Infectious Disease Detection and Surveillance (IDDS) Quarterly Report FY22 Q1: Annex A: Activity Implementation Progress

Annex A includes information about activities that were in progress or completed during quarter I (QI) as well as fiscal year (FY) 2022 activities that have not started.

Global Health Security Activity Implementation Progress

Cameroon GHS			
Activity	IHR benchmark	Status	Activity implementation updates
CMR-GHS-NTW-I: Strengthen the	Benchmark 7.3	In progress	IDDS recruited a senior antimicrobial resistance (AMR) diagnostic
capacity of the IDDS-supported			consultant who will continue to provide technical and mentorship
surveillance sites to detect priority			support to the AMR pilot surveillance sites to implement national AMR
pathogens and antimicrobial resistance			standard operating procedures and who will reinforce skills and
(AMR) in both human health and animal			competencies on quality assurance for organism identification and
health diagnostic facilities.			antimicrobial susceptibility testing.
NTW-1.1: Provide technical	1	In progress	IDDS's work in FY 2022 Q2 will include (I) organizing site trainings to
assistance, training, and mentorship			reinforce capacity on AMR detection, (2) providing maintenance contracts
to IDDS-supported sites (5 human			for bacteriology equipment, and (3) procuring basic AMR reagents and
and 2 animal sites) to implement			equipment for the IDDS-supported sites.
national AMR standard operating			
procedures (SOPs) and to re-			
enforce skills and competencies on			
quality assurance and biosafety and			
biosecurity for organism			
identification and antimicrobial			
susceptibility testing.			
NTW-1.2: Support the printing and		In progress	
dissemination of the AMR detection			
and surveillance SOPs developed.			
NTW-1.3: Provide maintenance		In progress	
contracts for bacteriology			
equipment in the IDDS-supported			
sites.			
NTW-1.4: Procure basic AMR		Not started	
reagents and equipment for the			
human and animal sentinel			
surveillance sites.]		
NTW-1.5: Support the National		Not started	
Public Health Laboratory (LNSP) to			
develop a national AMR external			
quality assessment (EQA) plan to			

Cameroon GHS			
Activity	IHR benchmark	Status	Activity implementation updates
improve AMR detection in health	IIII benemia k	Jeacus	Activity implementation appares
facilities.			
CMR-GHS-SURV-I: Strengthen AMR	Benchmark 3.2	In progress	World Antimicrobial Awareness Week 2021 was celebrated from
surveillance through capacity building			November 18 to 24, with the theme "Spread Awareness, Stop Resistance,"
to analyze, interpret, and report AMR	Benchmark 9.2		and called on experts and sectors contributing to a One Health approach to
surveillance data and develop national			come together to combat AMR. As part of World Antimicrobial Awareness
strategic plans.			Week, IDDS provided financial and technical support to organize the first
SURV-1.1: Provide technical		Not started	International Microbiology Days conference, held from November 25 to 26,
assistance, training, and mentorship			at the Falaise Hotel in Yaoundé. Organized by the Cameroon Society of
on AMR data management and			Microbiology, the conference was titled "Antimicrobial Resistance: The
analysis to the IDDS surveillance			Next Pandemic?" This conference convened more than 500 microbiologists,
sites and the National Coordination			clinicians, epidemiologists, and postgraduate students in human, animal, and
Center.			environment health. The conference provided useful information to
SURV-1.2: Conduct quarterly AMR		In progress	stakeholders and governmental bodies on measures that involve working
surveillance stakeholders review			together in a One Health framework to increase awareness of AMR,
meetings to review progress with			strengthen knowledge of and capacity for AMR surveillance and detection,
AMR surveillance and data quality.			and encourage the implementation of the national guidelines for greater
SURV-1.3: Provide technical		In progress	impact in curbing AMR. At the conference, IDDS showcased its
assistance to the National			contributions in building a sustainable One Health AMR surveillance system
Coordination Center to develop			in Cameroon using a World Health Organization Benchmark step-by-step
semiannual national AMR			approach. Dr. Mouiche Moctar, the IDDS Cameroon team lead, presented
bulletins and policy briefs based on			on IDDS activities in AMR detection and surveillance in a special session.
surveillance data.			IDDS also hosted a booth during the two-day event that gave participants
SURV-1.4: Provide technical		Not started	the opportunity to obtain more information about the IDDS project and
support to the National			discuss opportunities for future collaboration.
Coordination Center to report			IDDS provided technical and logistical support to the National Public Health
National AMR data to Global			Laboratory to organize the quarterly AMR data quality review workshop,
Antimicrobial Resistance			including six human sentinel surveillance sites (Douala Laquintinie Hospital,
Surveillance System (GLASS).			Limbe Regional Hospital, Centre Hospitalier Essos, Yaoundé General
SURV-1.5: Provide technical		Completed	Hospital, Yaoundé Military Hospital, and University Teaching Hospital
assistance to organize the First			of Yaoundé) and two animal sentinel surveillance sites (National Veterinary
Cameroon Microbiological Days			5. 1252.125/ and the annual sentance sales (reacting recentling)

Cameroon GHS			
Activity	IHR benchmark	Status	Activity implementation updates
during the 2021 World Antimicrobial Awareness Week and showcase IDDS surveillance activities during this event. SURV-1.6: Provide technical assistance to the AMR technical secretariat to develop the AMR strategic plan (2022-2027) to fight against AMR in collaboration with other USAID GHS partners (Medicines, Technologies, and Pharmaceutical Services [MTaPS], Food and Agriculture Organization		In progress	Laboratory: Yaoundé and Garoua). The workshop took place from December 16 to 17 in Dschang and included 19 laboratory managers and technicians (6 men and 13 women). With IDDS support, laboratory staff reviewed the AMR January–November 2021 data collected using WHONET software and reviewed the data from each IDDS-supported sentinel surveillance site for timeliness, consistency, and completeness according to the National AMR Surveillance Guidelines. During this workshop, the AMR surveillance team also discussed the template and timeline for the first annual report of AMR surveillance (January–December 2021). In FY 2022 Q2, IDDS will provide technical and financial support for a National Public Health Laboratory working group to develop the draft of the AMR surveillance report, including 2021 AMR surveillance data from all the surveillance sites.
[FAO]).			On October 15, IDDS convened a meeting with two USAID GHS partners (the Medicines, Technologies, and Pharmaceutical Services program and the Food and Agriculture Organization of the United Nations) to coordinate activities planned within the framework of AMR control in FY 2022 and to harmonize efforts for greater impact. In FY 2022 Q2, IDDS and the Medicines, Technologies, and Pharmaceutical Services program will work with the National Public Health Laboratory to develop an implementation plan to support the revision of the outdated (2018–2020) AMR National Action Plan and the development of the new AMR National Action Plan (2022–2025).

Democratic Republic of Congo (DRC) GHS				
Activity	IHR benchmark	Status	Activity implementation updates	
DRC-GHSA-NTW-I: Operationalize	Benchmark 7.3	In progress	IDDS actively followed up with the Directorate of Laboratory Services	
the national laboratory policy and			(DLS) to get the missing signature of the Minister of Health (MoH) on the	
strategic plan in Eastern DRC			National Laboratory Policy and Strategic Plan 2021-2025.	
DRC-GHS-NTW-1.1: Support the		In progress	IDDS is planning to print and disseminate 500 copies of the final version of	
dissemination of the MoH			the laboratory strategic documents in the IDDS-supported Eastern	
laboratory policy and strategic plan			provinces during FY 2022 Q2.	
in the Eastern DRC			IDDS provided technical assistance to the MoH through the DLS to develop and validate additional training materials based on the adapted Laboratory	
DRC-GHS-NTW-1.2: Build capacity in the North Kivu and surrounding provinces in the Eastern DRC on equipment maintenance		Completed	Equipment Maintenance Manual, including training modules, a trainer's guide, standard operating procedures, and job aids. The validation workshop was held in Goma from November 22 to 26. Participants were from the MoH/DLS, the Nord Kivu Provincial Health Division, the <i>Institut National de Recherche Biomédicale</i> (National Institute for Biomedical Research) Goma, the MoH/Directorate of Continued Education, and the AMI-Labo Goma. IDDS provided technical and financial support to organize three orientation sessions on equipment and laboratory maintenance for 93 (including 16 women) laboratory workers in Goma (November 29–December 3), Bukavu (December 7–11) and Kindu (December 16–20). In FY 2022 Q2, IDDS will finalize the orientation sessions report and submit it to USAID as a technical deliverable.	
DRC-GHS-NTW-2: Support the	Benchmark 7.3	In progress	IDDS finalized and submitted the laboratory mapping report and the sample	
establishment of a regional public			transportation and referral assessment report with recommendations as	
health network in the Eastern DRC			key deliverables to USAID.	
DRC-GHS-NTW-2.1: Assess and		Completed	IDDS also drafted the costed operational plan for the Development of the	
map the existing sample			Rodolph Merieux Laboratory and the Public Health Laboratory Network in	
management (collection, storage,			the Eastern region (2022–2025). It is currently being reviewed and will be	
transport) and referral systems in			finalized in FY 2022 Q2.	
the Eastern region to identify			The development of the financial sustainability framework is scheduled for	
potential synergies			FY 2022 Q2.	

