



KANYE ADVENTIST HOSPITAL (KAH)

QUALITY IMPROVEMENT PROJECT

TITLE: TO IMPROVE THE QUALITY OF TB SCREENING IN KAH.

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THE PROBLEM STATEMENT

Kanye Adventist Hospital is situated 94 km from Gaborone city in Kanye village. The hospital caters for 25 clinics and a population of 111,162. The health care services include; Ambulatory department focusing on preventive services (SRH, CWC, TB program, HIV program, PMTCT program, HBC, CeCAP, EPI, School Health, IDCC, A&E and OPD) and the inpatient department focusing on curative services (medical wards, Pediatric and maternity ward).

According to WHO TB is the second leading infectious killer world wide (above HIV and AIDS), with one third of the worlds population infected (according to the Jenner institute) and approximately 1.3 million deaths annually (WHO).

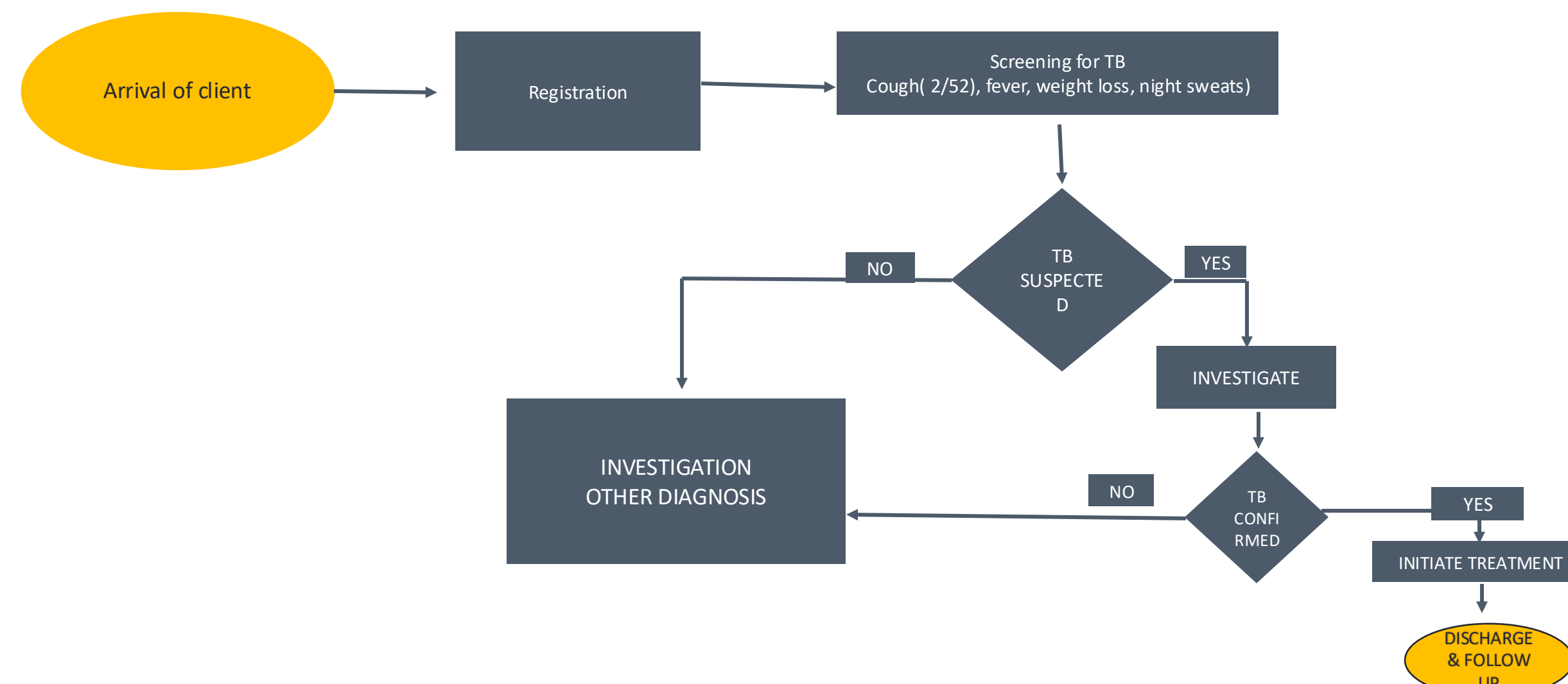
Botswana is a Southern African country with a high burden of TB. The TB- HIV coinfection rate in the country is about 60% (MOH Botswana). This poses a complex public health challenge as HIV increases the incidence of active TB cases. Botswana has adopted the WHO "End TB strategy 2016- 2035" which was developed after the "End Stop TB strategy". It provides a united response to ending TB deaths, disease and suffering and builds on three strategic pillars underpinned by four key principles.

