Data Quality Review (DQR) Data Verification and System Assessment Workshop

Session 7

Data Verification at Health Facility Level – Recounting the Value of the Indicator from Source Documents

-TB Cases Notified











Learning Objective

To master the process of recounting the indicator at the health facility. Specifically, by the end of the session you should be able to;

- Know the definition of the indicator Number of TB Cases Notified,
 i.e.TB Cases Notified.
- Be familiar with data collection and reporting tools used to record service delivery and report for TB Cases Notified.
- Understand standard protocols for aggregating TB Cases Notified at health facilities.
- Understand how to re-count TB Cases Notified on the TB Patient Card or the TB Register for the selected reporting period.
- Understand and avoid common pitfalls in compilation of data for TB Cases Notified.

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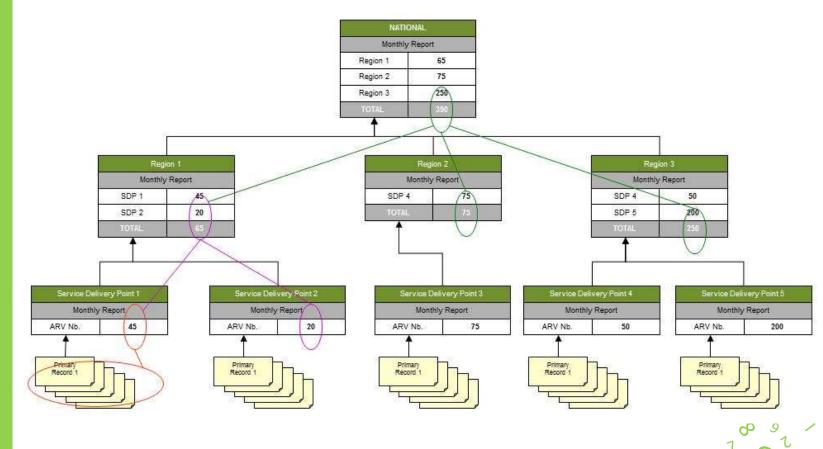


Data Verification Schema

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Recounting TB Cases Notified

Verification of reporting



Source documents: facility registers (ANC, ART, OPD, TB) & immunization tally sheet

Data Verification

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Recounting TB Cases
Notified

Data verification module

- Recommended maximum 5 indicators for review
 - ANCI, Penta 3/DTP3, HIV Treatment, TB cases notified, malaria cases (confirmed) (adapt to country implementation)
 - Include country indicator definitions
- Select a time period for the verification
 - e.g.: End of March 2019 (end of 1st trimester)
- For each indicator:
 - Documentation review
 - Recount the number of events
 - Reported number of events
 - Reasons for discrepancies



Source Documents and Reports

SOURCE DOCUMENTS AND REPORTS—TB Cases Notified

• TB Patient Cards for all patients starting on treatment at the facility or the TB Register (the TB register may be found at the TB Basic Management Unit*)

• HMIS or Program-specific facility quarterly report for the quarter under review

*A basic management unit (BMU) is defined in terms of management, supervision and monitoring responsibility. A BMU for the TB programme may have several treatment facilities, one or more laboratories and one or more hospitals. The defining aspect is the presence of a manager or coordinator who oversees TB control activities for the unit and who maintains a master register of all TB patients being treated.



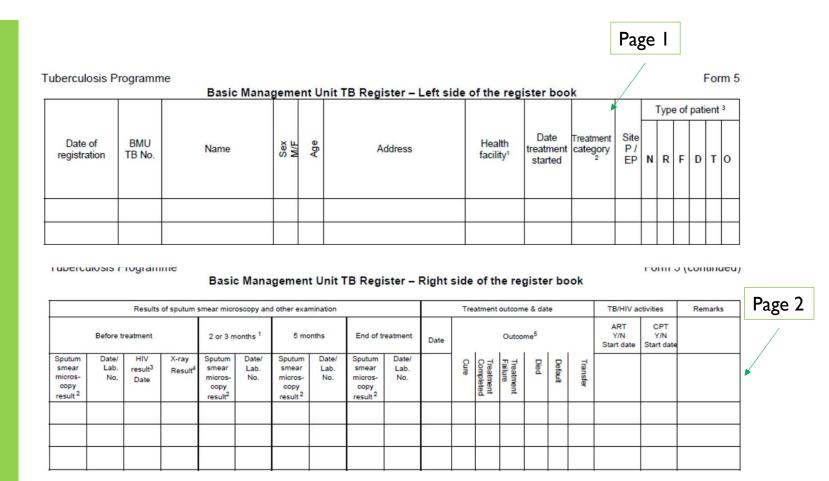
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TB Treatment Card