Democratic Republic of Congo (DR			
Activity	IHR benchmark	Status	Activity implementation updates
DRC-GHS-NTW-2.2: Support the		Completed	
development of an operational plan			
for the Eastern regional public			
health laboratory network and			
operationalize the plan			
DRC-GHS-NTW-2.3: Cost the		In progress	
operational plan and develop a			
financial sustainability framework for			
the Eastern region public health			
laboratory network			
DRC-GHS-NTW-2.4: Support		Not started	
Planwise training by ASLM for four			
staff: two laboratory mapping focal			
points from government [one from			
Directorate of Laboratory Services			
(DLS) and one from Division			
Provincial de la Santé (DPS)] and			
two from IDDS staff (SDS and DS			
or PA)			
DRC-GHS-NTW-2.5: Organize a		Not started	
technical workshop for platform			
checklist update: materials,			
equipment, and laboratory inputs			
for each level of laboratory in the			
DRC health pyramid to help			
equipment procurement (with a			
focus on detection and surveillance)			
to support full operation of			
provincial labs in the Eastern region			

Democratic Republic of Congo (DRC) GHS				
Activity	IHR benchmark	Status	Activity implementation updates	
DRC-GHS-NTW-2.6: Develop advocacy roadmap with key stakeholders (DRC government officials, international donors) to mobilize domestic and external resources to sustain operations of the Eastern region diagnostic network		Not started		
DRC-GHS-NTW-3: Enhance priority pathogen detection capacity for epidemic prone diseases	Benchmark 7.2	In progress	Based on the three manuals developed and validated in FY 2021, IDDS will develop training modules and a trainer's guide to be consistent with the MoH requirements for training. In FY 2022 Q2, IDDS will organize a	
DRC-GHS-NTW-3.1: Support the Directorate of Epidemiologic Services (DSE) to update the outbreak action plan to align with the National Laboratory Strategic Plan (NLSP) and to define resource requirements		In progress	training of trainers for biotechnology technicians with the training materials and disseminate them in IDDS-supported Eastern provinces. In FY 2022 Q2, IDDS will work with the MoH/DLS and the Directorate of Epidemiologic Services to establish a multisectoral technical working group, develop terms of reference for the decentralization of microbiology detection of epidemic-prone disease pathogens, and validate the scope of work for the consultant who will be hired to update the outbreak action	
DRC-GHS-NTW-3.2: Provide technical assistance to the Directorate of Laboratory Services (DLS) to create training materials and job aids for laboratory biosafety officers to train laboratory technicians, non-technician personnel involved in specimen handling and storage, and local transportation vendors in safe specimen handling techniques		In progress	plan to align with the National Laboratory Strategic Plan 2021–2025. IDDS will also conduct a workshop to validate the updated outbreak action plan, in collaboration with Directorate of Epidemiologic Services and DLS. In FY 2022 Q2, IDDS, in collaboration with DLS and other partners, will hold discussions with stakeholders on ways to incorporate local airlines (Compagnie Aérienne Africaine, Congo Airways, KinAvia, UNHAS, ASF, and MAF) into the specimen transportation system. IDDS will appoint a consultant to conduct a situational assessment of the specimen referral system and transport for the IDDS-supported Eastern provinces to develop an implementation plan that will be piloted in collaboration with local airlines.	

Democratic Republic of Congo (DR			
Activity	IHR benchmark	Status	Activity implementation updates
DRC-GHS-NTW-3.3: Support of		In progress	IDDS will then collaborate with the technical working group on the
outbreaks response in the DRC			specimen referral and transport system in the Eastern region and specime
DRC-GHS-NTW-3.4: Provide		Not started	transport partners to validate the findings and implement the
financial resources as needed for the			recommendations.
detection of a priority pathogen			
investigation based on pre-defined			
criteria			
DRC-GHS-NTW-3.5: Explore how		In progress	
to incorporate local airlines			
(Compagnie Aerienne Africaine,			
Congo Airways, Kinavia, UNHAS,			
ASF, and MAF) into the specimen			
transportation system			
DRC-GHS-NTW-3.6: Support the		Not started	
DSE in the organization of the			
training of trainers in Integrated			
Disease Surveillance and Response			
(IDSR) for the provincial			
management team in the province of			
Maniema and South Kivu			
DRC-GHS-NTW-4: Support the		Not started	
development of a quality assurance and			
biosafety / biosecurity program for			
health laboratories in Eastern Region of			
DRC			
DRC-GHS-NTW-4.1: Develop		Not started	
documents for quality assurance and			
biosafety / biosecurity measures for			
the national laboratory network			

Democratic Republic of Congo (DR	C) GHS		
Activity	IHR benchmark	Status	Activity implementation updates
DRC-GHS-NTW-4.2: Support a	II IN Delicilliar	Not started	Activity implementation updates
workshop to validate quality		1 toe started	
assurance and biosafety / biosecurity			
measures documents for the national			
laboratory network			
DRC-GHS-NTW-4.3: Support the		Not started	
printing and dissemination of the			
quality assurance and biosafety /			
biosecurity measures documents in			
the laboratory network in one of the			
supported Eastern DRC provinces			
ORC-GHS-NTW-5: Strengthen the		Not started	
capacity of the INRB Laboratory in			
Goma and the provincial laboratory			
network to detect priority pathogens in			
the Eastern DRC region			
DRC-GHS-NTW-5.1: Develop		Not started	
standard operating procedures			
(SOPs) and training materials that			
can be used for the diagnosis of			
priority zoonoses in the region			
DRC-GHS-NTW-5.2: Support		Not started	
capacity building (training,			
mentorship) of public health			
laboratory staff in Eastern DRC			
provinces (Nord Kivu, Sud Kivu, and			
Maniema) on bacteriology testing			
and diagnostics of priority zoonoses so as to take on testing of more			
pathogens			
paulogelis			

Guinea GHS			
Activity	IHR benchmark	Status	Activity implementation updates
GIN-GHS-NTW-I: Consolidate the	Benchmark 3.2	In progress	IDDS worked with the Institut National de la Santé Publique (National
capacity of existing human and animal			Institute of Public Health) to develop a data management system for
health diagnostic facilities for the			antimicrobial resistance (AMR) using Kobo Collect. The system includes a
detection of priority antimicrobial			tool for the regional laboratories to report AMR data to the national level
resistant (AMR) pathogens and enroll			and a centralized data system for the National Health Laboratory to
three additional AMR surveillance sites			monitor AMR data and eventually report Guinea AMR data into the Global
to improving reporting structure for			Antimicrobial Resistance and Use Surveillance System. In FY 2022
surveillance of AMR pathogens			Q2 IDDS will conduct trainings on the use of the new data management
NTW-1.1: Provide technical		In progress	system.
assistance to the National Institute			IDDS initiated procurement of reagents and supplies for the Institut National
of Public Health (Institut National de			de la Santé Publique to support the second round of external quality
la Santé, INSP) to develop a			assessment for the AMR surveillance network, planned for March 2022.
centralized AMR data management			
system for future reporting into			
GLASS			
NTW-1.2: Continue to provide		In progress	
technical support to the INSP and			
to IDDS-supported regional			
laboratories for proficiency training,			
quality management system			
improvement, and management of			
microbiology data and			
Antimicrobial Susceptibility Testing			
(AST)			
GIN-GHS-NTW-3: Consolidate and	Benchmark 7.2	In progress	The national specimen referral and transport pilot started in December in
finalize the IDDS pilot integrated			three IDDS-supported regions: Faranah, Kindia, and Mamou. The pilot will
national specimen referral and			operate through February 2022 and will assess the feasibility and cost of
transport system			transporting specimens from prefecture laboratories to reference
NTW-3.1: Develop a costed report			laboratories for bacteriology testing. IDDS provided training to health care
and recommendations for the			workers and drivers on specimen packaging and transport and on the use o
national specimen referral and			monitoring tools (i.e., specimen referral application, thermometers, and
transport pilot conducted at the			Global Positioning System devices). IDDS provided an onsite supportive
three regional laboratories			visit during the launch of the pilot phase in the three regions.

Guinea GHS			
Activity	IHR benchmark	Status	Activity implementation updates
			In FY 2022 Q2, IDDS will monitor the three IDDS sites on quality
			assurance and antimicrobial susceptibility testing.

Integrated Disease Surveillance and Reporting (IDSR) GHS					
Activity	Status	Activity implementation updates			
IDSR-Senegal IDSR-I: Provide technical and operational support for rollout of updated IDSR guidelines in St. Louis and Tambacounda Regions in Senegal	Completed	IDDS Senegal supported the district-level training of nurses in three districts of the Tambacounda region: Koumpentoum, Maka Colibantang, and Tambacounda. Ten districts remain for the third edition IDSR training.			
IDSR-Cameroon IDSR-2: Provide technical and operational assistance to national adaptation of the IDSR guidelines in Cameroon	Completed in FY 2021 Q4	Activities in Cameroon were completed in FY21. In FY22 Q1, IDDS prepared an implementation report for this activity.			

Indonesia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
IDN-GHS-NTW-1: Support the One Health Laboratory Network (OHLN) Sub-Working Group (SWG)	Benchmark 4.1 and 7.1	In progress	On October I, IDDS held an online meeting with six participants from the Ministry of Health (MoH) Center for Health Resource Training and the Eijkman Institute to finalize the training curriculum for the PREDICT
NTW-1.1: Support and facilitate regular OHLN SWG meetings	Benchmark 4.1	Not started	Protocol Laboratory Training. The follow-up action from the meeting was to refine the curriculum document and register the curriculum on the
NTW-1.3: Provide technical assistance (TA) for the development of outputs from the OHLN	Benchmark 7.1	Not started	
NTW-1.4: Support and facilitate Predict Laboratory Protocol training	Benchmark 4.1 and 7.1	In progress	
IDN-GHS-SURV-1: Integrate Laboratory and Surveillance Systems and Revitalize 4-Way Linking (4WL)	Benchmark 4.1	In progress	IDDS, in collaboration with the Surveillance and Health Quarantine Directorate of MoH, conducted the third online focus group discussion (FGD) on October 8 to develop the 4-Way Linking (4WL) Guidelines. A
SURV-1.3: Develop 4-Way Linking Guideline revitalization review document based on the workshop result with GOI stakeholders	Benchmark 4.1	Not started	total of 60 participants attended the meeting, including representatives from Kemenko PMK, the MoH, the Ministry of Agriculture (MoA), the Ministry of Environment and Fisheries (MoEF), the Ministry of Home Affairs, the Cabinet Secretary, the Agency for National Development and Plan, the
SURV-1.5: Develop/revise 4WL document to revitalize 4WL implementation for various diseases	Benchmark 4.1	In progress	Investigation Center (BBVet), provincial health office representatives, the Center for Natural Resource Conservation (BKSDA), the Indonesian
SURV-1.7: Implementation Pilot of Revitalized 4WL document for various diseases at the cross- sectoral levels	Benchmark 4.1	Not started	