Over the past 2 years Kanye Hospital observed a decreased rate of TB screening both externally from referring institutions and internally resulting in late diagnosis of TB cases and to some extent TB related deaths. Therefore it is imperative for all clinical personnel to ensure proper TB screening, data collection and reporting for effective surveillance and control of TB at Kanye Adventist Hospital. We have experienced a decline in TB screening from 85% to 40% against the national target of 100% during the year of 2022/ 2023 as evidenced through data collection and analysis.

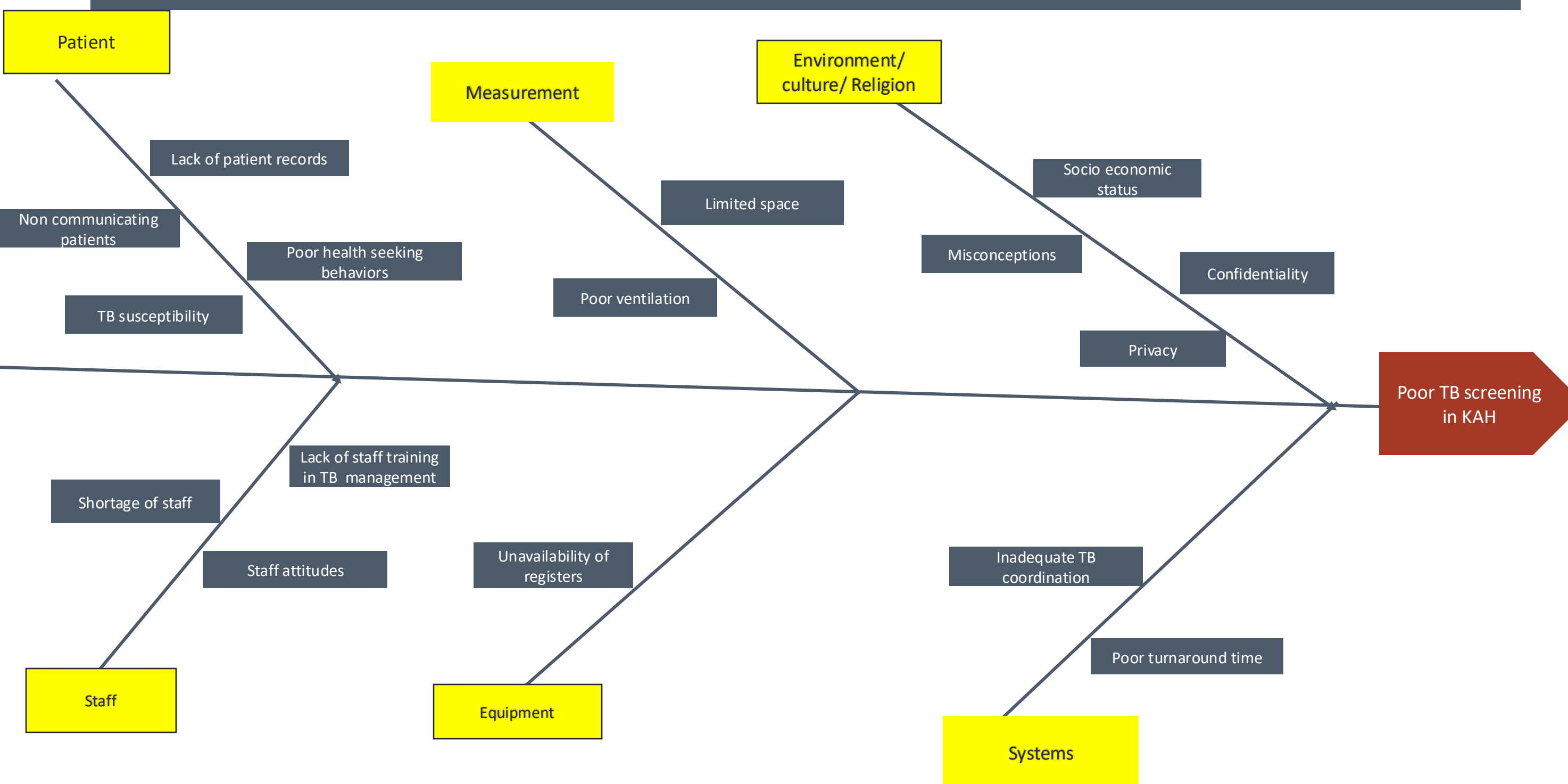
AIM (TARGET)

To increase TB screening from 40% to 100% at Kanye Adventist Hospital by 31st December 2024.

