

Guidelines on how to prepare a personal training plan for future TB consultants for TBCTA

Task Force Training, TBCTA
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1. TBCTA and the need for TB consultants

By the year 2000 over 8 million people were developing active tuberculosis, and nearly 2 million were dying every year. An effective means to deal with this problem exists: the DOTS strategy. A growing number of countries implemented the DOTS strategy. Current trends, however, indicate that global targets will not be reached as rapidly as needed. An important limitation to the successful implementation of DOTS is the limited expertise and experience in countries concerned. Many countries ask TBCTA-partners for technical assistance.

The consultants' capacity of the TBCTA partners, however, is limited and gets overburdened. Increasingly partners are not able to address requests for technical assistance. For the DOTS expansion in general and the task of TBCTA in particular, the pool of highly motivated and general and specialized consultants needs to be enlarged. TBCTA-partners will identify, recruit and train future consultants for TB control.

However, the creation of a pool of new consultants is not possible by just developing one course or a general training plan, mainly due to three reasons:

- First it is not possible to acquire all necessary knowledge, skills and attitudes (in other words to become competent as a consultant) by participating in one or more training course. Field training with an experienced consultant should be part of the training of consultants.
- Second, the needed expertise is divers. In addition to general consultants (overall DOTS expansion) specialists are also needed (e.g. HRD, advocacy, laboratory, epidemiology etc). Their required knowledge, skills and attitudes (KSAs) are partly the same, partly different. Then there is also the question if one can expect the same level of expertise from individuals working full time as consultants (e.g. staff at KNCV/IUATLD/WHO) or individuals that do consultants work once or twice a year (e.g. staff from NTPs, academic institutions, pulmonologists).
- Third, the background of potential consultant candidates varies. A candidate with consultant experience in an area of public health other than tuberculosis needs different training from a candidate that worked several years in a NTP but with no consultant experience.

To support the TBCTA-partners with the training of newly recruited consultants the Task Force Training has developed these guidelines. The guidelines are a tool to assist TBCTA-partners in developing Personal Training Plans for candidate consultants. It should be stressed that these guidelines are intended to provide a helping hand to select appropriate training for individual consultants and not as a mandatory format for training of consultants.

2. What is a Personal Training Plan

A Personal Training Plan is an agreement between the consultant candidate and the organization taking responsibility for the training of the consultant. As the term already indicates: a Personal Training Plan is purely personal. In this agreement the consultant candidate consents what he/she will do to develop the competencies needed to become a consultant. At the same time the supervisor describes the support the consultant candidate will receive during the period he/she will be trained as a consultant.

A personal training plan consists of the following:

1. An assessment of competencies (knowledge, skills and attitudes) the consultant candidate already has and the competencies still required by the consultant. The comparison between these two sets of competencies determines the contents of training.
2. Selection of relevant courses to acquire the needed competencies.
3. Selection of relevant field training to acquire the needed competencies, specifying the number of field visits together with experienced consultants, the number of mission reports reviewed by an experienced consultant etc.

Once the organisation has selected a candidate to be trained as an consultant, the Personal Training Plan is a helpful instrument for both the organization and the consultant candidate to determine which competencies should be developed, how they are to be developed and within which time frame. A Personal Training Plan can be compared to an action plan that, based on the current competency level of the consultant candidate, describes the training activities he/she will undertake to develop the required competencies.

3. Who is doing what in preparing and implementing the Personal Training Plan

In general TBCTA seeks to develop generalists. It is however also possible to design training plans that incorporates a certain specialization. For example, a candidate consultant may have specific knowledge/experience in drug management, or human resource development, etc. Such capacity could be emphasized and strengthened, to make it beneficial for TB as well.

TBCTA-partner organization

- identifies a consultant candidate according certain selection criteria. Figure 1 gives an example of inclusion criteria for TB consultants.
- employs the consultant candidate full time or part time (at least during the training period)

- applies for the necessary funds at TBCTA to cover the costs of the training of the consultant candidates (the costs of the necessary courses and training on the job)
- appoints a supervisor within the organisation
- develops together with the consultant candidate a personal training plan for the consultant candidate
- monitors, steers and evaluates the education process.

Figure 1
Example of inclusion criteria for candidate TB consultants

- Academic background preferably with post graduate training (MPH or MSc) or comparable degree
- Individuals with proven (at least 3 years) experience in public health and/or program management (infectious disease control) in development countries.
- Strong motivation and professional interest
- Proficient (speaking reading and writing) in at least one (preferably two) official languages (English, French, Spanish, Russian)
- Good writing and communication skills (tactful and diplomatic)
- Computer skills
- Willingness to travel

Consultant candidate

- develops the personal training plan, together with the supervisor and revises it when necessary
- registers for and attend training courses
- demonstrates an active learning attitude during courses, meetings and field training
- is responsible for his/her learning process to become a consultant.

Supervisor

- defines which competencies are needed
- supports the consultant candidate in developing the personal training plan
- supports the candidate with his training, gives feedback, follow-up etc.
- identifies the preceptor(s) during the field training and informs the preceptor(s) about his/her role
- is responsible for monitoring the progress of the consultant candidate and helps to adjust the training plan.

Preceptor(s) during field visits

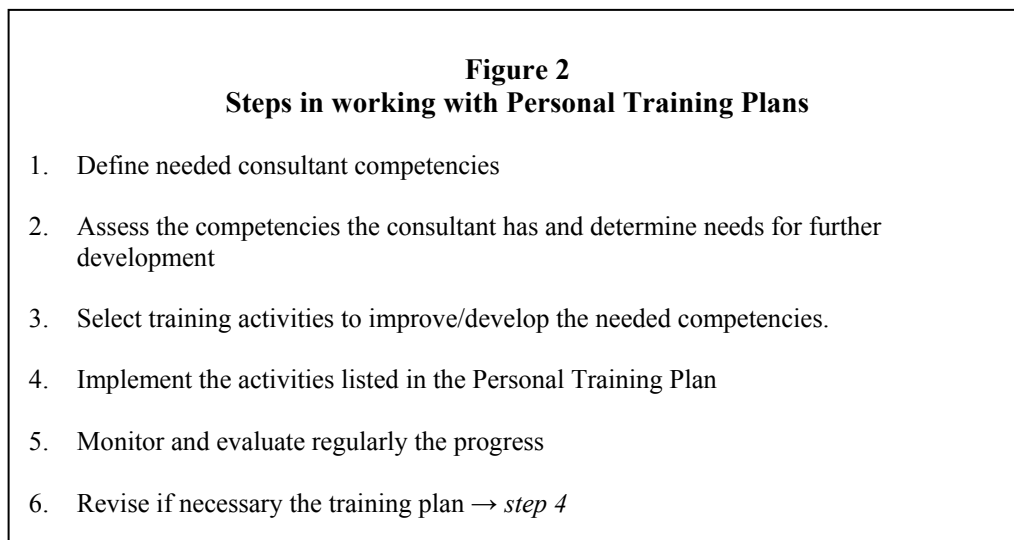
- is a senior consultant and can be an employee of the same organization or of an other Stop-TB agency
- acts as a role-model
- informs the consultant candidate about the work of a consultant
- supports the consultant candidate in preparing the mission, linking with counterparts and program staff, debriefing and report writing
- gives feedback to the consultant candidate
- informs, if necessary, the supervisor.

Task Force Training

- Provides guidance in the use of the "personal Training Plans", updates and revises the Guidelines as necessary.

4. A step by step approach to the development of a Personal Training Plan

To develop a Personal Training Plan requires a step-by-step approach. These steps are listed in Figure 2 below.



A format for the Personal Training Plan is found in **Annex 1**. This format can be adapted as necessary.