Tuberculosis Treatment Card Name: Disease site (check one) Sex:
Sex: Date of registration: Pulmonary Extrapulmonary, specify
Age: Health facility: Type of patient (check one) Address:
Address: New Treatment after default Patient New Treatment after default Patient New Treatment after default Patient New Treatment after failure Transfer in Other, specify
Transfer in Other, specify
Name / address of community treatment supporter (if applicable) Sputum smear microscopy Weight Initial phase Tx
I. INITIAL PHASE - prescribed regimen and dosages Referral by : Month Date Lab No. Result (kg) Self-referral 0 Site
CAT (I, II, III): 0 SILE
Number of tablets per dose and dosage of S: Public facility Private facility/provider Private facility/private f
(RHZE) S Other, specify
TB/HIV Date Result* Lab results
Cotrimoxazole ARV Other HIV test
CPT start Tuberculosis Programme Form 3 (continued)
II. CONTINUATION PHASE
Tick appropriate box after the drugs have been administered Dally supply: enter \(\frac{1}{2} \). Periodic supply: enter \(\frac{1}{2} \) on day when drugs are collected and draw a horizontal lin Number of tablets per dose
Day 4 2 3 4 5 6 7 9 9 40 14 12 13 14 15 16 17
Month Daily supply: enter ✓. Periodic supply, enter X on day when drugs are collected and draw a horizontal line (→) through the number of days supplied. Ø = drugs not taken
Day 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
• 2 nd side
X-ray (at start) Date: Pre ART Register No.
Continuation phase Tx Results (-), (+), ND CD4 result
ART eligibility (Y/NVLnknown)
HIV care Date eligibility assessed ART Register No.
The region to.
Treatment outcome
• Tx outcomes Treatment outcome Date of decision
☐ Treatment completed ☐
□ Died □
□ Default □ Transfer out
Name and address of contact person:

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TB Register



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- Page 1: Date of registration, ID number, name, sex, age, address, Tx start date,
 category, site, type
- Page 2: Diagnostic results, Tx outcome, TB/HIV, etc.

TB cases notified

Recorded cases from unit TB register

Unit TB No	Dist TB No	Name (in full), 1 Patient & Tel. No. 2/Contact Person & Tel No.	Sex M/F	Ag e	NATIONA: Address 1) District 2) Sub-County/Div 3) Parish 4) Village/Zone (L. 5) Nearest health us 6) Land Lord (for U	C I) nit	D LEPRO REGISTI Disease Class (a) P-Pos P-Neg EPTB NSD	1. Date Treatment Started & Regimen Cat 1 2RHZE/6E H	(NTLP) Transfer In			ults of S Other E				
					6) Land Lord (for C	noan Aleas)	NSD	Cat 2 SRHZE Cat 3 RHZ	From(1) Reason(2)	PRE AFB (d)	Other	2(3)	w up	5 (g)	6 (8)	DST
	1)			1) 2) 4) 5)	3) 6)		1.	(1)						2	
4					1) 2) 4) 5)	3)			(1)				100			

- Go down the page of the register and count how many TB cases there are for the month/quarter of interest (all cases should have at least the unit TB number and/or district TB number).
- Count the TB cases transferred in and record in questionnaire.
- Subtract transferred in cases from the total TB cases and record in questionnaire

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• Record the recounted values for the quarter in the appropriate cells on the data collection form