FLOW CHART OR PROCESS MAP OF PRESENT STATE

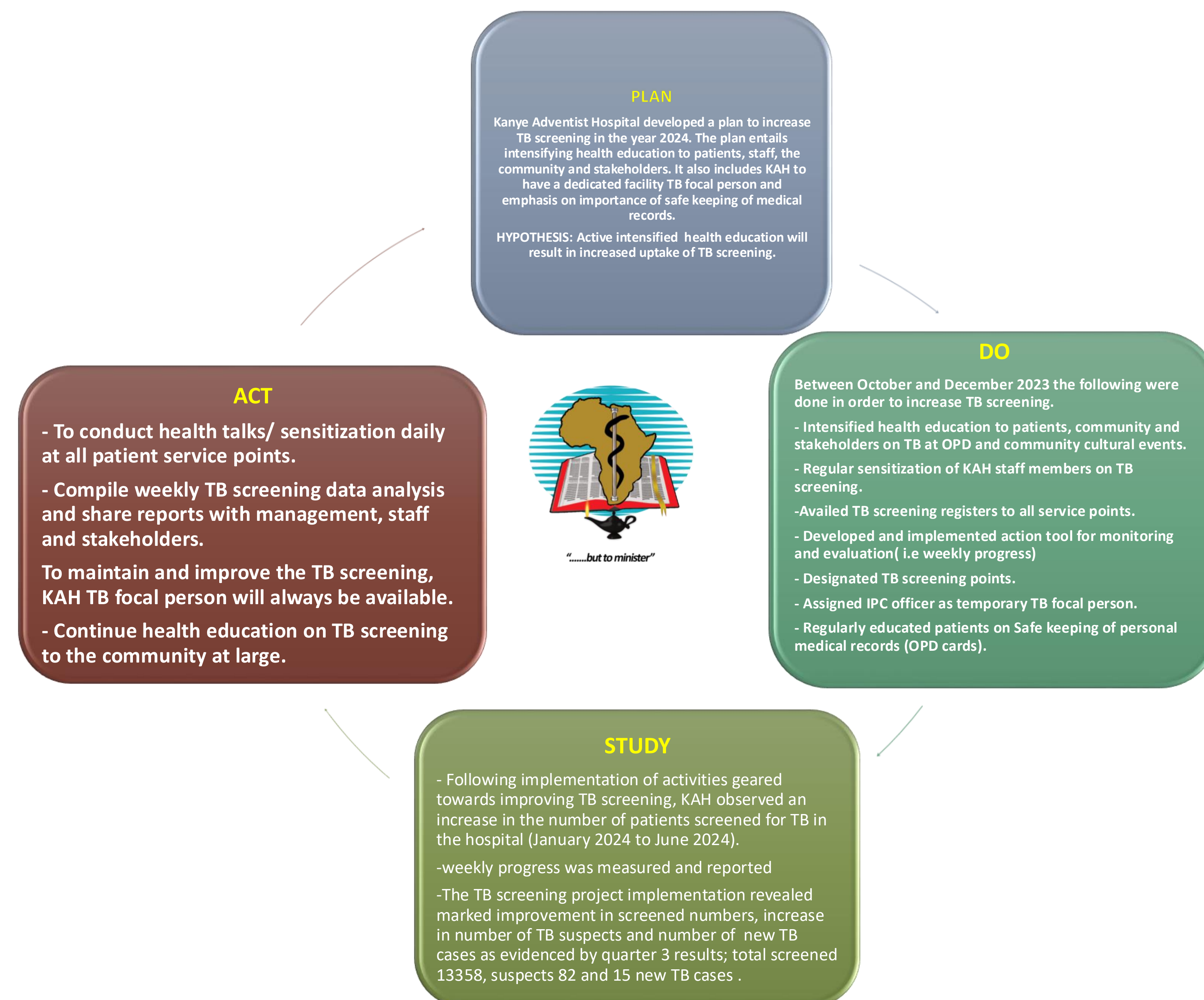


FISHBONE DIAGRAM:



NB: Multi-voting was used to prioritize problem causes, from four(4) to three(3)

PLAN, DO, STUDY, ACT CYCLE (PDSA)