The training of a new consultant, depends on:

- The competencies needed for this job.
- The background of the consultant.

Step 1 Define needed consultant competencies

The competencies that may be relevant to a consultant's job are described in **Annex 2**. These are competencies that every TB-consultant should possess to a certain extent. However, each organization will have a different view on the importance and relevance of certain competencies. Some will be considered more important than others. So it is important for each organization to identify competencies that are considered essential and to modify the list with competencies to fit the individual organization and the type of consultant needed.

Step 2 Assess the competencies the consultant has and determine needs for further development

The consultant already has gained specific competencies. He/she has developed them during former training, education and/or working experience. Some competencies are well developed and need only to be maintained, others need improvement or even development. Both the organization and consultant candidate should make a realistic assessment of the competencies that are to be maintained, improved or developed. In this assessment a variety of sources of information can be taken in consideration:

- former education and training;
- consultant's personal ambitions;
- mission and needs of the organization;
- consultant's working experience.

The assessment of competencies is done through discussions between supervisor and consultant and based on observations and experiences during fieldwork, courses etc.

Step 3 Select training activities to improve/develop the needed competencies

Step 2 determines which competencies the consultant candidate still needs training. This step will select the training activities needed to develop these competencies. Possible training activities are:

- Field training (see Annex 3)
- Courses and (peer group) meetings (Annex 4 lists relevant courses organized by TBCTA-partners and some other organizations for training of consultants)
- Self study (See Annex 4 that lists relevant literature/materials by TBCTA-partners and some other organizations for training of consultants).

Step 4 Implement the activities listed in the Personal Training Plan

The consultant candidate registers for and follows the necessary courses. The consultant candidate attends the (peer group) meetings. The consultant candidate carries out selected field visits.

Step 5 Monitor and evaluate regularly the progress

The supervisor and consultant candidate should regularly discuss the progress. This evaluation is based on a self-evaluation by the consultant candidate, the observations of the preceptor(s) during field visits and discussion of the mission report written by the consultant candidate.

Step 6 Revise if necessary the training plan

If the evaluation shows certain shortcomings, it might be necessary to adapt the personal training plan. The consultant candidate and supervisor decide on the further training trajectory.

Figure 3 gives an example of this step by step approach in a specific situation.

Figure 3
Example of the training of a consultant according to a personal training plan

*Situation**

KNCV tuberculosis foundation recruits a new consultant Carina. Carina has a MPH. The last four years she worked as a TB doctor in a hospital in Kenya.

Step 1 Define needed consultant competencies

The KNCV needs a general consultant. It is concluded that the competencies listed in Tool 1 will need no modification and can be used as a tool in assessing the competencies of Carina.

Step 2 Assess the competencies the consultant has and determine needs for further development

Looking at the background and experiences of Carina and the necessary competencies, both Carina and the supervisor conclude that the training trajectory should focus on management and program evaluation skills.

Step 3 Select training activities to improve/develop the needed competencies

Based on the assessment of competencies the following training activities are selected. Within two years Carina will:

- Follow the Arusha course (IUATLD)
- Follow the training for TB consultants (WHO)
- Read relevant self-study materials and discuss them with the supervisor
- Attend the consultants meetings at the IUATLD-conference
- Attend two peer-group meetings
- Attend the meetings of the Program advisory group (KNCV)
- Join KNCV-consultants on three field visits: in the first mission as an 'observer', in the last field visits Carina will have a more active role (the senior KNCV-consultant will remain more in the background).
- Join an IUATLD-consultant on a mission.

Step 4 Implement the activities listed in the Personal Training Plan

Carina registers for the courses and meetings. The supervisor contacts IUATLD to inform what the possibilities are for Carina to join an IUATLD-consultant.

Step 5 Monitor and evaluate regularly the progress.

After each course and mission the supervisor and Carina evaluate the progress. Carina writes draft mission reports on the second and third mission. These reports also serve as a basis to discuss her achievements.

Step 6 Revise if necessary the training plan. → step 4

After two field-visits both Carina and the supervisor conclude that Carina learns quickly, however her advisory skills may still be improved. A new training activity will be a course in advisory skills. Besides Carina will ask the senior consultant specific feedback on these skills during the third and fourth mission. After four field visits Carina and the supervisor conclude that she can independently prepare, organize and carry out a mission, but that for the coming field visits she will still discuss the Terms of reference, planning and report with the supervisor.

* The situation and consultant candidate are fictitious.

Annex 1

Format for personal training plan

Format Personal Training Plan

Name:
Position:
Year:

Competencies that need to be improved/developed

.....
.....
.....
.....
.....
.....

Training activities

Training activity	Starting date	Time	Final Date	Realisation
Courses				
(Peer-group) meetings				
Field visits				
Self-study: literature/CD-ROM etc.				

Annex 2

Tuberculosis Consultant Competencies

Tuberculosis Consultant Competencies

Introduction

This tool gives a description of competencies that are relevant to the work of a TB consultant. The list of competencies exists of two parts:

- Foundational competencies. These are competencies that are required for all TB consultants (generalists and specialists).
- Specific TB consultant competencies. These are competencies that are required for generalist TB consultants (overall DOTS expansion).

This tool should assist the supervisor and the consultant candidate to identify:

- the essential competencies of a TB consultant working for this organization;
- the competencies that the consultant candidate already have;
- the gap between 1 and 2 which consists the areas that training of the consultant candidate should be focussed on.

TB consultant competencies

The purpose of tuberculosis consultants is to enhance ability of NTPs to have an impact on the global burden of TB. This will be accomplished by providing state-of-the-art, technically sound, context-appropriate advice on cost-effective approaches for preventing tuberculosis and drug resistance in high incidence countries.

The consultant will achieve this by providing consultation and technical assistance to USAID's field missions, G/PHN and Geographic Bureaus, as well as to public and private Stop TB Initiative partners in high burden countries and others to better design, implement, monitor, and evaluate tuberculosis programs and interventions. The consultant will also assist in the identification, synthesis, and dissemination of lessons learned and best practices.

The consultant will focus on his/her value-added role and uphold an environment conducive to innovation, capacity building, co-ordination, and collaboration, and a genuine respect for partners, other agencies, and the communities served.

FOUNDATIONAL COMPETENCIES OF TB CONSULTANTS		
#	Competency	Description
1	Agency/Center/institute/ Office Operations	<ul style="list-style-type: none"> • Demonstrates knowledge of the TB control mission, national program organization, and work processes of programs throughout the sectors. • Demonstrates knowledge of DOTS implementation and priorities for health improvement/disease prevention. • Is able to understand the perspectives and functions of donors, PVO's and international organizations.
2	Oral Communication/ Presentation Skills	<ul style="list-style-type: none"> • Makes clear and effective oral presentations to individuals and groups. • Uses effective platform presentation skills supported by appropriate visual aids. Utilizes active listening skills and responds to others as appropriate.
3	Writing Skills	<ul style="list-style-type: none"> • Communicates effectively, clearly and concisely in writing. • Reads or scans large volumes of material to discern key facts. • Develops and/or translates complex professional information into understandable messages and talking points for technical and non-technical audiences.
4	Interpersonal Communication	<ul style="list-style-type: none"> • Considers and responds appropriately to the needs, sensitivities, capabilities and interests of others; provides feedback; treats others equitably and with respect.
5	Conflict Management	<ul style="list-style-type: none"> • Anticipates and seeks to resolve confrontations, disagreements, and complaints in a constructive manner. • Demonstrates ability to work with diverse and/or difficult people toward a common goal.
6	Cultural Competency	<ul style="list-style-type: none"> • Understands implications for public health of increasingly diverse communities (including racial, ethnic, linguistic, religious, gender diversity). • Adapts public health education practices to the needs of diverse populations. Understands the role that culture plays in communication and is able to interact sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, and professional backgrounds. • Develops capacity to address cultural differences when faced with new or unfamiliar cultural paradigms.
7	Team Skills	<ul style="list-style-type: none"> • Participates productively as a team member or team leader. • Facilitates cooperation, communication and consensus among groups. • Contributes to the outcomes of a mutual goal.
8	Continuous Learning	<ul style="list-style-type: none"> • Acquires new skills continuously and transfers them from one context to another. Asks pertinent questions, identifies the essential components within complex ideas or tasks; applies skills toward specific job tasks. • Supports personal growth and the development of subordinates as appropriate.

