checked for entries)</i>	
Have any of the drugs in the Patient Wise Boxes (PWBs) crossed the date of expiry	
Box 1 (name_____)	Box 2 (name_____)
Is home address verification done for patients before start of treatment? <i>(Treatment cards can be examined for entries in the section for Initial home visit)</i>	

Are second-line anti-TB drugs being used in the Medical College/ Hospital: Yes/ No

If yes, is this use in line with the NTF Recommendations/ RNTCP DOTS Plus guidelines: Yes/ No

6. Human Resources: *(based on interview with chairman, core committee/ nodal officer and relevant records)*

Are Master Trainers available in the Medical College: Yes/No

If yes, number of Master trainers trained in RNTCP at National level in Modules 1 to 9:

Training and sensitization held in the last four quarters:

	Formally Trained in RNTCP	Sensitized in RNTCP
Faculty members		
PG students & Residents		
Interns		
Staff Nurses		

Was any CME or sensitization programme organized during this visit of the STF/ZTF to the college?

If training or sensitization programmes have not happened at the desirable pace in the college, attempts may be made to identify the causes/ bottlenecks, if any. These can be mentioned in the space below:

7. Referral for treatment and feedback mechanism:

Is a Referral for Treatment Register maintained in the Medical College hospital?
If yes, where is the register located?

Are all TB patients diagnosed by all departments of the hospital channeled through the DOT centre of the hospital?

Are Referral for Treatment Forms used to refer patients diagnosed in the hospital to other centres within and outside the district?

Are there any constraints in the referral of TB patients to the DOT centre/TB Cell of the Medical College?

Are there any other source of anti-TB drugs (which are already available under RNTCP) available for OPD patients in the hospital?

Is any feedback regarding referred patients provided to the referring department by the DOT centre/TB cell of the Medical College?

8. Indoor DOTS: *(includes observations based on visit to wards in TB-Chest/ Medicine Department)*

Are the RNTCP supplied drugs used in the wards for indoor patients?

Are there any other source of anti-TB drugs (which are already available under RNTCP) for indoor patients?

Are inpatients registered in the same TU where the Medical College is located?

Is the "Transfer Out" mechanism working satisfactorily in the medical college for patients registered while on indoor treatment?

9. TB/HIV Coordination *(to be based on visit to VCTC and ART centre, if any)*

Is there a VCTC in the Medical College?

Is the standard cross-referral mechanism between the DMCs and VCTC established?

Is there a ART centre in the Medical College?

Is there a mechanism to put TB patients treated in the ART centre on DOTS?

10. Operational research

Were any proposals for funding of PG Thesis or OR project submitted by the college in the last one year?

Number of thesis on RNTCP priority areas initiated in the college till date (whether or not these were funded under RNTCP):

11. Supervision and Monitoring:

When was the last core committee meeting held?

Does the core committee meeting specifically focus on reviewing and monitoring RNTCP implementation in the College?

Has the Dean of the college regularly participated/ convened/ chaired core committee meetings?

Does the DTO regularly attend core committee meetings?

Has the Medical College quarterly report been discussed in the core committee meetings, and is there any action taken consequent to the same?

Are core committee meetings documented and minutes available in the college?

12. Meeting with the Dean/ Principal/ Medical Superintendent/ Core Committee members to apprise them of the findings above, and Recommendations for the college:

(This checklist need not be submitted as such- but a report of observations and recommendations using this checklist can be compiled and submitted to the State Task Force Chairperson, State TB Officer and ZTF Chairperson.)

Annexure: Periodicity of visits and Sources of Funds for visits

As per the recommendations of the National Task Force and the RNTCP guidelines, the periodicity of visits by the Zonal and State Task Force members is as given below:

- All medical colleges in the state to be visited at least once every year by the STF.
- All states in the zone to be visited at least once during every year by the ZTF. Such a visit can be made during an STF meeting or for a training/sensitization event.

Financial support for such travel of STF and ZTF chairpersons (and when they are unable to travel to all colleges/ states as per the periodicity indicated above, then for their representative from amongst the members of the ZTF and STF), is available from RNTCP, under the 'Medical College' head from the district where the ZTF/STF representative is headquartered.

For visits within the state, the travel can be undertaken and TA/DA paid as per the applicable state government rules in this regard. In the normal course, plan for expenditure on such visits by the STF should be incorporated in the State Society action plan, and also incurred by the State society.

For travel outside the state (applicable in case of ZTF, and associated with a training/sensitization event as mentioned above), RNTCP norms provide for travel by air where the distance is greater than 500 kms. In the normal course, such expenditure should be undertaken by the State Society where the ZTF is visiting.

For training events undertaken during such visits, prescribed rates of honorarium applicable for Trainers under RNTCP guidelines can also be paid in lieu of DA.

Payments of such TA/DA by the applicable state society should be made promptly, to minimize inconvenience to the Medical College faculty members supporting the programme. Where feasible, TA/DA advance can also be provided to the faculty member as per RNTCP guidelines.