Activity	IHR benchmark	Status	Activity implementation updates
			previous FGD. IDDS will facilitate the formalization of this document in FY 2022 Q2. The pilot implementation of the Revitalized 4WL Guidelines requires agreement from all ministries. A discussion will be held in early 2022 after the 4WL Guidelines are formalized. The pilot implementation will take place in FY 2022 Q3.
IDN-GHS-SURV-2: Advance National Surveillance Integration in Indonesia	Benchmark 4.1	In progress	On December 2, IDDS facilitated a meeting to coordinate the reporting format of <i>Instruksi Presiden</i> (Presidential Instruction No.4/2019)
SURV-2.1: Support and facilitate regular Integrated Surveillance SWG	Benchmark 4.1	In progress	implementation regarding the public health emergency and non-natural disaster (zoonoses/emerging infectious diseases and antimicrobial resistance). A total of 53 participants attended from related ministries,
SURV-2.8: Support and facilitate the development of cross-sectoral integration surveillance system on zoonosis IED's and AMR/AMU guideline	Benchmark 4.1	In progress	institutions, and implementing partners. Based on advice from MoH's Center of Health Determinant Analysis, the reporting format to be used is the "Resource mapping tools and impact analysis". On December 24, IDDS facilitated a workshop to finalize the guidelines and roadmap and formulate the preface for these three documents: Cross-
SURV-2.11: Implementation Pilot of Integrated Surveillance Guidelines document for various diseases at the cross-sectoral levels	Benchmark 4.1	Not started	Sectoral Integrated Surveillance Guidelines, Four Way Linking Revitalization Guidelines, and Sistem Informasi Zoonoses dan Emerging Infectious Diseases (SIZE, or System for Zoonotic and Emerging Infectious Disease) roadmap. The meeting was conducted in a hybrid method (virtually and in-person), located at the Hotel JS Luwansa Jakarta, with 27 participants attending. The preface for the three documents was formulated and will be signed by the Echelon I officials from relevant ministries. IDDS, in collaboration with the Surveillance and Health Quarantine
		Directorate, MoH, conducted the second FGD on Octor third FGD on November 19 to develop the Cross-Sector Surveillance Guidelines. A total of 59 participants attend including representatives from MoH, Kemenko PMK, McCenter of Environmental Health and Disease Control Agreement Center for Veterinary Science (BBLitVet), BBV	Directorate, MoH, conducted the second FGD on October 21 and the third FGD on November 19 to develop the Cross-Sectoral Integrated Surveillance Guidelines. A total of 59 participants attended both FGDs, including representatives from MoH, Kemenko PMK, MoA, MoEF, the Center of Environmental Health and Disease Control Agency, Indonesian Research Center for Veterinary Science (BBLitVet), BBVet, provincial health
			office representatives, BKSDA, the Indonesian Epidemiology Expert Association, the Indonesian Epidemiology and Veterinary Economic Association, and Global Health Security international partners.

Indonesia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
			On November 25, IDDS facilitated an informal discussion to finalize the guidelines. A total of 17 participants attended from MoH, MoA, MoEF, the Food and Agriculture Organization of the United Nations (FAO), and the World Health Organization (WHO). IDDS will facilitate the formalization of this document in FY 2022 Q2. The pilot implementation of the Integrated Surveillance Guidelines requires agreement from all ministries. A discussion will be held in early 2022 after the Integrated Surveillance Guidelines are formalized. The pilot implementation will take place in FY 2022 Q3.
IDN-GHS-SURV-3: Support the Development and Operationalization of Sistem Informasi Zoonoses Dan Emerging Infectious Diseases (SIZE) 2.0	Benchmark 9.2	In progress	IDDS, in collaboration with the Coordinating Ministry of Human Development and Cultural Affairs, conducted the Coordination Meeting on National SIZE Management on October 29 to strengthen the cross-sectoral coordination and synergize the roles of each ministry and institution and
SURV-3.3: Support the facilitation and reporting of the SIZE CG regular meeting	Benchmark 9.2	In progress	international partners on the national SIZE's future operationalization and development. A total of 49 participants attended the online meeting from Kemenko PMK, the Ministry of Communication and Information (Kominfo),
SURV-3.5: Development of the SIZE Roadmap by identifying regulations needed and system gaps in SIZE 2.0 that require the attention of GoI and International Partners to ensure the success of SIZE 2.0	Benchmark 9.2	In progress	MoH, MoA, MoEF, MoA, Badan Riset dan Inovasi Nasional (BRIN, or National Research and Innovation Agency), the Agency for National Development and Plan, WHO, and FAO. IDDS, in collaboration with the Coordinating Ministry for Human Development and Cultural Affairs and MoH's Surveillance and Health Quarantine Directorate, conducted the second FGD on October 13 and third FGD on November 16 to develop the National SIZE Roadmap. At the
SURV-3.6: Support the development of a regulatory strategy on the operationalization of the SIZE	Benchmark 9.2	In progress	meeting, the draft was presented, and participants provided inputs. A total of 95 participants attended the second FGD, and 135 participants attended the third FGD, from Kemenko PMK, MoH, MoA, MoEF, Kominfo, Badan Pengkajian dan Penerapan Teknologi (Agency for the Assessment and
SURV-3.9: Conduct a training for the team managing SIZE 2.0 (Rabies) on data analytics, data visualization, and reporting	Benchmark 9.2	In progress	Application of Technology-BPPT), BRIN, BAPPENAS, Cabinet Secreta the Republic of Indonesia (SETKAB), Global Health Security internation partners, BPJS Kesehatan, BBPKH Cinagara, BBPK Ciloto, BKSDA,

Indonesia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
SURV-3.10: Conduct training for OH concept and SIZE 2.0 for technical staff at a district level	Benchmark 9.2	In progress	provincial health office representatives, and Animal Health Office representatives. On November 24, IDDS facilitated an informal discussion to discuss the National SIZE Roadmap document. A total of 18 participants attended from Kemenko PMK, MoH, MoA, MoEF, Kominfo, WHO, and FAO. IDDS will facilitate the formalization of this document in FY 2022 Q2. IDDS, in collaboration with the Coordinating Ministry for Human Development and Cultural Affairs, conducted an online coordination meeting on October 15 related to SIZE's future management and legal aspects. A total of 14 participants attended from Kemenko PMK, Kemenkominfo, BRIN, and FAO. IDDS conducted an online meeting on October 27 to discuss the mechanism of SIZE migration from BRIN to Kominfo, which was facilitated by Kemenko PMK. A total of 16 participants attended from Kemenko PMK, Kominfo, BRIN, and FAO. IDDS conducted an online discussion on October 25 to determine the location (provinces and districts) for the One Health and SIZE training. The district training location was agreed to be determined based on several criteria, and the One Health province training will be supported by WHO in 2022. A total of 20 participants attended from MoH, MoA, MoEF, BBPK Ciloto, BBPKH Cinegara, WHO, FAO, and Indonesia One Health University Network (INDOHUN). On December 21, IDDS facilitated a workshop to decide the One Health training location (based on the scoring method used to select the districts for the Surveillance and One Health Program) and to obtain information and inputs for the curriculum and module. A total of 56 participants attended from related ministries, institutions, and international partners, and they identified the priority provinces for the One Health training. The selected districts will be published in January 2022.

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
KEN-GHS-NTW-I: Enhance national-	IHR benchmark	In progress	In collaboration with the National Antimicrobial Stewardship Inter-Agency
level multi-sectoral antimicrobial	3.1		Committee (NASIC), IDDS promoted the antimicrobial resistance (AMR)
resistance (AMR) detection and			surveillance training course hosted at the Ministry of Health e-Learning
surveillance leadership and			Academy, through a PowerPoint slide presentation at the World
coordination			Antimicrobial Awareness Week national launch on November 19, which
NTW-1.1: Create awareness on		In progress	was attended by more than 300 people. IDDS worked closely with the
the AMR surveillance training			USAID-funded University of Nairobi (UoN) Health IT project to design
course hosted at the Ministry of			certificates to be awarded to learners upon completion of the AMR
Health (MoH) e-learning academy,			surveillance training, as well as to monitor course uptake by learners. IDD
monitor its uptake, and provide			and Health IT also revised and improved course content by providing
technical assistance to address any			additional contextual information about the modules on the course pages.
challenges that arise during			Building on FY 2021 activities, IDDS will work closely with NASIC and
implementation			Health IT to further promote the AMR surveillance training course (amon
NTW-1.2: Hold a follow-up		In progress	laboratory technologists, clinicians, veterinarians, pharmacists, nurses,
meeting with professional and			surveillance officers, and other potential learners), improve course
regulatory bodies to effect actions			contents, and monitor uptake throughout FY 2022.
to allow award of continuing			IDDS provided technical assistance to convene meetings of the national ar
professional development (CPD)			county antimicrobial stewardship committees and participated in the
points to the learners who take the			meetings. On November 30, IDDS participated in the launch of the Kilifi
self-paced AMR surveillance training			County Antimicrobial Stewardship Inter-Agency Committee action plan.
course on the MoH e-learning			During the meeting, IDDS discussed strengthening AMR surveillance in the
academy. This will entail (1) follow-			county with the county executive committee member for health, the
up meetings with the regulatory			county director of health, and the Malindi Sub-County Hospital medical
bodies to present and defend the			superintendent. IDDS will provide technical and logistical support for the
training materials, and (2)			implementation of some of the surveillance activities in the FY 2022 Kilifi
advocating for MoH to offset the			County Antimicrobial Stewardship Inter-Agency Committee action plan,
required fees or get a waiver for			including (1) sensitizing clinicians to raise awareness of AMR and increase
award of CPD points	-		use of bacteriology services, (2) hosting forums on topics related to the
NTW-1.3: Revise the contents and		Not started	clinical-laboratory interface, and (3) strengthening laboratory testing
format of the national AMR			capacity by training staff and supporting regular maintenance of equipment
surveillance training materials			
hosted on the MoH e-learning			
academy to make them more user			

