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June 23, 2005

DEPARTMENT MEMORANDUM

No. 2005-0089

TO: ALL CHD DIRECTORS, SECRETARY OF HEALTH-ARMM

SUBJECT: Celebration of the National TB Day on August 19, 2005

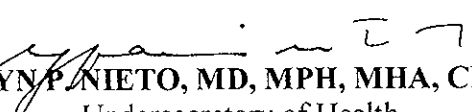
The National TB Program will be celebrating the National TB Day on August 19, 2005 in commemoration of the National Lung Month with this year's theme: "TB Network: Sama-samang Sugpuin ang TB!"

This event shall highlight the Manuel Luis Quezon DOTS Achievers' Award recognizing the efforts of outstanding DOTS facilities, treatment partners and cured TB patients both in the public and private sectors in all Centers for Health Development.

Attached herein is a copy of the MLQ DOTS Achievers' Award rationale, criteria and mechanics for your reference in undertaking the selection of respective awardees.

For your compliance and continued support to NTP.

BY THE AUTHORITY OF THE SECRETARY OF HEALTH


ETHELYN P. NIETO, MD, MPH, MHA, CESO III
Undersecretary of Health

**The “MANUEL LUIS QUEZON D.O.T.S. ACHIEVERS’ AWARD”
of the National TB Program (NTP)**

I. Rationale:

It is knowledge to us Filipinos that the country’s first President of the Philippine Commonwealth, President Manuel Luis Quezon, succumbed to tuberculosis in the 1940’s. This disease was indeed a malady that even great men such as our own President were unspared. Sixty five years have past since this tragedy brought bereavement to Philippine history; yet up to present, TB continues to haunt mankind. However, 65 years proved to be years of triumph as well, because of the advent of newer and better means to alleviate TB – diagnostics, drugs, facilities, strategies. And recently, the adoption of the *Directly-Observed Treatment Short-course or the D.O.T.S.* strategy by various nations depicts a hopeful approach to halt the havoc from TB.

However, the true heroes in TB control are those who stayed in the battlefield – the health worker, the treatment partner and the patient himself. Backboned by the DOTS strategy, these 3 victors support each other to render the patient cured and uplifted. They constitute what we may term as the “triad of DOTS achievement.” Together, this triad delivers what the DOTS strategy aims to achieve – cure from TB.

The National TB Program (NTP) recognizes their value in TB control – the quality services of the DOTS facilities, the dedication to help TB patients and the patient’s compliance and self-responsibility. At present, both the public and private sectors contribute to the NTP’s objectives. They have truly helped the NTP in reaching its purpose. We say that the triad of DOTS achievement emanates from our public and private care providers. With DOTS as our armament, plus this triad from the public and the private sectors, the victory from TB is nearing reality.

Last March 2005, as part of the country’s commemoration of World TB Day, the NTP launched the search for the “*Manuel L. Quezon DOTS Achievers’ Award*” as tribute to the unsung heroes in TB control. As we commemorate the 2005 World TB Day, with the theme of “*Sama-Samang Sugpuin ang TB*” it is high time that we recognize the outstanding “*samahan*” of DOTS facilities, treatment partners and cured TB patients. This recognition reflects their humble contribution to TB control; yet garnering a noble achievement, whose intention is not only for thy self but also for the country.

II. Objectives:

1. To give due recognition to the following triad of DOTS achievers, both in the public and in the private sectors:
 - 1.1 DOTS facility – for rendering quality DOTS services.
 - 1.2 Treatment Partner – for the dedication and commitment to support the cure of TB patients.
 - 1.3 TB patient – for the sincere desire to get cured by being compliant and responsible to self and to co-patients.