9	Technology Literacy/Skills	<ul style="list-style-type: none"> • Demonstrates awareness and proper use of available technologies, including e-mail, voice mail and computer software. • Makes appropriate use of available technology to communicate and process work. Understands applications of technology and its implications for health message delivery. • Demonstrates ability to access and research appropriate resources on the Internet.
10	Customer Service	<ul style="list-style-type: none"> • Solicits internal and external customer input and ensures customer needs are met. • Seeks to improve the quality of services, products, and processes.
11	Flexibility	<ul style="list-style-type: none"> • Adapts to changes in the work environment. • Demonstrates the ability to prioritize and manage multiple tasks.
12	Personal Leadership	<ul style="list-style-type: none"> • Displays initiative and works persistently towards agency goals. • Takes responsibility for outcomes of assigned tasks. • Assesses own strengths and weaknesses, and impact on others. • Demonstrates self-confidence and invests in self-development. • Manages own time efficiently.
13	Problem Solving	<ul style="list-style-type: none"> • Identifies and analyzes issues and develops recommendations to resolve problems of effectiveness and efficiency of program operations. • Recognizes and defines problems; analyzes relevant information; encourages innovative solutions and plans to solve problems. • Fosters innovation and anticipates future trends. • Understands and is able to articulate new concepts. • Makes sound and well-informed decisions.
14	Ethics	<ul style="list-style-type: none"> • Displays high standards of conduct and understands the impact of violating these standards on organization, self, and others. • Understands the ethics of public health care. • Applies ethics to the full range of public health work. • Demonstrates ability to educate and raise the awareness of others as to ethical considerations/standards/approaches to program management

SPECIFIC CONSULTANT COMPETENCIES		
#	Competency	Description
1	Health systems, health policies	Demonstrates ability to understand and assess: <ul style="list-style-type: none"> • The role and dynamics of health systems including health system reforms, SWAP etc. • International policies, roles and functions of partnerships and global issues /developments.
2	Tuberculosis	Demonstrates ability to understand and assess: <ul style="list-style-type: none"> • The epidemiology of tuberculosis and HIV, • The essential aspects of tuberculosis control at the community, regional, country, and global levels. • The health status of populations, • Mechanisms for TB and HIV disease prevention, and factors influencing the

		<p>use of health services.</p> <ul style="list-style-type: none"> • Significance of Multiple Drug Resistance
3	Planning (based on needs assessment)	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Existing TB program needs using different types of quantitative information e.g. reported data and information from surveys, and qualitative data (from observations, interviews, focus groups etc). • Opportunities for partnership/ collaboration including public/ private sector mix, HIV-TB. • Planning methodologies (like logical framework) in a participatory approach. • Available assets and needed resources • Strategies for identifying and involving community organizations and other resources.
4	Surveillance & Data Collection and analysis	<p>Demonstrates ability to:</p> <ul style="list-style-type: none"> • Review and verify TB surveillance data collection tools and materials • Analyze / interpret collected data. • Draw conclusions based on these data reaching action-oriented recommendations.
5	Diagnostic services	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Basic components of the diagnostic system of smear microscopy, including smear preparation, microscopic examination and lab administration. • Functioning of the External Quality Assurance system.
6	Treatment services	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Application of treatment regimens • Treatment monitoring & supervision system within control programs.
7	Drug Management	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Drug management system including procurement, supply, distribution, storage, stock keeping, planning and reporting. • Measures to address MDR adequately.
8	Human Resource management	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Implementation of comprehensive strategies for human resource development for TB control in the NTP. • Planning and development of information system for supervision and follow up of HRD at different levels of the health system (including Pre-, and In-service training)
9	Financial Management	<p>Demonstrates ability to review, analyze and advise on:</p> <ul style="list-style-type: none"> • Program planning and budgeting, financial management and basics of auditing. • Program administration and management of program resources. • Adjusting financial plans to attain program objectives.
10	Research	<p>Demonstrates ability to review, analyze and advise on application of basic operational / scientific research principles and -techniques.</p>
11	IEC	<p>Demonstrates ability to review, analyze and advise on relevant aspects of patient education / community health education, communication theories, methodologies and techniques.</p>
12	Program Management and Implementation	<p>Demonstrates ability to:</p> <ul style="list-style-type: none"> • Identify and analyze issues and formulates recommendations to resolve substantive problems of effectiveness and efficiency of program operations. • Monitor and review progress of implementation of workplans together with key partners.
13	Program Evaluation	<p>Demonstrates ability to:</p> <ul style="list-style-type: none"> • Plan and conduct different types of evaluation as appropriate including formative evaluation, delivery/implementation evaluation, exposure/reach evaluation, effect evaluation, cost/benefit evaluation, and theory based

		<p>evaluation.</p> <ul style="list-style-type: none"> • Analyze diverse data and synthesize into a health intervention program. • Engage stakeholders as appropriate, describe the program, focus the evaluation design, gather credible evidence, justify conclusions, identify solutions and share lessons learned. • Understand the principles of process, impact, and outcome evaluation • Conduct impact evaluations of different program components to determine their individual contributions.
14	Advocacy	<p>Demonstrates ability to:</p> <ul style="list-style-type: none"> • Convey essential findings, conclusions and recommendations to key decision makers at (inter) national level in order to elicit their commitment and support for DOTS expansion in order to reach the global targets. • Influence policy at regional and country levels through personal contacts, networking, and memberships.

Annex 3

Field training of tuberculosis consultants

Field training of tuberculosis consultants

Introduction

Part of the training of TB consultants is field training: the training-on-the-job together with a senior consultant. This tool describes the importance of the field training and how it can be organized.

Importance of field training

To become a consultant is not possible by just following courses, attend (peer group) meetings and reading relevant literature. Field training with an experienced consultant should be part of training of each consultant candidate, because:

- Training on the job is a very effective and flexible way of learning. Professionals learn best by doing. Consultant candidates can acquire knowledge and skills in courses and by self-study. Important, however, is also to apply this knowledge and skills in real working situations.
- Assessing the competencies of the consultant can best be done by observing the way he/she works as a consultant. Only by putting acquired knowledge and skills in practice, combined with former work experience the consultant candidate can demonstrate if he/she has the required competencies.

The number of field visits in the training of a consultant depends on the background/experience of the consultant candidate. However, two visits seem to be the minimum for the TBCTA-partner organization to assess the competencies of the consultant candidate. At the other hand, if the consultant candidate has no prior experience in working as a consultant, two visits will not be enough to acquire the necessary competencies.

The preceptor

An important factor that determines the success of the training-on-the-job is the preceptor: the 'mentor' during the field visits. Each TBCTA-partner organization is responsible for the matching of individual consultant candidates with individual preceptors (senior consultants). There are three options. The consultant candidate:

- is linked to one preceptor only or,
- joins several consultants of one stop TB agency or
- joins senior consultants from various Stop TB agencies.