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Activity	IHR benchmark	Status	Activity implementation updates
friendly and interactive, based on feedback received from learners			
and course managers. The project			
will also collaborate with Health IT			
to record and upload video and			
audio clips as part of the content			
improvement			
NTW-1.4: Participate in planning and		In progress	
progress review meetings of national		in progress	
and county antimicrobial stewardship			
interagency committees and provide			
technical assistance			
KEN-GHS-NTW-2: Strengthen	IHR benchmark	In progress	Starting in FY 2021, IDDS facilitated discussions on automated equipment
detection of priority AMR surveillance	3.2		placement between Bungoma County Referral Hospital and Hass Scientific
pathogens at the five IDDS-supported			(a local distributor for manufacturer bioMérieux), providing mediation and
surveillance sites			technical guidance. In late November, the county hospital signed a contract
NTW-2.1: Conduct field		In progress	with Hass Scientific for the placement of a VITEK 2 system that automates
mentorship visits and provide			bacterial identification (ID) and antimicrobial susceptibility testing. The
onsite bench training to the five			equipment was installed onsite on December 1, and laboratory personnel
IDDS-supported counties to			were trained on its use, specimen processing, testing, performance of
reenforce skills and competency on			quality assurance, and maintenance procedures. The ID/antimicrobial
quality assurance, biosafety and			susceptibility testing equipment will improve laboratory capacity to detect
biosecurity, organism identification			AMR by facilitating fast and accurate identification of bacteria and their
(ID), and antimicrobial susceptibility			susceptibility patterns, thus improving clinical management, patient
testing (AST)		Niet steute d	outcomes, and AMR surveillance.
NTW-2.2: Place surveillance site		Not started	To complement placement of the equipment by the county, IDDS procured start-up reagents to kick-start use of the equipment. IDDS also partnered
laboratory technologists in busy laboratories for a week to enhance			with the Bungoma County Referral Hospital to hold a continuous medical
skills on ID, AST, and quality			education (CME) session for clinicians on diagnostics and antimicrobial
standards			stewardship at the Bungoma County Referral Hospital on December 2. The
NTW-2.3: Support preventive		In progress	CME session was attended by 44 (21 female) health care workers
maintenance of microbiology		in progress	representing the following cadres: pharmacists (2), medical officers (14),
manitenance of filler oblology	l	1	1 - 5p. 252

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Activity	IHR benchmark	Status	Activity implementation updates
equipment (i.e., servicing of			clinical officers (12), medical laboratory technologists (11), nursing officers
automated equipment and			(3), and surgeons (2). The aim of the CME session was to provide clinicians
calibration of select auxiliary			with information on microbes causing infections and their resistance to
equipment) in the five IDDS-			antimicrobial agents, and how bacteriology tests can guide patient
supported AMR surveillance sites			management, including treatment to optimize clinical outcomes and limit
NTW-2.4: Procure microbiology		Not started	the spread of AMR.
commodities to supplement county			In FY 2022 Q2, IDDS will partner with Bungoma County and the county
capacity based on the			referral hospital leadership, and bioMérieux, to formally launch the
comprehensive list developed			equipment as a way of creating awareness and increasing its use. Clinicians
during fiscal year 20			laboratory technologists, and other health workers from the county referr
NTW-2.5: Provide technical and		In progress	,
logistical support to IDDS-			hospital and high-volume peripheral health facilities in the county will be
supported AMR surveillance sites			invited to the launch event.
to acquire automated bacteriology			
equipment through placement			
NTW-2.6: Conduct two webinars		Not started	
in collaboration with other			
stakeholders on selected aspects of			
AMR detection and surveillance			
NTW-2.7: Provide technical		Not started	
assistance to the five IDDS-			
supported AMR surveillance sites			
to quantify, forecast, and budget for			
microbiology bacteriology			
commodities, to strengthen the			
microbiology commodities supply			
chain management system			
KEN-GHS-NTW-3: Provide technical	IHR benchmark	In progress	IDDS continued to provide technical assistance in the selection, packaging,
assistance to strengthen utilization of	7.2		and transportation of priority microbiology isolates to the National
bacteriology testing capacity established			Microbiology Reference Laboratory (NMRL) for external quality
at the five IDDS-supported AMR			assessment. All five IDDS-supported sites are actively referring isolates to
surveillance sites			the NMRL, although it has not yet released results of retesting. Currently,

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
NTW-3.1: Provide assistance to		In progress	isolate referral from county hubs to the NMRL is primarily facilitated
two counties (Murang'a and			through the existing TB specimen referral system. In FY 2022 Q2, IDDS wi
Bungoma) to establish integrated			continue to provide technical assistance as needed.
specimen referral system technical			On December 7, IDDS supported the Murang'a County Referral Hospital
working groups (TWGs) and to			to convene a specimen referral system (SRS) stakeholder meeting to review
develop a pilot plan for			progress made two years after the launch of the county-owned integrated
an integrated specimen referral			SRS, and to discuss strategies to integrate AMR surveillance specimens into
system in their respective counties			the county SRS. The county executive committee member for health,
NTW-3.2: Provide technical		In progress	county medical laboratory coordinator, sub-county medical laboratory
assistance to two pilot counties to			coordinators, county AIDS and STIs coordinator, county tuberculosis and
hold integrated specimen referral			leprosy coordinator, county nurse, county health administration officer,
system TWG meetings.			representative from the motorbike riders' crew, and partner
NTW-3.3: Hold a one-day		Not started	representatives attended the meeting. These stakeholders will constitute
workshop in each IDDS-supported			the county SRS technical working group, which will be convening on a
county to train/sensitize specimen			quarterly basis. All in attendance agreed to integrate AMR surveillance
transporters on handling of			specimens into the SRS on a pilot basis and agreed to the indicators that
bacteriology specimens, among			will be used to monitor the performance of the system. An efficient referra
other infectious substances			system for AMR surveillance specimens will expand access to diagnostic
NTW-3.4: Conduct a one-day		Not started	services at the peripheral health facilities, save patients cost and time that
refresher training for clinical and			would be spent seeking services at the referral health facilities, promote
laboratory teams in peripheral			evidence-based prescription of antibiotics at the referring facilities, and
health facilities on the role of			generate representative AMR surveillance data for the county.
microbiology and specimen			
collection/referral in each of the			
five IDDS-supported counties			
NTW-3.5: Provide assistance to		Not started	
two counties (Murang'a and			
Bungoma) to transport specimen			
from high-volume peripheral health			
facilities to the county referral			
hospital laboratories within existing			
specimen referral mechanisms			

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
NTW-3.6: Hold a one-day meeting with both clinical and laboratory personnel at each of the IDDS-supported sites to review AMR surveillance data and promote the use of diagnostics to improve prudent use of antibiotics		Not started	
NTW-3.7: Provide technical and logistical assistance to the IDDS-supported AMR surveillance sites to refer bacteriology isolates to the National Microbiology Reference Laboratory for external quality assessment (EQA), using existing specimen referral mechanisms. This will involve support for packaging and transporting items and courier costs where applicable		In progress	
KEN-GHS-NTW-4: Strengthen national- and county-level laboratory quality systems, including EQA and internal quality control processes	IHR benchmark 3.2	In progress	IDDS provided onsite technical assistance to the Malindi Sub-County Hospital Laboratory in preparation for assessment by the Kenya National Accreditation Services (KENAS) for compliance with requirements of ISO 15189:2012 medical laboratories standard. KENAS assessed the laboratory
NTW-4.1: Provide technical assistance to National Antimicrobial Stewardship Inter-Agency Committee (NASIC) to conduct quarterly virtual EQA sessions targeting all AMR surveillance sites in the country		Not started	from November 29 to December 2. For the first time, bacteriology tests, under which AMR detection tests fall, were included in the assessment. The KENAS assessment team identified two minor nonconformities that required corrective action but ultimately recommended that Malindi laboratory's accreditation include bacteriology tests. Accreditation of the bacteriology tests will boost confidence among clients and stakeholders on the quality of test results and of the AMR surveillance data generated by the
NTW-4.2: Provide technical assistance to Nyeri County Hospital Laboratory and Malindi Sub-County Hospital Laboratory to		In progress	laboratory. In FY 2022 Q2, IDDS will continue to provide offsite technical assistance to the laboratory to fill gaps.

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
include bacteriology tests (gram stain, culture, and antimicrobial susceptibility tests) in the scope of accreditation by Kenya Accreditation Service (KENAS) NTW-4.3: Provide technical and logistical support to the National Microbiology Reference Laboratory to hold a one-day workshop with all AMR surveillance sites in the country to strengthen laboratory quality management system		Not started	The project has also begun to provide onsite and offsite technical assistance to the Nyeri County Referral Hospital Laboratory to prepare for its accreditation assessment, which is scheduled for FY 2022 Q3. IDDS continued to monitor monthly workload at the five IDDS-supported bacteriology laboratories through review of AMR detection and surveillance data generated by the sites and followed up with the sites that reported a reduction in workload to identify and address causes. IDDS will continue to monitor AMR surveillance sites bacteriology workload on a monthly basis throughout FY 2022.
NTW-4.4: Conduct monthly monitoring of AMR detection and surveillance progress at the county level (i.e., virtual workload and quality monitoring using tools IDDS supported NASIC to develop during fiscal year 20)		In progress	
KEN-GHS-SURV-1: Enhance national- and subnational-level capacity to analyze, interpret, report, and use AMR surveillance data	IHR benchmark 3.2	In progress	From November 22 to 26, IDDS organized a centralized hands-on training on the use of WHONET software for AMR data management and analysis. The training was held at Sarova Panafric Hotel in Nairobi and was attended by 17 people (7 females): 2 people (a microbiologist and quality officer)
SURV-1.1: Train staff from the five IDDS-supported sites on the use of WHONET software for AMR surveillance data analysis		Completed	from each of the 5 IDDS-supported AMR surveillance sites, 4 people from the IDDS Kenya team, and I person from the National Public Health Laboratories (NPHL). The training was facilitated by two WHONET expert consultants and a member of the NPHL monitoring and evaluation team.
SURV-1.2: Conduct a two-day visit to each IDDS-supported AMR surveillance site to support site- specific implementation of		In progress	The training enhanced the capacity of the surveillance sites to manage and analyze AMR data for use at the facility level to inform patient management decisions.