III. Target Awardees: (6 per CHD)

A. Outstanding Triad of DOTS Achievers in the *PUBLIC* Sector:

1. Outstanding Public DOTS Facility
2. Outstanding Treatment Partner (BHW)
3. Outstanding Cured Smear (+) Patient

B. Outstanding Triad of DOTS Achievers in the *PRIVATE* Sector:

4. Outstanding Private DOTS Facility
5. Outstanding Treatment Partner
6. Outstanding Cured Smear (+) Patient

Each CHD searches for a triad of DOTS achievers in the public and in the private sectors. The triad is composed of an outstanding DOTS Facility, an outstanding Treatment Partner and an outstanding Cured TB Patient. There will be a set of awardees each in the public and in the private sector per CHD, giving a total of 102 awardees.

IV. Criteria:

There shall be a set of criteria per category that the CHDs shall use in selecting their respective awardees. The criteria shall be adopted for both public and private winners. A simple 3-point Likert scale shall be used to rate each criterion. In the event of a tie, the CHD shall have the leeway to break the tie to come-up with the final choices. These criteria are as follows:

A. Public and Private DOTS Facilities: (1 - 10 points)

CRITERIA	RATING
1 DOTS Certification Status: 1a) DOTS certified (<i>for both Public and Private DOTS facilities</i>) 1b) SS Level I certified but not DOTS certified (<i>only for Public DOTS facility</i>) 1c) Not DOTS certified (no DOTS certificate)	2 1 0
2 Percentage of Sputum Smear (+) Cases to Total Pulmonary TB Cases: ($\geq 60\%$) <i>(Evaluate 2-year performance: 2003 and 2004)</i> 2a) % Sputum Smear (+) cases is 60% or more for two consecutive years 2b) % Sputum Smear (+) cases is 60% or more for only one year 2c) % Sputum Smear (+) cases is less than 60%	2 1 0
Cure Rate of 85% or more: (Evaluate 2-year performance 2002-2003) 3a) Cure Rate of 85% or more for two consecutive years 3b) Cure Rate of 85% or more for only one year 3c) Cure Rate less than 85%	2 1 0
4 Regularity & Timeliness in the submission of quarterly NTP Reports: 4a) PHO/CHO receives the reports on the 1 st month of the incoming quarter 4b) PHO/CHO receives the reports on the 2 nd – 3 rd month of the incoming quarter 4c) PHO/CHO receives the reports after 3 months or more	2 1 0
5 Political Commitment 5a) Provision of budget for anti-TB drugs (Cat III) & budget for NTP monitoring 5b) Provision of budget for anti-TB drugs (Cat III) only 5c) No augmentation for drug needs	2 1 0
HIGHEST SCORE POINT =	10

B. Public* and Private Treatment Partner: (1 - 10 points)

() Note: For the Public Treatment Partner, the BHW or CHW is the priority.*

CRITERIA <i>(Evaluate the Treatment Partners of patients registered in 2003 and in 2004)</i>		RATING
1. Number of Cured New Sputum (+) cases supervised/Year: <i>(Evaluate 2-year performance 2003-2004)</i> 1a) 5 or more/year 1b) 2 - 4/year 1c) 1/year		2 1 0
2. Number of Defaulters incurred among ALL cases supervised/Year: <i>(Evaluate 2-year performance 2003-2004)</i> 2a) none 2b) 1 2c) 2 or more		2 1 0
3. Number of missed days incurred by ALL Sputum (+) cases while on treatment: <i>(Evaluate 2-year performance 2003-2004)</i> 3a) No missed day (0) 3b) 1 - 2* missed days 3c) 3 or more missed days <i>(*) Note: 2 missed days can be consecutive or have occurred in separate occasions.</i>		2 1 0
4. Number of TB Symptomatics referred for Sputum examination/Year: <i>(Evaluate 2-year performance 2003-2004)</i> 4a) 30 or more/year 4b) 20 - 29/year 4c) < 20/year		2 1 0
5. Number of completed years rendering service to, or working for NTP: 5a) 6 or more 5b) 3 - 5 5c) 1 - 2		2 1 0
HIGHEST SCORE POINT =		10