A consultant should meet the following requirements in order to be a good preceptor. The consultant has to:

- be a senior TB-consultant. The preceptor serves as an example of the competencies that should be acquired: is a role model. This requires being an experienced TB consultant.
- have didactical skills. The preceptor should be able to:
 - observe strengths and identify the learning needs of the consultant candidate
 - motivate the consultant candidate and indicate how to acquire the necessary competencies
- give frequently (positive and negative) feedback to the consultant candidate.
- reserve time, and have patience and motivation to support and facilitate the learning process of the consultant candidate.

Organization of the field training

The field visits are initially under supervision with gradually increased independent responsibility. Before and during each field visit the consultant candidate and preceptor discuss their roles. What degree of supervision is needed in:

- Preparation and organization of the field visit (planning and programming including formulating Terms of Reference of the field visit).
- Linking with counterparts and program staff for organization of the field visit.
- Debriefing at the end of the field visit
- Report writing.

In case of different preceptors, they should be informed about the grade of independence the consultant candidate is on at the moment of the discussion.

In the last field visit the consultant candidate should perform these tasks independently (all under direct or in-direct supervision of the preceptor).

Monitoring and evaluation

At the end of each field visit:

- The consultant candidate submits a self-evaluation on progress, achievement and felt shortcomings, based on list of competencies (see Annex 2 and example/outline of competency assessment).

- The preceptor submits an evaluation on achievements and shortcomings of the consultant candidate, based on list of competencies (see Annex 2 and example/outline of competency assessment). This is done through discussions and observations, by scoring the level of mastered skills for each of the individual core competencies and indicating recommended direction for further training.
- In collaboration with the consultant candidate the preceptor and supervisor decide on the further training trajectory for the consultant.

Example / Outline of competency assessment

#		Adequate	Needs improvement	Needs development
Foundational competencies of TB consultants				
1	Agency/Center/Institute/Office operations			
2	Oral communication/presentation skills			
3	Writing skills			
4	Interpersonal communication			
5	Conflict management			
6	Cultural competency			
7	Team skills			
8	Continuous learning			
9	Technology literacy skills			
10	Customer service			
11	Flexibility			
12	Personal leadership			
13	Problem solving			
14	Ethics			
Specific TB consultant competencies				
1	Health systems/health policies skills			
2	Tuberculosis			
3	Planning (based on needs assessment)			
4	Surveillance & Data Collection and analysis			
5	Diagnostic services			
6	Treatment services			
7	Drug Management			
8	Human resource management			
9	Financial management			
10	Research			
11	IEC			
11	Program management and implementation			
12	Program evaluation			
13	Advocacy			

Annex 4

Inventory of relevant courses and materials for training of TBCTA consultants

Books

- Rieder HL. *Epidemiologic basis of tuberculosis control*. International Union Against Tuberculosis and Lung Disease (IUATLD), 1999.
- Rieder HL. *Interventions for tuberculosis control and elimination*. Paris, International Union Against Tuberculosis and Lung Disease (IUATLD), 2002.
- *Tuberculosis Programs Review, planning, technical support: a manual of methods and procedures*, International Union Against Tuberculosis and Lung Diseases (IUATLD). ISBN 9979-60-400-X
Available at www.iuatld.org/pdf/en/guides_publications/tb_programs.pdf
- *The Public Health Service National Tuberculosis Reference laboratory and the national laboratory network*. International Union Against Tuberculosis and Lung Disease (IUATLD).
ISBN nr: 2-9504238-7-6
Available at: www.iuatld.org/pdf/en/guides_publications/public_health_service.pdf
- *Management of Tuberculosis: a Guide for Low Income Countries*. International Union Against Tuberculosis and Lung Disease (IUATLD), 2000.
ISBN nr: 2-914365-00-4
Available at www.iuatld.org/pdf/en/guides_publications/management_of_tb.pdf
- WHO, *Checklist for review of the training component of the National Plans to Control Tuberculosis*, Draft, Geneva, June 2002
- WHO, *Guidelines for conducting a review of National Tuberculosis program*, WHO/TB/98.240, Geneva, 1998
- WHO, *The training co-ordinator's handbook. Basic skills and tools for managing human resource development for tuberculosis control*. Draft, Geneva, November 2002
- WHO, *Training for better TB control. Human resource development for TB control. A strategic approach within country support*. WHO/CDS/TB/2002.301, Geneva, 2002.

Additional documents can be found on www.stopTB.org.

CD-ROMS

- *Tuberculosis Documentation for health care professionals*, International Union Against Tuberculosis and Lung Disease (IUATLD), 2002.

The CD-ROM contains training material from the IUATLD international Tuberculosis Courses: IUATLD tuberculosis and research publications, slide shows (clinical, epidemiology, interventions), courses (mycobacteriology, operations research).

Websites

- www.who.org/gtb
- www.iuatld.org
- www.lungusa.org
- www.thoracic.org
- www.cdc.gov
- www.tuberculose.nl
- www.stoptb.org
- www.TBCTA.org

Courses / Activities

American Thoracic Society International Conference (ATS)

Title of material/course	American Thoracic Society International Conference
Primary language	English
Organization(s)	American Thoracic Society
Contact person	Fran Comi
Phone	212/315-8794
E-mail	Fcomi@thoracic.org
Web site (with information on course)	www.thoracic.org/ic/ic2003
1. Objectives of the course/material	Each of the courses/sessions has a separate set of objectives. These can be viewed on the website.
2. Target audience (requirements/selection criteria)	Clinicians, scientists, and health care providers interested in lung disease.
3. Duration of the course	WA; May 21-26, 2004, Orlando, FL; May 19-24 2005 San Francisco, CA.
4. Brief content outline of the material/course	N/A
5. Costs	ATS members: \$475.00 (US) Non-members \$700.00 (US)
6. Where and when (frequency)	
Additional information	

Training Methods for Epidemiologic and Operations Research (ATS)

Title of material/course	Training Methods for Epidemiologic and Operations Research
Primary language	English (some Spanish available)
Organization(s)	American Thoracic Society
Contact person	Shane McDermott
Phone	212/315-8736
E-mail	Smcdermott@thoracic.org
Web site (with information on course)	www.thoracic.org
1. Objectives of the course/material	<p>Project: Strengthen capacity of persons in public health programs and medical school facilities to design and conduct basic epidemiological and operations research related to Tuberculosis and other common respiratory diseases.</p> <p>Course: Provide each student with an intense interactive experience around the development of an epidemiological or operations research protocol; introduce each student to EpiInfo (English and Spanish); and assist each student with the development of a research protocol.</p>
2. Target audience (requirements/selection criteria)	Latin American Physicians (pulmonary, specialists in infectious disease, public health practitioners)
3. Duration of the course	1 week
4. Brief content outline of the material/course	
5. Costs	Students responsible for travel and hotel; travel stipends available on limited basis.
6. Where and when (frequency)	2004 to be determined.
Additional information	

TB Infection Control Training Course and Site Assessment (CDC)

Title of material/course	Course, TB Infection Control Training Course and Site Assessment
Primary language	English and Russia
Organization(s)	NCHSTP & NIOSH
Contact person	Paul A. Jensen, PhD, PE
Phone	404-639-8310
E-mail	Pjensen@cdc.gov
Web site (with information on course)	
1. Objectives of the course/material	Transmit the fundamentals of infection control in dispensaries, hospitals, prisons, shelters, polyclinics, and similar institutional settings to protect employees, patients, inmates, and residents against tuberculosis (TB) and multidrug resistant TB (MDR TB). More importantly, by the end of this course you will have developed the framework for your own infection control plans to protect your personnel and your patients or inmates against TB & MDR TB.
2. Target audience (requirements/selection criteria)	Doctors, nurses, technical staff, engineers, building designers, maintenance personnel, infection control staff, administrators, Ministry of Health personnel, and regulators. Both civilian and prison system personnel.
3. Duration of the course	Two days with an optional half-day practical, hands-on session
4. Brief content outline of the material/course	<ul style="list-style-type: none"> - Introduction to Program and to TB Infection Control - Administrative Controls - Environmental Controls <ul style="list-style-type: none"> o Ventilation (general and local ventilation) o Air cleaning (air filtration and air cleaners) o Ultraviolet (UV) light - Respiratory Protection <ul style="list-style-type: none"> o Respirators o Fit testing - Virtual walk-through of a facility - Practical exercise (optional) <ul style="list-style-type: none"> o Walk-through of local facility o Assessment of administrative, environmental, and respiratory protection measures o Measurement of air flow, direction of air flow, calculation of air exchange, measurement of filter efficiency, observation of hood effectiveness, measurement of UV light
5. Costs	?
6. Where and when (frequency)	Wherever and whenever . . .Do it upon request
Additional information	Current instructors include Paul A. Jensen, PhD, PE, Michael L. Qualls, MPH, and Ernest S. Moyer, PhD