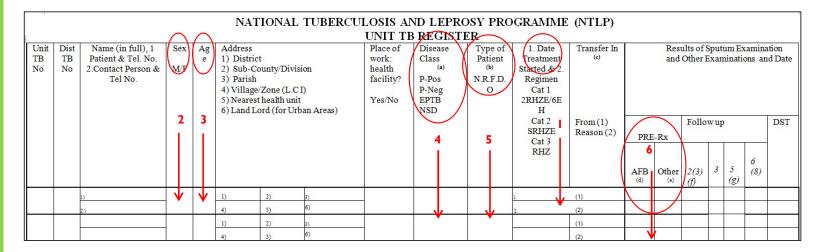
	REVIEW SOURCE DOCUMENT FO	R TR CASES A	ND ANSWER	THE FOLLOWING OUESTI	ONS			
DV_403	Please confirm the availability of the main source document used for reporting of notified cases of TB for the quarter (Month1 to Month3). If available and information on notified cases is recorded, please recount and record the number of notified cases of TB for the quarter (Month1 to Month3).		(A) SOURCE DOCUMENT AVAILABLE					
		AVAILAE INFORMATIC FOR NOTIFI	E DOCUMENT BLE WITH ON RECORDED ED CASES OF B*	NO, SOURCE DOCUMENT NOT AVAILABLE OR INFORMATION ON NOTIFIED CASES OFTB NOT RECORDED				
01	Quarter (Month 1 to Month 3) ation is only partially filled (for example for a few da		A=					
DV_404	From the main TB source document total number of TB cases that were transferred in for the verification po (MONTH 1 to MONTH 3). Please rectotal number for the quarter. IF THI REGISTER IS NOT AVAILABLE, RECO "9997".	t, count the eriod cord the E TB	B =					
DV_405	CALCULATE C: TOTAL NUMBER OF T FROM THE TB SOURCE DOCUMENT THE TRANSFERRED-IN CASES (TRAN IN CASES ARE NOT INCLUDED IN TH RECEIVING UNIT'S CASE REGISTRAT. THE TB REGISTER IS NOT AVAILABLE B = 0.	MINUS ISFERRED- IE IONS). IF	TB CASES TI C = A - B =	HAT SHOULD BE REPORTED)			



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TB cases – missing key data elements

 Record total number of cases with missing data for each of the six key variables from the unit TB register for period of interest



- The six key variables for assessment are: year of registration, sex, age, disease classification, type of patient and bacteriological results.
- For the verification period, for each of the six variables, go down the page of the register and count how many blank cells there and mark it down in the questionnaire.

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TB cases – missing key data elements

 Record the total number of cases with at least one missing data for the six key variables from the verification period in the Unit TB register?

Unit TB No	TB TB Patient & Tel. No.				3) Parish 4) Village/Zone (L.C I) 5) Nearest health unit				Disease Class (a) P-Pos P-Neg EPTB	Type of Patient (b) N.R.F.D. Regimer Cat 1	Transfer In Treatment Started & 2. Regimen Cat 1 2RHZE/6E		Results of Sputum Examination and Other Examinations and Date					
			2	3	6) Land L	ord (for Urb	oan Areas)		NSD 4	5	H Cat 2 SRHZE Cat 3 RHZ	From (1) Reason (2)	PRE-R		llow u		6 (8)	DST
		1)			1)	2)	3)				1.	(1)			×			
	86	2)			4)	5)	6)	16	i r		2.	(2)						
_	*	21			1)	2)	3)	100				(1)						
Ш		7			4)	5)	6)					(2)						

- The six key variables for assessment are: year of registration, sex, age, disease classification, type of patient and bacteriological results.
- For the verification period, go across the page of the register and count how sometimes many cases have one or more of these six variables with blank cells, and mark it down in the questionnaire.