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
WHONET by ensuring appropriate			From November 30 to December 15, the IDDS surveillance specialist
installation, data entry, and analysis			conducted site-specific follow-up visits to support implementation and use
SURV-1.3: Conduct in-person,	1	Not started	of WHONET software for AMR surveillance data management and analysis
semi-annual AMR surveillance			in the Murang'a, Kitale, and Bungoma hospital laboratories. During the
stakeholder data review meetings			visits, the IDDS surveillance specialist helped the sites set up and configure
with all AMR surveillance sites that			WHONET to reflect data variables collected for national reporting, pilot
are reporting in the country			the WHONET tool, and address any issues that arose. She mentored three
SURV-1.4: Review on a monthly	- -	In progress	staff from each site on use of the WHONET software. The laboratories
basis data submitted to the Central			without a laboratory information system, such as Murang'a, will use the
Data Warehouse (CDW) from			WHONET software to manage and analyze AMR surveillance data. In FY
IDDS-supported and other AMR			2022 Q2, IDDS will visit Malindi and Nyeri to provide similar onsite support
surveillance sites in the country to			for WHONET implementation. IDDS will continue to provide virtual
identify major gaps, including failure			support to the five IDDS-supported AMR surveillance sites throughout FY
to submit, poor timeliness, and			2022 to ensure successful use of WHONET software.
incompleteness, and prepare			IDDS continued to monitor weekly submission of AMR surveillance data by
internal summary of progress and			the supported surveillance sites to the NPHL Central Data Warehouse
actions to address identified gaps.			(CDW) and reviewed the data for any quality gaps. This ensured early
SURV-1.5: Organize quarterly		In progress	identification of major gaps, including poor timeliness and incompleteness,
virtual AMR surveillance data			and prompted actions to address the gaps.
review meetings for AMR			The quarterly virtual AMR surveillance data review meetings did not happen
surveillance sites, NASIC, and other			as initially planned due to unavailability of some of the relevant
stakeholders to discuss submitted			stakeholders, particularly the NPHL and the NASIC secretariat. IDDS plans
data and address any quality gaps			to hold one review meeting in FY 2022 Q2 as well as a workshop to
SURV-1.6: Conduct semi-annual		Not started	provide feedback to the surveillance sites on the data cleaning and review
AMR surveillance supportive			gaps identified during the workshop conducted by the AMR surveillance
supervision to the sites jointly with			technical working group with support from IDDS in August 2021.
NASIC and other stakeholders			
KEN-GHS-SURV-2: Enhance AMR	IHR benchmark	In progress	IDDS continued to work closely with NASIC and the software developer
surveillance data quality, sharing, and	3.2		responsible for the real-time AMR surveillance dashboards to identify gaps
use within and across sectors and			and propose solutions. IDDS also followed up with the surveillance sites on
partners			access and use of AMR dashboards and provided technical assistance as

Kenya GHS			
Activity	IHR benchmark	Status	Activity implementation updates
SURV-2.1: Continue to work with the NASIC informatics team to refine and improve real-time AMR surveillance dashboard capabilities at the CDW based on feedback from surveillance sites and partners	In pro	In progress	needed. In FY 2022 Q2, IDDS will continue to provide technical assistance to improve the contents of the AMR dashboard and help surveillance sites easily access and use their data to inform site-level policy and practice. IDDS continued to monitor the quality of AMR surveillance data submitted to the CDW weekly. In FY 2022 Q2 and Q4, IDDS will provide technical assistance to NASIC to review and clean data in preparation for submission
SURV-2.2: Support NASIC to develop a quarterly AMR bulletin for the country with a focus on the AMR surveillance content		In progress	to the World Health Organization Global Antimicrobial Surveillance System during the 2022 data call.
SURV-2.3: Support the development or generation of antibiograms for the five IDDS-supported sentinel surveillance sites		Not started	
SURV-2.4: Support NASIC to collate, clean, prepare, and submit data to GLASS during the 2022 data call		Not started	
KEN-GHS-SURV-3: Strengthen national- and county-level integration and use of information systems to manage AMR surveillance data	IHR benchmark 9.2	In progress	The linkage of the Bungoma County laboratory information system to the CDW has stalled due to unavailability of the IT expert from the NPHL to complete the process. To provide temporary support to Bungoma County to share data with the CDW, IDDS provided technical assistance to the
SURV-3.1: Provide IT technical support to NASIC to maintain AMR surveillance information systems and respond to system challenges at the CDW and AMR surveillance sites to assure uninterrupted transmission of data.		In progress	county to engage a data clerk to retroactively enter AMR data for 2019—2021 on WHONET. The WHONET file will be sent to the NPHL for uploading to the CDW. Bungoma County will thereafter continue to share data prospectively with the NPHL using the WHONET software until the laboratory information system can be linked to the CDW by the NPHL. The process of linking the CDW to District Health Information Software, version 2 (DHIS2) has temporarily stalled due to inadequate informatics
SURV-3.2: Provide technical assistance to finalize the linkage of the Bungoma County laboratory		Not started	staff at NPHL to finalize the linkage. Prior to this, the NPHL shared data elements with Health IT, which created a placement in DHIS2, and access credentials were given to the NPHL. In FY 2022, IDDS plans to work with

Kenya GHS	Kenya GHS				
Activity	IHR benchmark	Status	Activity implementation updates		
information system to the CDW to			Health IT and the Foundation for Innovative New Diagnostics to complete		
share data in real time			the linking of the CDW to DHIS2.		
SURV-3.3: Provide technical		In progress			
assistance to NPHL informatics to					
link the AMR CDW to District					
Health Information Software,					
version 2 (DHIS2) to facilitate data					
exchange between the two sectors					

Liberia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
LBR-GHS-NTW-1: Provide technical assistance (TA) to the National Diagnostic Division (NDD) to support	IHR benchmark 7.3	In progress	On November 25, IDDS held a working session with four technical leads of the National Diagnostic Division (NDD) to finalize the monitoring and evaluation tracker that will be used for monitoring progress of
its diagnostic system leadership role NTW-1.1: Strengthen NDD technical oversight of the laboratory system by providing technical guidance on coordination, collaboration, and continuous improvement of the laboratory network to the NDD staff at the central and county level		In progress	implementation of the five-year laboratory strategic plan. This tracker is based on the indicators defined in the plan. In FY 2022 Q2, IDDS will provide guidance on data collection and analysis. IDDS convened a meeting with the NDD technical team on December I to discuss strategies for collaborating with the supply chain management unit and the central medical stores to address the recurring challenge of commodity stockouts in all the laboratories. At the county level, the diagnostic specialists worked with county diagnostic officers in engaging county and hospital pharmacists who oversee all supply stock. IDDS also
NTW-1.2: Provide support for the NDD to conduct biannual laboratory review meetings with counties and stakeholders		In progress	advised the NDD to engage all implementing partners for laboratory activities to address the supply gaps in the laboratory system.
NTW-1.3: Provide TA on tracking the implementation of the laboratory strategic plan and policy		In progress	
LBR-GHS-NTW-3: Improve network efficiencies through the implementation of a decentralized integrated specimen referral system in the three supported counties (Lofa, Nimba, and Bong)	IHR benchmark 7.2	In progress	IDDS provided onsite mentorship on bacteriology specimen collection to two laboratory technicians working in the bacteriology section at Tellewoyan laboratory and one technician at G.W. Harley Hospital laboratory. The mentorship included demonstrations in hospital wards on specimen collection at bedsides. IDDS provided financial support for the
NTW-3.1: Support the development of county-specific operational frameworks for implementation of Integrated Specimen Transport in the supported counties		In progress	NDD bacteriology champion to provide onsite training and mentorship on how to aseptically collect bacteriology specimens, including blood cultures, safe handling, and transportation of the specimens to the laboratory. The onsite mentorship was provided at both Tellewoyan and G.W. Harley laboratories. In FY 2022 Q2, IDDS will provide financial support to procure specimen
NTW-3.2: Support the procurement of biosafe specimen		Not started	transport material and to carry specimens from three district hospitals (Kolahun, Curran, and Foya Boma) to Tellewoyan laboratory in Lofa.

Liberia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
courier boxes for transportation of bacteriology specimens to Tellewoyan laboratory in Lofa and provide funds to support the transportation of specimens using motorbikes			
NTW-3.3: Support transportation of bacteriology specimens to decentralized bacteriology testing laboratories in Lofa county		Not started	
NTW-3.4: Support training and mentorship to build capacity of laboratory staff at the district level on specimen management and shipping of priority pathogen specimens in Bong, Lofa, and Nimba counties		In progress	
LBR-GHS-NTW-4: Strengthen County level implementation of Strengthening Laboratory Management Toward Accreditation (SLMTA)-based quality management system (QMS) in the supported laboratories in Lofa, Nimba, and Bong counties	IHR benchmark 7.4	In progress	IDDS diagnostic specialists assisted the technicians at Tellewoyan, Phebe, and G.W. Harley Hospital laboratories to address the gaps noted during the FY 2021 Q4 Stepwise Laboratory Improvement Process Towards Accreditation audit. IDDS provided guidance to the county diagnostic officers on developing the management calendar for their county activities and provided mentorship to laboratory technicians on the quality management system, emphasizing adherence to laboratory procedures and
NTW-4.1: Provide SLMTA-based on-site mentorship and support visits to the facilities enrolled in QMS in Bong, Nimba, and Lofa		In progress	good laboratory practices in fulfillment of Strengthening Laboratory Management Toward Accreditation/Stepwise Laboratory Improvement Process Towards Accreditation requirements. Feedback received from the World Health Organization indicated that it
NTW-4.2: Develop a SLMTA-based mentorship model for Liberia based on the mentorship being provided in the three counties		Not started	would provide external quality assessment panels for bacteriology to the National Public Health Reference Laboratory, which, in turn, should provide panels to county laboratories. In FY 2022 Q2, IDDS will assist with National Public Health Reference Laboratory capacity building for interlaboratory