International Tuberculosis Course - Arusha (IUATLD)

Title of material/course	International Tuberculosis Course - Arusha
Primary language	English
Organization(s)	IUATLD
Contact person	Hans L. Rieder
Phone	
E-mail	TBrieder@tbrieder.org
Web site (with information on course)	www.iuatld.org
1. Objectives of the course/material	To provide the participants with a thorough and in-depth review of the scientific basis of tuberculosis control, i.e., the DOTS strategy, with documentation on all aspects relevant to its comprehension, and to provide them with an opportunity through field visits to apply and review a national program in action, and to analyze its weaknesses, strength, and constraints, and to make recommendations to the national authorities based on this assessment.
2. Target audience (requirements/selection criteria)	The course addresses tuberculosis control managers with responsibility at regional and national level working largely in anglophone countries in Africa
3. Duration of the course	The course duration is 3 weeks
4. Brief content outline of the material/course	To provide participants with the scientific basis of the DOTS strategy with a particular emphasis on: <ul style="list-style-type: none"> • Bacteriologic basis of tuberculosis control • Clinical presentation and diagnosis of tuberculosis • Epidemiologic basis of tuberculosis control • Interventions for tuberculosis control and elimination • Principles of tuberculosis control
5. Costs	
6. Where and when (frequency)	Once per year, in November, in Arusha, Tanzania
Additional information	

International Tuberculosis Course, Hanoi (IUATLD)

Title of material/course	International Tuberculosis Course, Hanoi
Primary language	English
Organization(s)	IUATLD
Contact person	IUATLD, Cecile Sevel, 68 boulevard Saint-Michel - 75006 Paris - FRANCE -
Phone	Tel: +33-1 44 32 03 60 - Fax: +33-1 43 29 90 87
E-mail	courses@iuatld.org ; CSevel@iuatld.org ; TBRieder@tbrieder.org
Web site (with information on course)	http://www.iuatld.org/full_picture/en/frameset/frameset.phtml
1. Objectives of the course/material	<ul style="list-style-type: none"> To provide the participants with a comprehensive overview of the scientific basis of tuberculosis control; To provide the participants with the skill to assess the tuberculosis situation and quality of control in a country; The course is conducted in class and in the field. The participants are provided with the pertinent literature that covered the subjects presented by internationally renowned experts in the fields of bacteriology, clinical presentation and diagnosis, epidemiology, interventions, and principles of control. The in-class presentation is followed by in-class task solving in group work, a field visit, and reports on the field visit.
2. Target audience (requirements/selection criteria)	The course addresses tuberculosis control managers with responsibility at regional and national level working largely in anglophone countries in Southeast Asia
3. Duration of the course	3 weeks
4. Brief content outline of the material/course	Bacteriologic basis of TB control Epidemiologic basis for TB control Clinical presentation and diagnosis of tuberculosis Intervention strategies in TB control Principles of a national TB control program The National TB Program in Vietnam
5. Costs	The participants need to obtain funding for the following: Course tuition fees (US\$ 1,000); Travel ticket; Accommodation (about US\$ 20-25/person/night); Cash for meals (from US\$ 5/person/meal) and incidental expenses (approximately US\$ 5-10/person/day).
6. Where and when (frequency)	Hanoi, Vietnam, 24 August 25 - September 2003 (English)
Additional information	

International Tuberculosis Course, Cotonou (IUATLD)

Title of material/course	International Tuberculosis Course, Cotonou
Primary language	French
Organization(s)	IUATLD
Contact person	Arnaud Trébucq
Phone	
E-mail	ATrebucq@iuatld.org
Web site (with information on course)	www.iuatld.org
1. Objectives of the course/material	
2. Target audience (requirements/selection criteria)	
3. Duration of the course	2 weeks
4. Brief content outline of the material/course	
5. Costs	
6. Where and when (frequency)	Cotonou, Benin, 18 August - 5 September 2003 (French)
Additional information	

Consultants meeting at IUATLD conference (IUATLD)

Title of material/course	Consultants meeting at IUATLD conference
Primary language	English
Organization(s)	IUATLD
Contact person	Arnaud Trébucq
Phone	
E-mail	Atrebucq@iuatld.org
Web site (with information on course)	www.iuatld.org
1. Objectives of the course/material	
2. Target audience (requirements/selection criteria)	
3. Duration of the course	
4. Brief content outline of the material/course	
5. Costs	
6. Where and when (frequency)	Yearly, at IUATLD conference
Additional information	

Research methods in lung health (IUATLD)

Title of material/course	Research methods in lung health
Primary language	
Organization(s)	
Contact person	Prof. Donald Enarson
Phone	
E-mail	Don@iuatld.org
Web site (with information on course)	www.iuatld.org
1. Objectives of the course/material	<ul style="list-style-type: none"> • To introduce participants to research methods to enhance tuberculosis control in the region; • To develop research protocols on selected topics of priority to tuberculosis programs; • To carry out the research in an international, collaborative manner in the region.
2. Target audience (requirements/selection criteria)	Researchers and program managers from Latin America.
3. Duration of the course	
4. Brief content outline of the material/course	<ul style="list-style-type: none"> • Participants will develop a research protocol on a topic of priority to the tuberculosis control program in their country. The protocol will be completed and presented to the other participants of the course for their critical review. • Practical skills that will be gained during the course include the ability to calculate sample size, elementary skills in managing and analyzing data and the ability to use the computer package, Epi-info.
5. Costs	
6. Where and when (frequency)	Two weeks and accommodates a maximum of 10 participants
Additional information	

Operations research course (IUATLD)

Title of material/course	Operations research course
Primary language	English
Organization(s)	IUATLD
Contact person	Hans L. Rieder, Tuberculosis Division
Phone	+41 31 829 4577
E-mail	TBRieder@tbrieder.org
Web site (with information on course)	Not publicized (cannot apply)
1. Objectives of the course/material	<ul style="list-style-type: none"> • The main objective of the course is to introduce a methodologically solid approach to relevant operations research within the context of a national tuberculosis program and to develop computer skills, analytic skills and the ability to formulate research findings. • To introduce participants into operations research with a particular emphasis on; • Formulating a research question and identifying a data source • Designing a questionnaire • Data collection and data quality assurance • Analyzing data • Writing a summary of findings
2. Target audience (requirements/selection criteria)	Tuberculosis control managers with responsibility at regional and national level, with an interest and a capacity to carry out operations research relevant to improved program performance, who have already a basis understanding of computer usage.
3. Duration of the course	Two weeks and accommodates a maximum of 10 participants
4. Brief content outline of the material/course	<ul style="list-style-type: none"> • Class room introductions and interactive learning • Efficient use of the Epi info family • Daily Journal club on research methodology • Development of basis analytic skills
5. Costs	
6. Where and when (frequency)	January, Paris, annually
Additional information	None – participants are selected