RESULTS

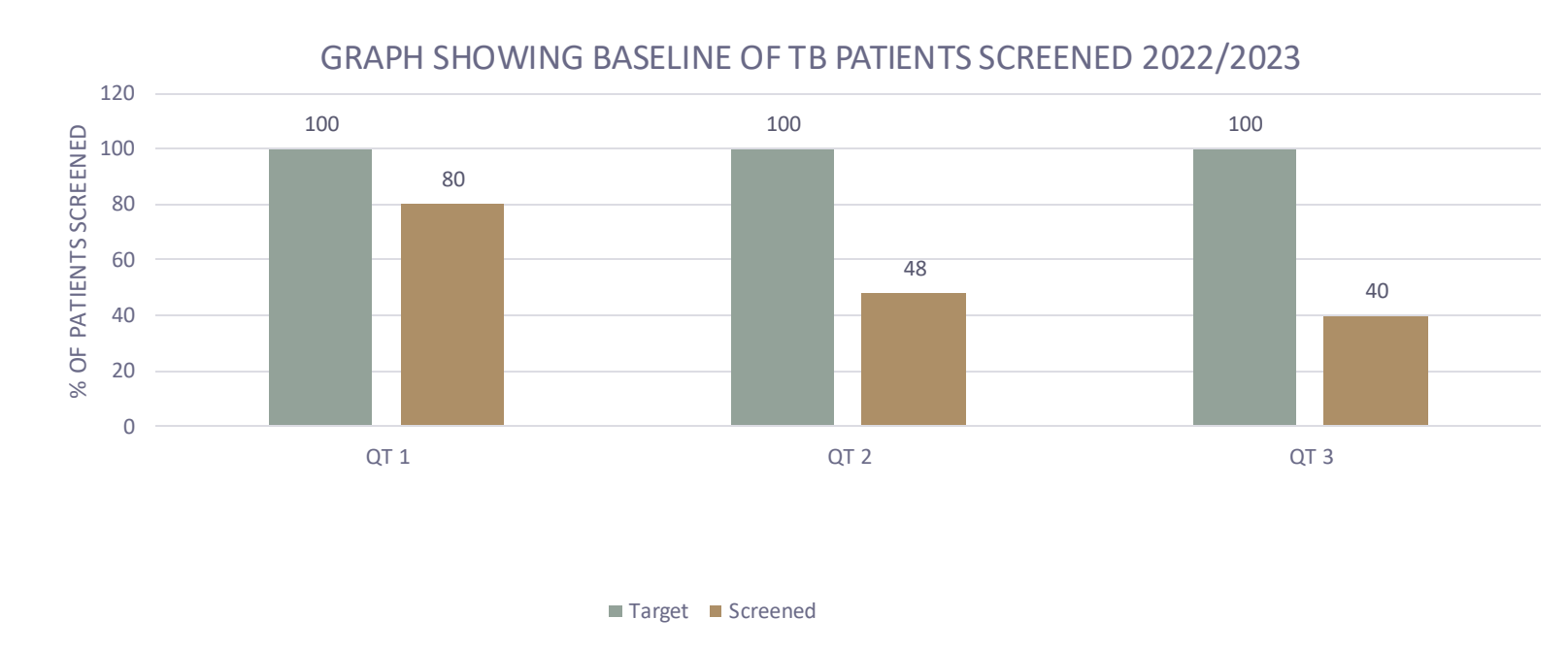


Fig 1: The figure above shows the baseline for TB patients screened 2022/2023

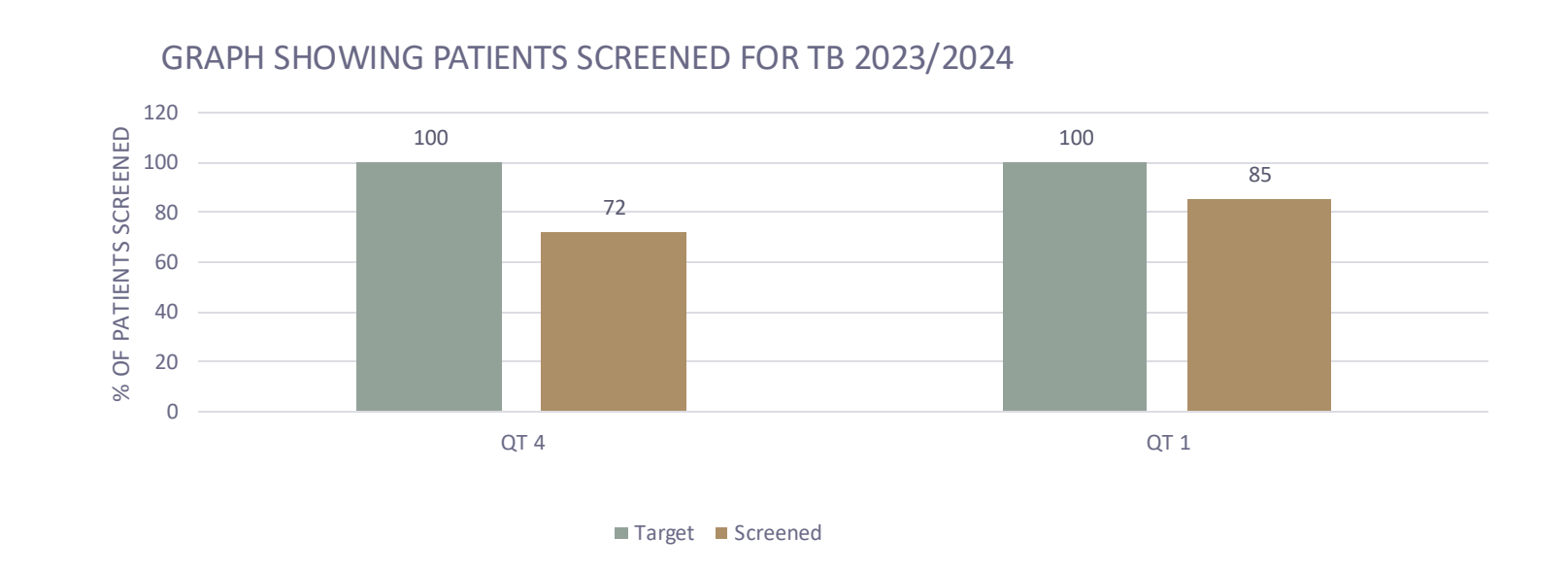


Fig 2: The figure above shows the number of patients screened 2023/2024 (Post interventions).

SUMMARY

- Lessons Learned.**
 - KAH has learnt that involving patients/ community in their care through health education significantly improves health seeking behaviors.
 - Having a facility TB focal person and TB task force in the hospital has enhanced coordinated TB screening, management and reporting.
 - Impact on Quality of service.**
 - Improved TB screening should enhance early diagnosis and treatment hence reduced TB related mortality (further study needed).
 - Improved screening should thus decrease the chance of hospital based TB transmission among patients, staff and visitors as proper prevention measures are in place.
 - Challenges**
 - Inconsistent supply of reagents and consumables, staff shortage, small volume analyzer.
- NB: The KAH TB screening project was implemented without need for additional funds. The results were achieved through reengineering of internal processes and new initiatives.

FUTURE STEPS/ WHAT'S NEXT?

- Way forward.**
 - To continue health education on prevention and management of TB.
 - Intensify in-service training of staff.
 - Continue with coordination of TB screening activities i.e. monthly reports, sourcing registers.
