

ANNEX D: SUMMARY OF RSA FINDINGS

**Source: RSA Findings and Results, IMPACT Project, March 2013*

Service delivery

- Inadequate coverage of TB microscopy laboratory services especially in GIDA areas and areas with indigenous peoples
- Need for logistic management support to prevent stock-outs of TB drugs
- Inadequate number of trained treatment partners
- Limited to no supervision of treatment partners
- Few private providers practicing DOTS
- Health facilities without proper sputum collection areas
- Poor health seeking behavior among TB symptomatics
- Hospitals not implementing DOTS
- Need to establish and/or strengthen TB referral mechanism to ensure adequate services to clients

Human Resource Development

- Lack of human resource development plan
- Need for organizational development and re-structuring
- Absence and/or lack of medical technologists/microscopists at the LGU level and even in some district hospitals
- Need for refresher courses for medical technologists and other DOTS providers

Financing

- Inadequate local budget for TB program activities

- PhilHealth capitation and TB reimbursements not utilized to improve quality and service provision

Regulatory

- Facilities not certified and/or accredited under the TB DOTS package of the PHIC
- Not all TB microscopy laboratories undergo external quality assurance (EQA)
- Over-the-counter dispensing of drugs

Policy and Governance

- Lack of policies supportive of TB control and/or not being implemented
- Inadequate monitoring, supervision and evaluation at the implementation level
- Local stakeholders/partners not mobilized for TB control activities
- Development and/or sustainability of multi-sectoral alliances or MSAs (i.e., regional coordinating committees, provincial MSAs, etc.)
- Non-functioning inter-local health zones (ILHZ)

Information System

- Timeliness and accuracy on reporting of TB program accomplishments
- Lack of capability to analyze and use NTP information for program planning and decision making