Program Advisory Group (KNCV Tuberculosis Foundation)

Title of material/course	Program Advisory Group (PAG)
Primary language	English
Organization(s)	KNCV Tuberculosis Foundation
Contact person	Jeroen van Gorkom
Phone	+31 70 416 72 32; +264-61-229916
E-mail	Vangorkomj@kncvtbc.nl gorkom@mweb.com.na
Web site (with information on course)	
1. Overall objective of the course/material	To develop, maintain and co-ordinate technical sound and consistent recommendations regarding tuberculosis program implementation in low and middle-income countries.
2. Target audience (requirements/selection criteria)	<ul style="list-style-type: none"> • KNCV Tuberculosis Foundation consultants • KIT tuberculosis consultants • Other international consultants who are directly or indirectly involved in KNCV Tuberculosis Foundation or KIT projects
3. Duration of the meeting	PAG meets 3 times a year at the KNCV Tuberculosis Foundation office in The Hague for 1 or 2 days.
4. Brief content outline of the material/course	<p>Learning objective: To maintain and enhance individual capabilities and competence towards TB control, through organizing regular meetings with the objective of:</p> <ul style="list-style-type: none"> • Exchanging problems identified during field visits and discuss their general relevance • Harmonizing technical advice on important TB control program issues • Developing generic protocols • Developing consensus guidelines • Producing high quality outputs (reports and/or publications) through peer review • Reviewing and commenting on draft international guidelines • Establishing and maintaining multidisciplinary networking with external partners
5. Costs	No costs
6. Where and when (frequency)	KNCV Tuberculosis Foundation, The Hague, Netherlands 22 September 2003, other data to be determined
Additional information	The secretariat of PAG is with the KNCV Tuberculosis Foundation. The director of the KNCV Tuberculosis Foundation appoints the secretary for PAG.

Regional Training in Tuberculosis Control Program Management, Warsaw (WHO/KNCV)

Title of material/course	Regional Training in Tuberculosis Control Program Management, Warsaw
Primary language	English/Russian
Organization(s)	WHO/KNCV
Contact person	Dr Richard Zaleskis (WHO EURO Copenhagen)
Phone	00 45 39 17 13 35
E-mail	RZA@who.dk
Web site (with information on course)	
1. Objectives of the course/material	To develop the managerial skills of already experienced tuberculosis control staff working at the central and intermediate levels of tuberculosis control programs
2. Target audience (requirements/selection criteria)	Senior Staff working in Tuberculosis Control in Central and Eastern Europe and Newly Independent States
3. Duration of the course	2 weeks
4. Brief content outline of the material/course	<p>Modules and topics:</p> <p>Tuberculosis: transmission and environmental control, diagnosis and the role of various techniques, and case management and prevention of drug resistant tuberculosis</p> <p>Tuberculosis management in groups at risk: contacts, prisoners, TB/HIV, others</p> <p>Epidemiology: Basics of Descriptive epidemiology, Risks of infection, disease and death</p> <p>Surveillance: Burden of disease, case definitions, data collection tools, analysis of casefinding, drug resistance and treatment outcome</p> <p>Tuberculosis control: Intervention strategies, DOTS strategy, DOTS and Health Sector Reform</p> <p>Management Principles: program planning, financial planning, stock management, human resources management; program implementation and evaluation</p> <p>Information, Education and Communication: health education for patients and the general public, social marketing and self education.</p> <p>Methods aim at maximal activity of participants through: introduction of the topic by the trainer, interactive problem driven working groups, discussion on results of working groups by the trainer</p> <p>Site visit to a DOTS area (Gdansk) and a prison (Sopot)</p> <p>Training material: reader with relevant articles, relevant WHO or IUATLD booklets instruction material of trainers (handouts)</p>

5. Costs	Per diem settled by WHO EURO - 180.- US\$ per each participants = 180\$ x 13 days + travel cost.
6. Where and when (frequency)	<i>Tuberculosis and Lung Diseases Research Institute -WHO CC - 26 Plocka str., 01-138, Warsaw, Poland</i> Every October in Warsaw Lodging in nearby IBIS hotel
Additional information	Training Director, Dr Jaap Veen (KNCV), e-mail: veenj@kncvtbc.nl

Regional Training in Tuberculosis Control Program Management, Almaty (HOPE/KNCV/WHO)

Title of material/course	Regional Training in Tuberculosis Control Program Management, Almaty
Primary language	Russian
Organization(s)	HOPE/KNCV/WHO
Contact person	Ms Deborah Elanani
Phone	00 73 272 686689
E-mail	Delanani@projecthope.kz
Web site (with information on course)	
1. Objectives of the course/material	To develop the managerial skills of already experienced tuberculosis control staff working at the central and intermediate levels of tuberculosis control programs.
2. Target audience (requirements/selection criteria)	Senior Staff working in Tuberculosis Control in Central and Eastern Europe and Newly Independent States
3. Duration of the course	2 weeks
4. Brief content outline of the material/course	<p>Modules and topics:</p> <ul style="list-style-type: none"> • Tuberculosis: transmission and environmental control, diagnosis and the role of various techniques, and case management and prevention of drug resistant tuberculosis • Tuberculosis management in groups at risk: contacts, prisoners, TB/HIV, others • Epidemiology: Basics of Descriptive epidemiology, Risks of infection, disease and death • Surveillance: Burden of disease, case definitions, data collection tools, analysis of casefinding, drug resistance and treatment outcome • Tuberculosis control: Intervention strategies, DOTS strategy, DOTS and Health Sector Reform • Management Principles: program planning, financial planning, stock management, human resources management; program implementation and evaluation • Information, Education and Communication: health education for patients and the general public, social marketing and self-education. <p>Methods</p> <ul style="list-style-type: none"> • aim at maximal activity of participants through: • introduction of the topic by the trainer • interactive problem driven working groups • discussion on results of working groups by the trainer <p>Site visit National TB Centre, Almaty Central Reference Laboratory, Almaty</p>

	Training material Reader with relevant articles, relevant WHO or IUATLD booklets, instruction material of trainers (handouts)
5. Costs	??
6. Where and when (frequency)	<i>HOPE/KNCV/WHO Almaty Regional Training in Tuberculosis Control Programme Management; (Almaty/Kazakhstan)</i> <ul style="list-style-type: none"> • Every April in Almaty • Lodging and training in Karolyetski Sanatorium
Additional information	Training Director, Dr Jaap Veen (KNCV), e-mail: veenj@kncvtbc.nl

Denver TB Course (National Jewish Medical and Research Center)

Title of material/course	Denver TB Course
Primary language	English
Organization(s)	National Jewish Medical and Research Center
Contact person	Catheryne Queen
Phone	303-398-1700
E-mail	Queenc@njc.org
Web site (with information on course)	Nationaljewish.org/tbreg.html
1. Objectives of the course/material	The purpose of this course is to present this body of knowledge to those who will be responsible for the management and care of tuberculosis.
2. Target audience (requirements/selection criteria)	General internists, public health workers, chest specialists, registered nurses and other healthcare providers
3. Duration of the course	1 week
4. Brief content outline of the material/course	<ul style="list-style-type: none"> • Transmission and pathogenesis of adult and pediatric tuberculosis including extrapulmonary lesions and disease with atypical mycobacteria. • Classification of tuberculosis • Chemotherapy of tuberculosis including previously untreated cases, retreatment of drug-resistant cases, and disease due to the atypical mycobacteria. • Management of toxicity and hypersensitivity reactions to all of the antituberculosis drugs. • Measures for insuring uninterrupted drug ingestion by outpatients.
5. Costs	Tuition: \$700.00 Fellows/Residents: \$375.00
6. Where and when (frequency)	National Jewish Medical and Research Center 1400 Jackson Street, Denver, Colorado 80206, United States October 20-24, 2003
Additional information	