 - Investigate impact of increased screening on diagnosis and treatment outcomes
- Commitment.**
 - We commit to continue with the same project in order to increase and maintain TB screening, diagnosis and management in KAH.

ACRONYMS:

- KAH – Kanye Adventist Hospital
- SRH – Sexual and Reproductive Health
- IDCC – Infectious Disease Control Centre
- PMTCT- Prevention of Mother To Child Transmission
- HIV- Human Immuno-deficiency Virus
- CWC – Child Welfare Clinic
- TB – Tuberculosis
- CeCAP – Cervical Cancer Prevention.
- HBC- Home Based Care
- A&E- Accident and Emergency
- AIDS- Acquired Immune Deficiency Syndrome
- WHO- World Health Organization
- SRH- Sexual and Reproductive Health.
- EPI- Expanded Program on Immunization

CHANGE IDEA GENERATION:



PRIORITIZATION MATRIX
Note - Rank change ideas based on following criteria:
• Importance Scale 1 – 5: 1 (Least) – 5 (Most) important
• Ease of Implementation Scale 1 – 5: 1 (Hardest) – 5 (Easiest) to implement

SER	CHANGE IDEA	IMPORTANCE (1 – 5)	EASE OF IMPLEMENTATION (1 – 5)	COMMENT
A	Intensify health education on TB screening.	5	5	25
B	Emphasis on importance of safe keeping of medical records.	4	4	16
C	Assign dedicated TB focal person.	5	5	25
D	Promote behaviour change (mentoring and coaching).	4	3	12
E	Redistributed TB Screening to individual consulting rooms/ private areas.	4	4	16
F	Assigned staff specifically to TB screening & data collection	4	1	4