Liberia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
NTW-4.3: Conduct biannual Stepwise Laboratory Improvement Process Towards Accreditation (SLIPTA) audits to monitor SLMTA implementation in the IDDS- supported laboratories in the three counties		Not started	comparison. The three IDDS-supported bacteriology laboratories will initiate an interlaboratory comparison program as a quality assurance measure in FY 2022 Q2.
NTW-4.4: Provide on-line QMS auditor training to five laboratory professionals		In progress	
NTW-4.5: Enroll facilities conducting bacteriology in an External Quality Assurance (EQA) proficiency testing scheme		In progress	
LBR-GHS-NTW-7: Strengthen capacity to perform and report quality-assured microbiology, including antimicrobial resistance (AMR) detection in the three supported counties	IHR benchmark 7.1	In progress	IDDS provided financial support for the NDD bacteriology champion to provide three weeks of onsite bacteriology mentorship (October 25–November 13) at Tellewoyan Hospital laboratory. The mentorship was provided to two technicians who are permanently assigned to the bacteriology section, and other laboratory staff attended when available.
NTW-7.1: Provide on-site mentorship, in collaboration with the NDD and the National Public Health Reference Laboratory (NPHRL), on bacteriology culture and antimicrobial susceptibility testing of priority pathogens to the three facilities conducting bacteriology testing in the supported counties		In progress	The mentorship included media preparation, specimen collection and processing, and antimicrobial susceptibility testing. The mentor ensured that the technicians were trained on the various bacteriology techniques, including disinfection, sterility testing, and decontamination of waste, by allowing the mentees to conduct the activities with him watching and correcting where necessary. The mentorship emphasized aseptic techniques in bacteriology. IDDS diagnostic specialists, with the assistance of the NDD bacteriology champion, convened a meeting on October 25 with the management of Tellewoyan Hospital to discuss the availability of bacteriology testing
NTW-7.2: Provide TA on microbiology diagnostic stewardship		In progress	services at their laboratory. This laid the foundation for diagnostic stewardship meetings in which the laboratory team directly engages the

Liberia GHS			
Activity	IHR benchmark	Status	Activity implementation updates
NTW-7.3: Support procurement of		In progress	clinicians in improving bacteriology specimen collection, testing, and
bacteriology reagents and provide			reporting.
contracts for equipment service and			IDDS procured antibiotic disks and other consumables to support the
calibration			bacteriology testing at G.W. Harley laboratory. The biosafety cabinet for
NTW-7.4: Strengthen bacteriology		In progress	G.W. Harley was delivered to the facility in December.
data reporting to the central level			IDDS installed desktop computers in each of the three bacteriology
NTW-7.5: Provide support for		In progress	laboratories, (Tellewoyan, G.W. Harley, and Phebe) and installed the
electricity for bacteriology work at			WHONET software. In FY 2022 Q2, IDDS will strengthen data reporting
Tellewoyan and G.W. Harley			from the three bacteriology sites using the WHONET software.
Hospital laboratories			

Madagascar GHS			
Activity	IHR benchmark	Status	Activity implementation updates
MDG-GHS-NTW-1: Support finalization of the National Laboratory Strategic Plan (NLSP)	Benchmark 7.1	Completed	IDDS finalized the key deliverable, the final edited and formatted document of the National Laboratory Strategic Plan and submitted it to USAID.
MDG-GHS-NTW-2: Establish peripheral testing capacity in Mahajanga region for COVID-19 and other infectious and emerging diseases	Benchmark 7.3	Completed	IDDS submitted the report for this activity, including the number of COVID-19 tests performed on the Mahajanga polymerase chain reaction platform and a brief synopsis of the remaining challenges to address in project year 2, to USAID.
MDG-GHS-NTW-3: Support capacity building of laboratories in the RESAMAD network for bacteriology capacity building to identify priority pathogens	Benchmark 7.4	Completed	IDDS held a training workshop on bacteriology for Reseau des Laboratoires à Madagascar biologists and laboratory technicians in October.
MDG-GHS-SURV-1: Support the national government to assess current surveillance systems to identify gaps and opportunities for integrating surveillance	Benchmark 9.1	Completed	IDDS submitted the key deliverable, a report from the workshop on next steps to strengthen the surveillance system and integrate surveillance data, to USAID.
MG-GHSA-SURV-2: Support the review and finalization of the National surveillance Strategic Plan (NSSP)	Benchmark 9.3	Completed	IDDS reviewed, finalized, and submitted the key deliverable, the National Surveillance Strategic Plan, to USAID.
MG-GHSA- SURV-3: Support the effective review of the monthly surveillance bulletin (SIMR) and dissemination, thus improving on the coordination of the IDSR	Benchmark 9.1	Completed	IDDS finalized and submitted the key deliverable, the June 2021 integrated disease surveillance and response bulletin, submitted to USAID.

Mali GHS			
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Activity	IHR benchmark	Status	Activity implementation updates
MLI-GHS-NTW-1: Map national	Benchmark 7.3	Not started	This activity is planned for FY 2022 Q2.
diagnostic facilities and their capacities			
MLI-GHS-NTW-1.1: Complete the		Not started	
mapping of the country's laboratory			
capacity by collecting data in the			
remaining regions (Mopti, Gao,			
Timbuktu, Kidal, Taoudenit, and			
Menaka) (continuation of activities			
started in FY21)			
MLI-GHSA- NTW-1.2: Hold a data		Not started	
verification and validation session (in			
Mopti) with data collectors before			
uploading on to the ASLM platform			
(continuation of activities started in			
FY2I)			
MLI-GHS-NTW-2: Strengthen	Benchmark 7.3	In progress	IDDS provided technical and financial support to the Institut National de
diagnostic equipment systems			Sante Publique (INSP, or National Institute for Public Health) to hold a
(procurement, availability, operating			meeting of the multisectoral committee for laboratory system strengthening
status, and preventive maintenance)			on December 14. The meeting participants were the 15 multisectoral
MLI-GHS- NTW-2.1: Work with the		In progress	committee members from the key ministries of the One Health platform.
equipment committee to support the			The objectives of the meeting were to present (1) the laboratory
development or revision of national			equipment maintenance procedure for the INSP and (2) the research
equipment policies, guidelines, and			protocol, "Antibiotic resistance of E. coli strains isolated from ruminants in
standard operating procedures (SOPs)			the peri-urban area of Bamako."
through one meeting every other			In FY 2022 Q2, IDDS will continue to provide financial and technical
month (continuation of activities			support to the multisectoral committee meetings and support the INSP to
started in FY20)			conduct the first round of biannual equipment maintenance follow-up visits
MLI-GHS-NTW-2.2: Provide a limited		Not started	to the regional hospital laboratories (Ségou, Mopti, and Sikasso) that
quantity of testing reagents for priority			received equipment maintenance training with IDDS support.
pathogens for the two IDDS-supported			
facilities: National Institute of Public			
Health (Institut National de Santé			

Mali GHS			
Activity	IHR benchmark	Status	Activity implementation updates
Publique (INSP) and the laboratory of			
Segou Regional Hospital			
MLI-GHS-NTW-2.3: Support INSP to		Not started	
conduct an annual equipment			
maintenance follow up visit to regional			
hospital laboratories which received			
training with IDDS support (Segou,			
Mopti, and Sikasso)			
MLI-GHS-NTW-2.4: Develop a costed		Not started	
plan for identified equipment needs			
(maintenance contracts, equipment			
repair, and/or procurement)			
(continuation of activities started in			
FY20) to be done during a 3-day			
workshop			
MLI-GHS-NTW-3: Strengthen support	Benchmark 7.3	Not started	This activity will start in FY 2022 Q2.
for the accreditation process for the			
serology section at the National			
Institute of Public Health (Institut			
National de Santé Publique (INSP) and			
the laboratory of Segou Regional			
Hospital			
MLI-GHS-NTW-3.1: Organize two		Not started	
assessment and coaching visits for the			
Quality Management System (QMS)			
consultant to INSP and Ségou Hospital			
(continuation of activities started in			
FY20)			
MLI-GHS-NTW-3.2: Conduct quarterly		Not started	
visits to INSP and the Segou Regional			
Hospital Laboratory to follow up the			
implementation of the international			

Mali GHS			
Activity	IHR benchmark	Status	Activity implementation updates
QMS expert assessment			
recommendations (continuation of			
activities started in FY20)			
MLI-GHS-SURV-I: Support community-	Benchmark 9.3	In progress	IDDS financially supported communication costs (SMS and Internet fees) for
based surveillance (CBS)			community-based surveillance actors in the health districts of Kadiolo and
standardization and implementation by			Kati. IDDS printed the data collection tools and handed them over to the
continuing support to districts already			health districts. IDDS continued monitoring the quality of the data collected
covered (Kadiolo, Kati, and Kangaba)			from the health districts of Kadiolo and Kati.
and expanding to Sikasso and Kadiolo			In FY 2022 Q2, IDDS will continue data monitoring and provide technical
health districts, according to the			and financial support to the Direction General de la Sante et de l'Hygiene
national expansion plan produced with IDDS support			Publique (General Directorate of Health and Public Hygiene) to conduct the first round of biannual post-training supervision visits combined with data
MLI-GHS-SURV-1.1: Support the		In progress	review in the Kadiolo health district (Sikasso region) and in the Kati and
communication costs (SMS and internet		In progress	Kangaba health districts (Koulikoro region).
fees) of CBS actors in the health			Kangaba Health districts (Kodilkoro region).
districts of Kadiolo, Kati, and Kangaba			
(continuation of activities started in			
FY21)			
MLI-GHS-SURV-1.2: Print and hand		Completed	
over CBS data collection tools to the			
health districts of Kadiolo, Kati, and			
Kangaba (continuation of activities			
started in FY21)			
MLI-GHS-SURV-1.3: Conduct semi-		Not started	
annual supportive supervision visits to			
CBS actors in the health districts of			
Kadiolo, Kati, and Kangaba			
(continuation of activities started in			
FY21)		Nat atauta 1	-
MLI-GHS-SURV-1.4: Expand CBS		Not started	
(introduction visit, trainings, and			
equipment) to two health districts of		1	