Drug Procurement for Tuberculosis Course (RPM Plus)

Title of material/course	Drug Procurement for Tuberculosis Course (RPM Plus; has been conducted in Africa (twice), in Vietnam, Romania, and Uzbekistan)
Primary language	English; materials also exist in Russian and Romanian
Organization(s)	RPM Plus (primary) in collaboration with PATH and KNCV
Contact person	Andrey Zagorskiy
Phone	703-248-1622
E-mail	azagorskiy@msh.org
Web site (with information on course)	RPM Plus TB drug management Web site is under construction (due in FY02)
1. Objectives of the course/material	Train MOH procurement officers in techniques for obtaining high-quality TB drugs at competitive prices
2. Target audience (requirements/selection criteria)	MOH procurement officers/agencies, donors
3. Duration of the course	5 days
4. Brief content outline of the material/course	<p>Modules:</p> <ol style="list-style-type: none"> 1. Introduction 2. Procurement Strategies 3. Quantifying Drugs and Supplies Requirements 4. Supplier Selection 5. Quality Assurance 6. Managing the Tender Process 7. Principles of Contracting 8. Monitoring and Evaluating Supplier Performance <p>Annexes:</p> <p>Annex 1: <i>Standard Bidding Documents for Procuring Tuberculosis Drugs</i>. Management Sciences for Health, Boston: May 2000.</p> <p>Annex 2: <i>Example of Technical Bidding Document: Technical Bid Document for Kenya Procurement</i>, Royal Netherlands Tuberculosis Association (KNCV)</p> <p>Annex 4: <i>Assuring Bioavailability of Fixed-dose Combinations of Anti-Tuberculosis Medications</i>, pp S282-S283, and <i>Requirement for Anti-Tuberculosis Drug Tender Requests</i>, pp S349-S361, The International Journal of Tuberculosis and Lung Disease, Vol. 3, Number 11, Supplement 3, Paris: 1999.</p> <p>Annex 5: <i>Guidelines for Drug Donations</i>. WHO, Geneva: 1999.</p> <p>Annex 6: <i>Managing Drug Supplies</i>, 2nd rev. Management Sciences for Health, Boston: 1997, Selected Chapters</p>
5. Costs	
6. Where and when (frequency)	Not planned for 2003; it is being revised to be expanded into a TB Drug Management Course
Additional information	

TB Drug Management Course, with a TOT Module (RPM Plus)

Title of material/course	TB Drug Management Course, with a TOT Module (RPM Plus) – under development; due FY02
Primary language	English
Organization(s)	RPM Plus (primary) in collaboration with PATH and KNCV
Contact person	Andrey Zagorskiy
Phone	703-248-1622
E-mail	azagorskiy@msh.org
Web site (with information on course)	RPM Plus TB drug management Web site is under construction (due in FY02).
1. Objectives of the course/material	Develop capacity in ensuring uninterrupted supply of high-quality TB drugs for DOTS programs, training-of-trainers.
2. Target audience (requirements/selection criteria)	MOH procurement officers/agencies, donors
3. Duration of the course	5 days
4. Brief content outline of the material/course	<p>Modules:</p> <ol style="list-style-type: none"> 1. Introduction 2. Management of drug supply programs 3. Procurement Strategies 4. Quantifying Drugs and Supplies Requirements 5. Supplier Selection and Tender Process 6. Principles of Contracting 7. Inventory management 8. DMIS 9. Quality Assurance 10. Monitoring and Evaluation of Supply Programs
5. Costs	
6. Where and when (frequency)	Planned for fall 2003 as TOT in Africa or Asia.
Additional information	RPM Plus also conducts ad hoc courses in TB drug management when required by regional and country programs. Those courses are tailored to specific countries and regions. For example, the upcoming course in TB drug management in Kyrgyzstan focused on overall system management; in Uzbekistan, with the emphasis on TB drug policy and quality (both in February); a course on management of second-line TB drugs for the GLC DOTS Plus pilots in Russia, Uzbekistan, and the Baltics (tentatively in June); a regional TB drug management course in LAC is also planned for this year.

Regional workshop for tuberculosis training focal points (Task Force Training)

Title of material/course	Regional workshop for tuberculosis training focal points
Primary language	English
Organization(s)	Task Force Training, TBCTA
Contact person	Inge Pool
Phone	+31 70 416 72 22
E-mail	Pooli@kncvtbc.nl
Web site (with information on course)	
1. Objectives of the course/material	Workshop to determine training needs resources, and barriers to DOTS implementation in HBCs; also includes workshop to enhance skills in needs assessment and human resource development. By the end of the workshop participants have:
2. Target audience (requirements/selection criteria)	TB trainer focal points from High Burden Countries (HBC's), USAID mission persons, consultants working in the selected countries.
3. Duration of the course	5 days workshop
4. Brief content outline of the material/course	<p>After short country presentations the TB training focal points, USAID mission persons and consultant review the human resource development (HRD) situation in the concerning country. This is done in 5 sessions:</p> <p>The workshop is structured into 5 sessions:</p> <ul style="list-style-type: none"> • Review of the organizational structure and overall direction of human resource development for TB control within the NTP. • Review of current HRD activities for TB control. • Review of management and use of information for human resource development for TB control. • Review of activities to strengthen the teaching of TB control in basic training of doctors, nurses, laboratory technicians and other categories involved in TB control. • Review of management of implementation, monitoring and evaluation of human resource development activities for TB control. <p>Each session has four parts:</p> <ol style="list-style-type: none"> 1. A short introduction to the session. 2. A group work to do the initial review. 3. A plenary session where tools, techniques and documents will be presented and discussed. 4. A group work to discuss potential activities to be implemented based on the initial review and tools presented. <p>On the last day of the workshop participants present a short country/state plan. This plan outlines the main problems and the</p>

	activities regarding HRD for TB control for the next year
5. Costs	
6. Where and when (frequency)	Workshop for Asian countries will be held in Bangkok, 15-20 September 2003
Additional information	

Training for (European) TB consultants in Sondalo, Italy (WHO)

Title of material/course	WHO Training for TB consultants in Sondalo, Italy
Primary language	English
Organization(s)	WHO Collaborating Centre for Tuberculosis and Lung Diseases, S Maugeri Foundation , Tradate with financial contribution from WHO Euro in Copenhagen
Contact person	GB Migliori, R Centis
Phone	+39 0331 829 404
E-mail	gbmigliori@fsm.it ; rcentis@fsm.it
Web site (with information on course)	Still in construction.
1. Objectives of the course/material	To develop the skills of TB experts: to work as consultants at national and intermediate levels of TB control programs in Central and Eastern Europe and in the countries of the former USSR / Background material, handouts with exercises, most relevant background papers.
2. Target audience (requirements/selection criteria)	NTP managers or high level NTP staff: contacts: Regional WHO Offices, Director of International TB management courses, WHO staff. Staff or consultants of major international organizations: contacts: Directors of organizations.
3. Duration of the course	1 week
4. Brief content outline of the material/course	The training is interactive and exercise based. Emphasis is on improving skills and attitude. Exercises are based on data from a fictitious country. A map of the country, its infrastructure, epidemiological and financial data are provided at the beginning of the course. Trainees work on the exercises individually or in groups of different magnitude. In game plays the roles of consultants is highlighted. Faculty is chosen from highly experienced consultants, with experience in central and eastern Europe. The training ends with the production of a country report by each of the trainee-consultants. The training is formally evaluated by the participants and the faculty. The country report is judged by the training supervisors for the level of skills achieved.
5. Costs	€1000
6. Where and when (frequency)	Sondalo (Italy), Date??
Additional information	