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• Record the number of cases with missing values in the appropriate cells on the data collection form

DV_406	MISSING DATA: ASK TO SEE THE TB REGISTER Count the number of cases in the quarter (MONTH 1 to MONTH 3) with missing information for each of the following columns in the unit TB register.	NUMBER OF CASES (ROWS) WITH MISSING DATA If N/A, please use 9999
01	Year of registration	
02	Sex	
03	Age	
04	Disease classification/Anatomical site of disease	
05	Type of patient /History of previous TB treatment/Patient registration group	
06	Bacteriological results	
07	Number of cases missing data in at least 1 of the 6 columns listed above	

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TB cases notified

Unit TB monthly report

Name of BMU: Facility:								Patien	ts registere	ed during	aquarter	of year	
Name of TB Coordinator: Signature:								Date of completion of this form:					
Block 1:	All TB cases i	egistered	during the	quarter ^b									
						New	Relap		Previously (excluding				Total
Pulmonar	y, bacteriologic	ally confirm	med										
Pulmonar	y, clinically diag	nosed											
Extrapulm	nonary, bacterio	logically c	onfirmed or o	linically diag	nosed								
Block 2.	All new and re	lapse cas	ses (bacterio	ologically co	onfirmed or	clinically o	diagnose	d) regi	stered du	ring the	quarter by age g	roup a	nd sex
	Г		45.04	05.04	35-44	45.54	20 5	.c.	12/22	66 0 3			
	0–4	5-14	15-24	25–34	35-44	45-54	55–6	4	>65	Total			
lale	0–4	5–14	15-24	25-34	35–44	45-54	55–6	4	>65	Total			
fale emale	0–4	5–14	15-24	25-34	35–44	45-54	55–6	4	>65	Total			
emale	0–4 Laboratory di			25–34							luring the quarte	er)	

- Sum the total of pulmonary (bacteriologically confirmed and clinically
- diagnosed) and extra pulmonary TB for the period of interest and enter in questionnaire

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Registration period is based on date of registration of cases in the TB register, following the start of treatment. Q1: 1 January – 31 March; Q2:1 April – 30 June; Q3: 1 July – 30 September; Q4:1 October – 31 December.

b "Transferred in" cases are evoluted

Reported Values

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Recounting TB Cases Notified

 Record the reported values from quarterly facility report in the appropriate cells on the data collection form

DV_407	Please confirm the availability of the monthly report form in which notified cases of TB are recorded and sent to the district or next level administrative unit for Month1 to Month3. If available, please record the number of notified cases of TB entered in the quarterly report form for Month1 to Month3.	(A) QUART	(B) RECORD NUMBER OF NOTIFIED CASES OF TB IN QUARTERLY REPORT		
		YES, MONTHLY REPORT AVAILABLE WITH INFORMATION RECORDED FOR NOTIFIED CASES OF TB	YES, MONTHLY REPORT AVAILABLE BUT INFORMATION ON NOTIFIED CASES OF TB NOT RECORDED	NO, MONTHLY REPORT NOT AVAILABLE	
01	Quarterly report (Month 1 to Month 3)	1 → B	2- DV_408	3- DV_408 ←	D =

Potential Cross Checks

- Cross checks are verifications of service delivery across data sources which can help identify data quality problems.
- If time permits, the following cross checks can be conducted for TB.
 - Verify patients' diagnostic information between the TB register and the TB laboratory register.
 - Compare the number of patients treated in a given reporting period to the number of patients prescribed medication in the pharmacy log book.
 - Compare patients treated against consumption of drugs in the drugs stock management logs.

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Keep in mind...

- Pay attention to the indicator definition to know what should be counted and what should not. Note that the indicator includes all forms of TB (pulmonary, extra pulmonary, etc.)
- Pay attention that the dates on the source documents correspond to the reporting period selected for review.
- Notice that the TB section of the DV/SA contains supplemental content related to the extent of missing data for priority data elements from the TB register.
- TB is often reported quarterly from health facilities.

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Questions

- What is the source document for the indicator
 TB cases notified?
- What is the TB Basic Management Unit?
- When assessing the extent of TB missing data (data element completeness) what value should be entered for the data element "year"?
- What is the periodicity of reporting for TB data?

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Practice

Practice with example TB Patient Card and/or TB Registers

- Work in small groups to conduct the recount (2-4 participants, depending on the number of available registers).
- The facilitator will provide example source documents for you to work with.
- Your instructor will give you the reporting period (quarter) to be verified. With this you can begin counting the number of TB Cases Notified.
- You have 60 mins.

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