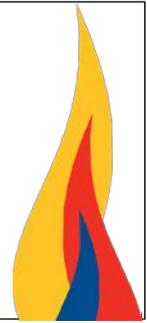


ICN TB/MDR-TB Project celebrates its

Leading Lights

Nurses bringing light to where there is no light



June 2018

While most nurses prefer to avoid the limelight, the ICN TB/MDR-TB project wants to recognise the work of some outstanding TB nurses who are role models and leaders in their field.

The ICN TB/MDR-TB Leading Lights initiative aims to showcase the work of exceptional nurses trained by the ICN TB/MDR-TB project who are making an outstanding contribution to TB prevention, care and management in their local facility and/or community.

The Leading Lights Award highlights the contribution of those involved with caring for people affected by any form of TB and shows the world what an impact effective training and resources can have on this global disease.

ICN invites all the ICN TB project partners to nominate nurses and allied health workers who have demonstrated excellence in their efforts to teach their colleagues about TB, improve patient care or make changes to reduce transmission of TB. The winners will be highlighted on the ICN's TB Project webpages, www.icn.ch/tbproject.html, and will be presented with a certificate and a special pin by their national nurses association.

Calls for nominations will be sent quarterly and people will be able to access the form on the ICN TB web pages at: http://www.icn.ch/tb-mdr-tb-project/leading_lights.html

Inspiration for this award came from exceptional nurses like these:



Alla Olegovna Bykova
Bronchoscopy Unit
Nurse,
Vladimir Regional TB
Control Centre,
Vladimir (Russian
Federation)

Alla Bykova has dedicated her entire professional career to tuberculosis control in the Vladimir region of the Russian Federation. After graduation from the Vladimir Medical Nursing College in 1998, Alla worked as a nurse in the in-patient pulmonary TB department of the regional TB dispensary. Because of the lack of effective airborne infection control measures implemented in the facility at that time, occupational TB risk among healthcare workers was very high. After participating in educational and training activities on TB infection prevention and control organized by US Centers for Disease Control and Prevention, ICN and WHO, Alla became one of the most active participants in a comprehensive TB infection control programme, which included the implementation of administrative and environmental measures and personal respiratory protection. In 2001, Alla started to work as a nurse-assistant in the bronchoscopy unit, one of the high TB transmission risk areas of the facility and became principal coordinator of the personal respiratory protection programme for the TB dispensary and all of Vladimir region. Since that time Alla organizes regular training and education programmes

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for facility healthcare workers and other staff on respirator fit-testing, use and disposal. Alla conducts annual respirator fit-testing for facility staff and trains district coordinators to perform fit-testing in their institutions. Alla is also involved in the selection of respirator models and sizes for individuals, respirator procurement and distribution. When the Center of Excellence for TB Infection Control was founded in Vladimir in 2007, Alla became the instructor on respirator fit-testing for all participants of training courses. Together with a US nurse researcher, Alla conducted the study “Feasibility of a Photovoice Study Promoting Respirator Use among Russian Health Care Workers” published in *Public Health Nursing*, 2014. She is a dedicated and strong advocate for nosocomial TB transmission risk reduction and is often invited to give presentations at federal and regional nursing conferences of ICN and the Russian Nurses Association. Alla’s colleagues – nurses, doctors and auxiliary workers – highly respect her tireless dedication to TB infection control and follow her remarkable personal example.



Chen Danping
Chief Nurse,
Shanghai Pulmonary
Hospital,
Shanghai (China)

Chen Danping has worked in the TB field for 13 years. She received training from the ICN TB/MDR-TB project in 2011. After the training, she delved into the stigma caused by TB and carried out a series of measures to improve stigma associated with TB. She provided training programmes based on the ICN TB/MDR TB training to other staff in the hospital's TB department and actively mobilized staff to improve TB care.