Training for (international) TB consultants in Sondalo, Italy (WHO)

Title of material/course	WHO Training for TB consultants in Sondalo, Italy
Primary language	English
Organization(s)	The training is co-organized with the WHO collaborating centre for tuberculosis and lung diseases, S. Maugeri Foundation The training takes place at the Morelli Hospital in Sondalo, Italy, the national reference hospital for MDR and severe TB cases.
Contact person	Karin Bergstrom
Phone	
E-mail	Bergstromk@who.ch
Web site (with information on course)	
1. Objectives of the course/material	The objective of the course is to develop the necessary skills of potential TB consultants to plan, implement and evaluate a TB control program, based on the WHO recommended TB control strategy, DOTS.
2. Target audience (requirements/selection criteria)	People with technical knowledge of TB who have been identified as potential consultants (15 participants)
3. Duration of the course	2 weeks
4. Brief content outline of the material/course	<p>The training is centered around Fictitia, a fictitious country in which all consultancy activities take place. The training is interactive and exercise based. Emphasis is on improving skills and attitude. Exercises are based on data from Fictitia. A map of the country, its infrastructure, epidemiological and financial data are provided at the beginning of the course. Trainees work on the exercises individually or in groups of different magnitude. In game plays the roles of consultants is highlighted. Faculty is chosen from highly experienced consultants, with experience in countries from different settings.</p> <p>The training is a mixture of presentations, exercises, workshops, site visits and game plays. In addition structure, functions, organization of WHO (HQ, Regional and Country Offices) and other Stop TB partners will be presented and discussed with participants.</p> <p>Background material on Fictitia Country will be made available to the individual trainees. Handouts with exercises are given at the appropriate moments during the training. A Reader with the most relevant background papers will be made available.</p> <p>The topics covered by the course include:</p> <ul style="list-style-type: none"> • Planning and coordination of the mission • Review data on the key components of NTP: planning and management; surveillance/TOM; laboratory; drugs; human resources; community mobilisation; advocacy; budgeting/financing; partnership; operational research • Analyse and synthesize the main findings, identify priorities,

	<p>propose solutions and develop recommendations</p> <ul style="list-style-type: none"> • Write a report including key information and recommendations relevant for present or future activities according to the contracting agency needs and the kind of mission • Debrief local staff and partners on the main mission's findings and recommendations • Submit the report to the contracting agency for finalisation and planning of further actions/steps
5. Costs	?
6. Where and when (frequency)	Sondalo (Italy), November 2003
Additional information	

Regional Training Course on TB control (SEARO)

Title of material/course	Regional Training Course on TB control SEARO
Primary language	
Organization(s)	WHO South-east Asia Regional office
Contact person	Dr. J. Narain
Phone	
E-mail	
Web site (with information on course)	
1. Objectives of the course/material	The objective of this training course is to develop the training and managerial skills of TB control managers and trainers working at the national and intermediate levels of TB control programmes, in government and NGO sectors, primarily from the South East Asia Region.
2. Target audience (requirements/selection criteria)	
3. Duration of the course	
4. Brief content outline of the material/course	The topics covered will include epidemiology, laboratory diagnosis including basics of anti-tubercular drug resistance, monitoring and management aspects of TB control. The learning methods will consist of problem-solving exercises based on case studies and strategy games, groups discussions, presentations by participants, lectures, field visits.
5. Costs	
6. Where and when (frequency)	1-15 February 2004
Additional information	

Annual International Public Health Summer Institute

Title of material/course	Annual International Public Health Summer Institute
Primary language	Taught in English with simultaneous translation into Russian. <i>(Plans are underway for simultaneous translation into Chinese in 2004)</i>
Organization(s)	John J. Sparkman Center for International Public Health Education and the Gorgas Tuberculosis Initiative, University of Alabama at Birmingham
Contact person	Madhav Bhatta
Phone	Tel: 205-975-7626 Fax: 205-975-7685
E-mail	bhatta@uab.edu
Web site (with information on course)	http://www.uab.edu/sparkmancenter
1. Objectives of the course/material	<ul style="list-style-type: none"> ▪ Enhance participant's understanding of the fundamentals of public health practice. ▪ Develop participant's understanding of modern principles of public health management and leadership, as well as the appropriate use of each. ▪ Expand participant's knowledge of modern research methods. ▪ Enhance participant's knowledge of principles of epidemiology and modern control of tuberculosis, sexually transmitted infections, HIV/AIDS, and chronic diseases. ▪ Develop knowledge and skills for creative problem solving.
2. Target audience (requirements/selection criteria)	Mid-level or senior health professionals whose ability to impact their country's public health policies is substantial, but whose opportunities for upgrading skills is limited by either language or time constraints. The target audience for this course includes but is not limited to: physicians, health care administrators, Ministry of Health personnel, tuberculosis control managers with responsibility at the regional or national level, healthcare providers from the Ministry of Security, and academicians.
3. Duration of the course	5 weeks
4. Brief content outline of the material/course	<p>The course is divided into 4 modules</p> <p><u>Module I: Modern Principles of Public Health Leadership and Management</u></p> <ul style="list-style-type: none"> ▪ This module provides public health leaders from developing countries an introduction to managerial principles and approaches required under privatization and decentralization of health care systems. <p><u>Module II: Principles of Modern Public Health Research</u></p> <ul style="list-style-type: none"> ▪ This module reviews basic epidemiologic research methods and application of Epi Info 2000 software in data management and analysis. The topics presented include: (a) descriptive epidemiology, (b) measures of disease occurrence, (c) overview

	<p>of epidemiologic study designs, (d) measures of effect, (e) analysis of disease outbreak, and (f) disease surveillance. Practical laboratory exercises in the use of Epi Info 2000 are conducted to familiarize participants with the software.</p> <p><u>Module III: Management and Control of HIV/AIDS and Other Sexually Transmitted Infections</u></p> <ul style="list-style-type: none"> ▪ This module includes interactive discussions related to the epidemiology, pathogenesis, clinical and laboratory diagnosis, and treatment of all major sexually transmitted infections including HIV/AIDS and sexually transmitted hepatitis. <p><u>Module IV: Principles and Practice of the Control of Tuberculosis</u></p> <ul style="list-style-type: none"> ▪ This module systematically progresses from the epidemiology of tuberculosis to the scientific principles of modern tuberculosis control and their relationship to the current DOTS strategy of the World Health Organization (special attention is given to the topic of TB control within prisons), to the diagnosis and treatment of tuberculosis, including latent TB infection, MDR-TB, and TB-HIV, to program management, contact investigation, and the role of research. The final days of this module are dedicated to future perspectives on TB control, presentation of case studies from three different settings, and site visits to the state health lab and a local health department to demonstrate the application of previously-taught principles.
5. Costs	<p>The participants need to obtain funding for the following: Course tuition fees (US\$ 4,500); Travel ticket; Accommodation (approximately US\$ 1,500 for the 5 week course); Cash for meals (approximately US\$ 1,000 for the 5 week course); Health Insurance (US\$ 200) and incidental expenses (approximately US\$ 200).</p>
6. Where and when (frequency)	<p>Birmingham, Alabama; Ryals School of Public Health Course is held annually from the 2nd week of July to the first week of August</p>
Additional information	<p>The course is taught by a multidisciplinary faculty from the University of Alabama (UAB) Schools of Public Health, Medicine, Health Related Professions, UAB Hospital, The Jefferson County Department of Health, and the Alabama Department of Health</p> <p>Past attendees of this course have come from: Ukraine, Georgia, Russia, China, Kazakhstan, Pakistan, Mongolia, India, Bangladesh, Zambia, Honduras, and Ecuador.</p>