C. Public and Private Patients*: (1 - 10 points)

(Note: Prioritized patients are the New Sputum (+) cases*

CRITERIA <i>(Evaluate ALL New Sputum (+) cases registered in 2003 and in 2004)</i>	RATING
1. Outcome of Treatment: <i>(Evaluate treatment outcome of each patient)</i> 1a) Cured 1b) Treatment Completed 1b) Other Treatment Outcomes	2 1 0
2. Compliance to schedule of Sputum Follow-up Examinations: <i>(Evaluate schedules of sputum follow-up examinations)</i> 2a) All 3 sputum follow-up examinations done as scheduled 2b) 2 sputum follow-up examinations done as scheduled 2c) Only 1 or none of the sputum follow-up examinations done as scheduled	2 1 0
3. Compliance to daily treatment: <i>(Evaluate number of missed days incurred while on treatment)</i> 3a) No missed day (0) 3b) 1 – 2* missed days 3c) 3 or more missed days <i>(Note: 2 missed days can be consecutive or have occurred in separate occasions.</i>	2 1 0
4. Referral of TB Symptomatics: 4a) Has referred 1 or more TB symptomatic(s) to a DOTS facility 4b) Has not referred any TB symptomatic	2 0
5. Participation in a local TB event/activity: <i>(e.g. Local celebration of World TB Day)</i> 5a) Has participated in a local TB event/activity 5b) Has not participated in any local TB event/activity	2 0
HIGHEST SCORE POINT =	10

V. Guidelines/Mechanics of Implementation:

1. The search for the MLQ Awardees, 2005 shall be spearheaded by each CHD in their respective catchment. Provinces/Cities can participate by nominating prospective candidates in their locale.
2. The search shall begin on July 1 and shall end by August 1, 2005. All qualified entries per CHD shall be forwarded to the TB Unit-NCDPC up to August 7, 2005 *only*; to allow for the needed time in preparing the personalized plaques/tokens. Entries submitted thereafter shall not be accepted.
3. Every CHD shall preferably, search for 6 awardees that comprise as follows:

Outstanding DOTS Facility (2)	-	1 Public, 1 Private
Outstanding Treatment Partner (2)	-	1 Public (BHW/CHW), 1 Private
Outstanding Cured TB Patient (2)	-	1 Public, 1 Private

The selection shall be based on the abovementioned set of criteria per category.

4. The Outstanding DOTS Facility shall also include the Outstanding Treatment Partner and the Outstanding Cured TB Patient. This means that the *Triad of DOTS Achievers*, composed of, the Service Provider (DOTS facility), the Treatment Partner and the Cured TB Patient, shall *all* originate from the *same DOTS facility*. To facilitate the selection process, the Outstanding DOTS Facility shall be chosen first; from which, the other two categories can now be decided upon.
5. The CHD shall validate the findings of the awardees. The final decision of awardees shall be made official by the CHD concerned. The decision of the CHD shall be final and shall be, non-debatable.
6. An official form, prepared by the NTP Coordinators and duly signed/noted by the CHD Director shall be sent to the TB Unit-NCDPC, to communicate their respective awardees. This shall include the following information:

For the DOTS Facility:

- complete name (include if Main Health Center, PPMD unit, etc.)
- complete address (include municipality, province/city)

For the Treatment Partner:

- complete name of person
- complete residential address
- designation (if BHW, CHW, PPMD Nurse, etc.)

For the Cured TB Patient:

- complete name of patient
- complete residential address

7. The Plaque/Token of Appreciation for each awardee shall be coursed through the respective CHD NTP Coordinators during the recognition night of the "***Manuel Luis Quezon D.O.T.S. Achievers' Award***" to be held on ***August 19, 2005, Friday, 6:30 pm in Manila (final venue to be announced later)***. To maximize resources, this shall be integrated with the conduct of the annual NTP Program Review and Consultative Workshop. The respective CHD Director together with the CHD NTP coordinators, shall participate during the recognition night to receive the plaques/tokens, for and in behalf, of the awardees.