Over the past seven years, she has trained more than 1,000 nurses in front-line nursing care of TB patients through face-to-face lectures and the Internet. In addition, she also provided on-site training and guidance

to more than 100 TB nurses who came to her hospital from remote areas of China to study. At the same time, she is very active in mobilizing these TB nurses to work together to improve the burden of stigma of TB patients. In her in-depth study on stigma caused by TB she found that one of the most important reasons is the lack of knowledge about TB in patients and their close contacts and families. To improve this, Chen Danping and her colleagues regularly hold weekly lectures on TB, distribute health brochures, and update the health education bulletin board of the ward. She led her team to develop extended services to improve and expand the care of TB patients after discharge. The WeChat platform is used to enable nurses to follow up and communicate with the patients after discharge to help patients carry out the whole course of treatment to ensure the effective completion of the treatment. She led her team to set up volunteer service teams to spread TB knowledge in the community by going into communities and schools and launched a series of TB health knowledge sessions and services.

Chen Danping actively participated in a study of TB nursing, carried out three projects, obtained three national grants, published five papers, participated in making two knowledge brochures on TB, and made standard courseware for knowledge dissemination on TB prevention and control. She shared the achievements and experience of her research at the national tuberculosis conference in China. She is an ordinary clinical nurse who has fought on the front lines of TB for a long time. She actively carries out and participates in all activities on TB care (research, training and exchange of experience). Her greatest wish is to bring some progress and improvement to TB care through her own efforts.



Thandazile L. Simelane
Registered Nurse,
National TB Hospital,
Manzini
(Swaziland)

Thandazile attended the ICN TB/MDR-TB training in 2014. She then went on to train an additional: 70 nurses, seven doctors, eight managers, 20 cleaners, six laboratory personnel, three radiographers, three pharmacists, four community healthcare workers, and 420 patients and treatment supporters.

Following the ICN training, Thandazile made several improvements to patient-centred care in her hospital. She developed a system that ensures that all patients are seen by the psychosocial office to ensure that all medications are correctly dispensed and all instructions are well understood by the patient and treatment supporters prior to discharge. Currently, the hospital contact line is not always accessible, so to ensure that patients have someone to talk to, she is currently using her personal phone and airtime to ensure support for the patients. She is therefore advocating for a hotline for patients to call when they are experiencing problems or need support.

In addition, Thandazile developed an electronic data system for the management of patients on new drugs and treatment regimens, which she updates outside of working hours. This electronic system also monitors most clinical and programmatic indicators. She has also ensured proper classification of patients according to their resistance patterns based on DST results to ensure patients are on the correct regimen to improve favourable treatment outcomes. Following the training, she has challenged patients' treatment regimens that do not follow the national guidelines. She also challenges the use of ART regimens for TB/HIV co-infected patients where there are drug-drug interactions to ensure patients are on the correct treatment. She noticed that there

was an increase in the number of female patients becoming pregnant while on treatment, so she advocated for the integration of family planning and sexual reproductive health into TB/HIV care in the hospital.

Thandazile has developed a new culture results follow-up system directly from the facility laboratory. She records the results in the patient's file, discusses the results with the patient and treatment supporters, and records them in the register. Through this effort, the rate of culture unknowns has decreased from 57% in 2016 to less than 3% in 2017. This has enhanced the early detection of possible treatment failures. Through this change, patients feel more involved in their care.

Thandazile was instrumental in advocating for strengthening the ventilation system which involved the installation and maintenance of an enhanced mechanical ventilation system. That was achieved through the involvement of the hospital management, the Swaziland Democratic Nurses Union and other stakeholders.

She realised that most healthcare workers were not trained on TB/HIV management and advocated with the hospital management to arrange large-scale onsite trainings for healthcare workers rather than relying on donor funded offsite trainings. As a result, more nurses were trained on TB/HIV care and the standard of patient care improved.