Mali GHS			
Activity	IHR benchmark	Status	Activity implementation updates
the Sikasso region (Sikasso,			
Kolondièba)			
MLI-GHS-SURV-2: Strengthen	Benchmark 9.3	Not started	In FY 2022 Q2, IDDS will provide technical and financial support to Ségou
Integrated Disease Surveillance and			region to conduct the first round of biannual integrated disease surveillance
Response (IDSR) geographical areas			and response supportive supervision visits to underperforming community
that have underperforming surveillance			health centers.
reporting and support the updating of			
national guides			
MLI-GHS-SURV-2.1: Support health		Not started	
districts in Ségou region to organize			
two rounds of quarterly IDSR			
supportive supervision visits to			
underperforming community health			
centers (continuation of activities			
started in FY20)			
MLI-GHS-SURV-3: Improve sharing of	Benchmark 9.2	In progress	IDDS provided financial, technical, and coordination support to the General
real-time monitoring information			Directorate of Health and Public Hygiene to produce three bulletins
MLI-GHS-SURV-3.1: Provide technical		In progress	(September, October, and November). All the bulletins are uploaded
assistance to the Direction Generale de			onto the IDDS-developed surveillance website.
la Sante et de l'Hygiene Publique			The December bulletin will be produced in FY 2022 Q2. This bulletin
(DGSHP) to develop and disseminate			cannot be processed before January 15 due to continued data entry
IDSR monthly and annual bulletins to			through that date.
stakeholders at central, regional, and			
district levels (continuation of activities			
started in FY20)			
MLI-GHS-SURV-3.2: Support DGSHP		In progress	
internet connection for surveillance			
document storage and data monitoring			
through the developed web-based			
online platform (continuation of			
activities started in FY21)			

Mali GHS				
Activity	IHR benchmark	Status	Activity implementation updates	
MLI-GHS-SURV-3.3: Support DGSHP to hold two online training sessions for surveillance officers in the different regional health directorates (Direction Regionale de la Santé, DRS) on the use of the web-based platform		Not started		

Senegal GHS			
Activity	IHR benchmark	Status	Activity implementation updates
SEN-GHS-NTW-1: Strengthen capacity of IDDS-supported laboratories for implementation of the National Standard Operating Procedures (SoPs) for AMR Surveillance	Benchmark 3.2 Benchmark 7.2	In progress	IDDS developed a summary of all reports shared with the Directorate of Laboratories during FY 2021. This summary is meant to provide in a single document all the results of activities implemented by IDDS in FY 2021 in the seven diagnostic facilities supported in collaboration with the
NTW-1.1: Provide equipment, microbiology reagents, and consumables to two new diagnostic facilities in order to have adequate commodities for AST		In progress	Directorate of Laboratories. IDDS met with the Directorate of Laboratories on December 17 to discuss the FY 2022 work plan and the selection of two additional laboratories to be supported by IDDS. The team will be following up with the Directorate of Laboratories during FY 2022 Q2 to complete the final selection and start
NTW-1.2: Provide technical assistance to two newly supported diagnostic facilities to adapt and implement the National SOPs for AMR		Not started	the assessment of capacities and needs of new laboratories to conduct antimicrobial resistance surveillance.
NTW-1.3: Support the Directorate of Laboratories to conduct hands-on training of lab personnel on AMR detection and surveillance in two new facilities		Not started	
SEN-GHS-SURV-1: Increase the capacity of IDDS-supported sites to report high quality AMR data electronically, completely, and on time	Benchmark 9.1	In progress	IDDS followed up with the seven original IDDS-supported diagnostic laboratories on entering the antimicrobial resistance reports into DHIS2. The Tivaouane, Linguere, Guediawaye, and Kaffrine FY 2022 Q1 data reports have been completed.
SURV-1.1: Provide TA and training to the designated facilities for AMR surveillance to begin reporting AMR data electronically		In progress	reports have been completed.
SURV-1.2: Conduct supportive supervision of IDDS-supported laboratories on DHIS2 reporting of AMR data		Not started	

Senegal GHS			
Activity	IHR benchmark	Status	Activity implementation updates
SEN-GHS-SURV-2: Improve the quality of surveillance data reported into DHIS2 in two new regions as well as in the previous two regions	Benchmark 9.2	In progress	IDDS completed the selection of two new regions to be supported, in addition to Saint Louis and Tambacounda: Kolda and Kédougou, with the Division of Health Information Systems of the Ministry of Health.
SURV-2.1: Organize training at the regional and district level on DHIS2 quality modules (i.e., data verification and data approval) in Tambacounda Region, St. Louis Region, and two new regions		In progress	IDDS developed terms of reference for training sessions, which were validated by the Ministry of Health health information division. The training schedule will next be validated by regional medical officers.
SURV-2.2: Support quarterly data review meetings at the regional level		Not started	
SURV-2.3: Conduct supportive supervision in the Tambacounda and St. Louis regions and in two additional regions to improve the quality of reported data in low performing health districts		Not started	

Tanzania GHS			
Activity	IHR benchmark	Status	Activity implementation updates
TZA-GHS-NTW-1: Support national	IHR benchmark	In progress	IDDS worked with the National Public Health Laboratory to finalize
diagnostics supply chain logistic system	3.2		procurement and clearance of standard organisms (started in FY 2021);
to ensure essential, quality-assured			these are expected to be completed in January 2022. The standard
microbiology commodities are available			organisms will be used by the National Public Health Laboratory to
at IDDS-supported AMR surveillance			implement quality control and external quality assurance at antimicrobial
sites to enable uninterrupted detection			resistance (AMR) surveillance sites across Tanzania.
of AMR			In FY 2022 Q2, IDDS will procure other AMR laboratory commodities.
NTW-1.1: Procure microbiology		In progress	These include media and supplements, biochemical identification tests and
laboratory commodities, including			reagents, and antibiotic sensitivity discs for AMR testing at the four IDDS-
sheep blood and standard			supported sites: Benjamin Mkapa Hospital in Dodoma, Maweni Regional
organisms, to support			Referral Hospital (RRH) in Kigoma, Temeke RRH in Dar es Salaam, and
uninterrupted culture and			Morogoro RRH in Morogoro.
antimicrobial susceptibility testing			IDDS anticipates starting implementation of these activities in FY 2022 Q2
(AST) for priority pathogens			The country experienced a surge of COVID-19 cases in Q1, and the
NTW-1.2: Conduct bi-annual onsite		Not started	project was mainly focused on implementing the COVID-19 ARP activities
mentorship programs with			
integrated supportive supervision			
on supply chain and inventory			
management for laboratory supplies			
required for AMR testing			
NTW-1.3: Support a workshop to		Not started	
review microbiology commodities,			
standardize according to tier, assign			
catalogue numbers and incorporate			
into the electronic Logistics			
Management Information System			
(eLMIS)			
NTW-1.4: Support annual		Not started	
microbiology commodity			
forecasting and quantification			
meeting. (IDDS will incorporate			
input from the national			
quantification team and laboratory			

Tanzania GHS			
Activity	IHR benchmark	Status	Activity implementation updates
experts from AMR surveillance			
sites during the quantification			
exercise.)			
NTW-1.5: Support annual		Not started	
preventive maintenance, minor			
repairs (as needed), and calibration			
of main equipment in the			
microbiology laboratory at the			
IDDS-supported sites			
NTW-1.6: Assist the NPHL to		In progress	
provide proficiency testing and			
external quality assessment			
materials to participating			
laboratories including IDDS-			
supported sentinel sites			
TZA-GHS-SURV-I: Enhance AST	IHR benchmark	In progress	IDDS submitted the following FY 2021 deliverables to USAID Washington:
performance, AMR data collection,	3.2		Standardized supportive supervision checklists for antibiotic
analysis and reporting on urine, blood			susceptibility testing of wound site specimens. This tool will enable
and wound specimens at IDDS-			AMR surveillance supervisors to plan and conduct a coordinated
supported sites	-		supervisory activity across AMR sentinel sites electronically using
SURV-1.1: Conduct bi-annual onsite		In progress	the Afya SS platform in FY 2022 Q2. It is expected that the
mentorship programs with			enhanced laboratory performance, quality service delivery, and use
integrated supportive supervision			of data will lead to improved reporting across the IDDS-supported
on clinical sample collection,			sentinel sites: Benjamin Mkapa Hospital in Dodoma, Maweni RRH in
handling, culture, AST, result			Kigoma, Temeke RRH in Dar es Salaam, and Morogoro RRH in
reporting, and archiving	-		Morogoro.
SURV-1.2: Work in collaboration		Not started	 PowerPoint slide deck on pilot wound site AMR data from IDDS-
with stakeholders, Integrated			·
Disease Surveillance and Response			supported sites, which was presented to the National AMR
(IDSR) and AMR actors, and			Surveillance and Research Technical Working Group
clinicians to develop			
standards/eligibility criteria/case		1	

Tanzania GHS			
Activity	IHR benchmark	Status	Activity implementation updates
definition for culture and AST in urine, blood, and wound-site specimens			 Slide deck from the IDDS-supported webinar on the National AMR Surveillance Framework, which was implemented in FY 2021
SURV-1.3: Provide logistics and financial support for one national TWG surveillance meeting and ensure visibility for the contribution of IDDS activities to national AMR data		In progress	In FY 2022 Q2, IDDS will build on the activities that led to these deliverables (e.g., supportive supervision and data review) to enhance antimicrobial susceptibility testing performance and AMR data collection, analysis, and reporting for urine, blood, and wound specimens at IDDS-supported sites.
SURV-1.4: Participate in key coordination mechanisms (e.g., WHO-IHR annual conference organized by Prime Minister's Office and the One Health coordination desk) as needed		Not started	
TZA-GHS-SURV-2: Pilot AMR surveillance at the community level	IHR benchmark 3.2	Not started	No updates.
SURV-2.1: Provide technical assistance to one or two IDDS-supported regional facilities to analyze AMR surveillance data from samples referred from peripheral facilities to track AMR at the community level		Not started	
SURV-2.2: Prepare and present AMR data to national coordination mechanisms (e.g., AMR surveillance and research technical working group, Multisectoral Coordination Committee [MCC], and others as needed)		Not started	