Bernard Mulonga
Enrolled Nurse/
District TB Focal
Person,
Isoka District Hospital
Isoka
(Zambia)

Following the ICN TB/MDR-TB training in 2016 Bernard recognised many areas for improvement in his setting. He identified knowledge gaps on TB/MDR-TB

among healthcare workers in health centres, poor management of patients on TB treatment and poor infection control. Bernard shared the knowledge he gained from the ICN TB/MDR-TB training with other health workers through clinical and orientation meetings. He also advocated with the district health office on the importance of improving infection control and ventilation in health facilities and the need for nurses to triage patients with a cough. He said he used the ICN training materials on infection control to train others. His efforts yielded positive results and the nominee was supported to conduct TB/MDR-TB training for all health workers in the district. After he sensitised other health workers on TB and infection control they realised the need to take practical steps to prevent the spread of TB/MDR-TB to healthcare workers.

The knowledge gained by other healthcare workers has made it easy to diagnose TB early and halt the further spread of TB. Now coughing patients are attended to promptly so that they do not infect others. There is now improved ventilation in screening rooms which has reduced the risk of transmission of TB to healthcare workers.

It has been proven that once a nurse is adequately trained, they can run or coordinate programmes that are thought to be for clinical officers only.



Mduzuzi Nicol Mbatha
Professional Nurse,
District TB
Coordinator,
King Cetshwayo
District, KwaZulu-
Natal Province
(South Africa)

Mduzuzi has been a professional nurse since 1996 and is certified as a PHC-trained nurse, NIMART and nurse initiated MDR-TB (NIMDR-TB) nurse. He has been a district TB coordinator since 2006 and attended the ICN TB/MDR-TB training in 2014. Since then, Mduzuzi

Introduced the use of the TB Appointment diary to all facilities and introduced and rolled out the implementation of sticker system for all TB/HIV co-infected clients at the facility level to ensure all co-infected clients are receiving the appropriate treatment. He introduced TB monthly door-to-door campaigns carried out by TB Teams throughout the district aimed at improving case finding, early detection, and to educate the community about TB. Additionally, he visits TB clients at their homes to address socio-economic issues and assists with Temporary Disability Grants through the Department of Social Development.

Mduzuzi has actively engaged key community stakeholders in the fight against TB through engaging and educating traditional leaders and traditional health practitioners and trains some of them to be DOT supporters.

Mr Mbatha trains up to 130 clinicians and nurses every year on TB and conducts quarterly meetings with facilities to share performance and discuss possible solutions to issues with clinicians and facility management. He has trained 520 non-clinicians (traditional healers, traditional leaders, DOT supporters, and volunteers) about TB and more than 930 community care-givers to improve case finding, DOT and health education.

Under Mduzuzi's leadership, his district was selected as the Gold Recipient of the provincial Annual Service Excellency Award for the past three years for best performance in the achievement of the 90-90-90 strategy for TB. In 2016, the district was ranked as the best district for TB cure rates and ranked 8th nationally for having the most co-infected clients on antiretroviral therapy. Additionally, the TB incidence in his district has fallen from 1,400/100,000 in 2005 to 582/100,000 in 2017. The cure rate is currently 96% up from 24%, the loss to follow-up rate has decreased from 19% to 3%, and the death rate has decreased from 32% to 3% under Mduzuzi's leadership.

Mduzuzi attended an ICN TB Project research workshop in early 2018 and

drafted a research proposal on the effect of giving six to seven days of aminoglycosides to drug-resistant TB patients and hearing loss. He hopes to carry out his research and publish his findings.



ICN TB/MDR-TB Project Facts:

- Builds skills, knowledge and capacity at all levels of nursing
- Member of Lilly MDR-TB Partnership since 2005
- Transformational training methodology developed & implemented
- Currently working with 8 national nurses associations in China, Russia, Ethiopia, Lesotho, Malawi, Swaziland, Uganda and Zambia
- More than 2,237 nurse trainers trained to date
- An additional 173,600 nurses and allied health workers trained through cascade
- Impact includes improved case detection and treatment

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