Tanzania GHS			
Activity	IHR benchmark	Status	Activity implementation updates
TZA-GHS-SURV-3: Enhance AMR data	IHR benchmark	In progress	On November 8, IDDS, in collaboration with the USAID mission, the
quality for reporting and use at	3.2		Ministry of Health, and the USAID-funded Medicines, Technologies, and
subnational, national, and global levels			Pharmaceutical Services program, conducted a joint site visit at Kigoma
SURV-3.1: Conduct bi-annual data		In progress	Regional Hospital, which is jointly supported by IDDS (AMR surveillance)
quality assessment review at the			and Medicines, Technologies, and Pharmaceutical Services (antimicrobial
four IDDS sites in collaboration			stewardship). This visit aimed at improving AMR data sharing and use across
with NPHL and other AMR			the different interventions to enhance synergy and complement the ongoing
stakeholders			AMR interventions, including surveillance, infection prevention and control,
SURV-3.2: Prepare quarterly data		Not started	and antimicrobial stewardship.
quality reports for the four IDDS			In December, IDDS submitted quarterly reports for FY 2021 Q1–Q3 on
sites, based on routine AMR data			supportive supervision visits and data quality management at each of the
that are submitted from sites to the			four IDDS-supported sites to USAID Washington as a key deliverable.
national level			
SURV-3.3: Provide technical		Not started	
assistance on AMR data analysis,			
interpretation, management,			
presentation, and reporting to			
enable sentinel sites to develop			
facility-specific antibiograms for			
patient management			
SURV-3.4: Conduct quarterly data		Not started	
collection to track progress of			
AMR activities and facilitate			
quarterly reporting			
TZA-GHS-SURV-4: Support	IHR benchmark	In progress	IDDS initiated this activity by engaging relevant stakeholders (e.g., the Food
implementation of National AMR	3.2		and Agriculture Organization of the United Nations) and briefing them on
Surveillance Framework in animal			the project's intention to implement the National AMR Surveillance
health surveillance sites			Framework in animal health surveillance sites. The Food and Agriculture
SURV-4.1: Review veterinary AMR		In progress	Organization of the United Nations shared the Laboratory Capacity
surveillance sites listed in the NASF			Assessment for AMR Surveillance tool. IDDS will use this tool to conduct a
and identify one site for IDDS to			laboratory assessment at one veterinary AMR surveillance site in FY 2022
support			

Tanzania GHS	Tanzania GHS				
Activity	IHR benchmark	Status	Activity implementation updates		
SURV-4.2: Conduct assessment at one selected veterinary AMR surveillance site to establish laboratory and surveillance capacity, equipment and supply needs, current personnel capacity, and training needs		Not started	Q2. The assessment will establish laboratory and surveillance capacity, equipment and supply needs, personnel capacity, and training needs.		

Thailand GHS			
Activity	IHR benchmark	Status	Activity implementation updates
THA-GHS-NTW-I: Support the	IHR benchmark	Completed	With IDDS's technical and administrative support, the 14th
Regional Public Health Laboratories (RPHL) Network	7.1		videoconference was conducted on October 14. Nineteen participants (five male and fourteen female) attended, including the Regional Public Health
NTW-1.1: Provide technical and administrative support to the Regional Public Health Laboratory		Completed	Laboratories (RPHL) Network contact persons from Brunei Darussalam, Myanmar, Singapore, the Philippines, Nepal, and Thailand, as well as RPHL laboratory experts and key development partners, including the Food and
(RPHL) Network, including seconding a consultant to assist in			Agriculture Organization of the United Nations, the Ministry of Public Health-United States Centers for Disease Control and Prevention
coordination activities NTW-1.5: Provide technical support for implementation of the		Completed	Collaboration, the USAID Regional Development Mission for Asia, Integrated Quality Laboratory Services, the Department of Medical Science (DMSc), and IDDS. Dr. Archawin Rojanawiwat, Director of the Thai
RPHL Network operational plan NTW-1.6: Provide support for the regular maintenance and update of		Completed	National Institute of Health, delivered a technical session on "COVID-19 Laboratory Diagnosis in the Association of Southeast Asian Nations (ASEAN) Country" through a video clip (posted on www.therphl.net).
content shared through the website NTW-1.7: Support travel of 8 representatives from RPHL Network countries to attend the Regional Specimen Referral Transportation System Workshop (this activity was delayed from PYI work plan due to COVID-19)		Dropped	IDDS finalized the inventory of laboratory experts, and the RPHL secretariat and DMSc plan to upload the list to the RPHL website. IDDS successfully transferred the support for the RPHL website to the RPHL secretariat and the DMSc team. The RPHL secretariat and the D team have been updating and supporting RPHL website content since October 2021, including uploading the documents and video clips on the website. The RPHL secretariat distributed the survey questionnaire that IDDS developed in FY 2021. IDDS received feedback from 39 participants, including member and non-member representatives of the RPHL Netw IDDS prepared the summary of the survey and presented it during the RPHL annual meeting. The hybrid RPHL annual meeting was conducted December 7–8 at Grand CenterPoint Ploenchit in Bangkok. About 148 onsite and 99 virtual) (58 male and 90 female) attendees who registere through Google link attended. They included members, and non-member
NTW-1.8: Support travel of 8 representatives from RPHL Network countries to attend the Regional Waste Management Workshop (this activity was delayed from PY1 work plan due to COVID-19)		Dropped	
NTW-1.9: Support the RPHL Network to conduct table-top exercises among countries in the		Dropped	representatives from the Department of Disease Control, the Bureau of Laboratory Quality Standard, universities, regional medical science centers, the Emerging Infectious Diseases Clinical Center, the National Institute of

Thailand GHS			
Activity	IHR benchmark	Status	Activity implementation updates
region. The technical topics for the table-top exercise will be related to emergency preparedness response plans in the areas of laboratory and epidemiology. IDDS will provide technical assistance through the consultant and will provide logistical support for the meetings through the IDDS local team. NTW-I.II: Carry out data collection and M&E analysis, and highlight and describe the success story of the RPHL Network		Completed	Health in Thailand and other countries, and key partners. The event's program description was also uploaded on the RPHL website and DMSc Thailand Facebook page for wider visibility. The IDDS consultant finalized the transition plan from IDDS to the DMSc and RPHL secretariat. The IDDS consultant presented the plan to the director of the Thai National Institute of Health and the DMSc team at the handover meeting held on December 20. The RPHL secretariat and the DMSc IT team began to upload the content to the RPHL website with the support from Techfive, the website developer, and IDDS. There was a transition of the director and organization staff in the DMSc, and the DMSc requested IDDS to organize a re-training session on the key functions of the RPHL website maintenance. The re-training was conducted
NTW-1.12: Organize consultative meeting(s)/workshop(s) to develop the RPHL transition plan after IDDS support ends in 2021		Completed	on November 15 and December 21 to train the DMSc IT staff on uploading the documents onto the website, transferring the site to become part of the DMSc website, and creating data accessibility control.
NTW-1.13: Organize the IT training for at least 2 IT staff from the DMSc		Completed	

Uganda GHS			
Activity	IHR benchmark	Status	Activity implementation updates
UGA-GHS-NTW-4: Improve quality	Benchmark 7.1	In progress	No activities were implemented during this quarter. After receiving FY
management systems for priority		6. 20.	2022 work plan approval confirmation on October 26, 2021, an exemption
zoonotic diseases in four (Gulu, Mbale,			allowance memo/waiver was submitted to the USAID Mission in Uganda on
Mbarara, and Moroto) supported			November 16, 2021, and it was approved on December 15, 2021.
Regional Animal Disease Diagnostics			то на при
and Epidemiology Centers (RADDECs)			
NTW-4.1: Conduct a third on-site	-	In progress	
mentorship as per the established			
mentorship cycle guidance in the			
mentorship tool kit to strengthen			
laboratory systems in line with ISO			
17025:2017 at the four IDDS-			
supported RADDECs (Gulu, Mbale,			
Mbarara, and Moroto). The third			
cycle will focus on resource			
requirements 6.1-6.6 and a follow			
up on the process improvement			
plans from the second mentorship			
cycle (which was conducted in			
FY2I)			
NTW-4.2: Hold workshops with		Not started	
key stakeholders to review quality			
management documents (e.g.,			
relevant SOPs, Quality Manual,			
Laboratory Handbook and			
Biosafety Manual) and align content			
with ISO 17025:2017	_		
NTW-4.3: Hold a training on		Not started	
Biosafety and Biorisk management			
for national and regional laboratory			
staff based on the new ISO			
15190:2020 and ISO 35001:2019			

Uganda GHS			
A -41.14	IHR benchmark	Chahara	
Activity NTW-4.4: Hold a training on	ink benchmark	Status Not started	Activity implementation updates
auditing management systems based		Not started	
on ISO 19011:2018 for national			
laboratory staff			
NTW-4.5: Conduct a fourth on-site		Not started	
mentorship as detailed in the		Not started	
mentorship as detailed in the mentorship tool kit to strengthen			
laboratory systems in line with the			
ISO 17025:2017 at the four IDDS-			
supported RADDECs (Gulu, Mbale, Mbarara, and Moroto). This cycle of			
mentorship will focus on process			
requirements 7.1–7.10 and follow			
up on the process improvement			
plans from the third cycle of			
mentorship (conducted under			
NTW-4.1).			
NTW-4.6: Hold training on		Not started	
corrective action, preventive action		Not started	
(CAPA), and handling			
nonconformities based on ISO			
17025:2017			
NTW-4.7: Train 15 to 20	-	Not started	
participants from the national and			
regional laboratories in statistical			
process control, including			
uncertainty of measurement and			
method and equipment verification			
and validation			
NTW-4.8: Hold a virtual training on	1	Not started	
annual management review for the			
four IDDS-supported RADDEC			

Uganda GHS			
Activity	IHR benchmark	Status	Activity implementation updates
NTW-4.9: Support an internal audit		Not started	
at each of the four supported			
RADDECs (Gulu, Mbale, Mbarara,			
and Moroto) using South African			
National Accreditation System			
(SANAS) audit tools and the			
auditors trained under NTW-4.4	D 1 1 1 1		IDDC
UGA-GHS-SURV-5: Operationalize	Benchmark 4.1	In progress	IDDS anticipates providing sensitization to the district leadership and
coordinated surveillance and reporting			officials from the animal, human, and environment sectors on the One
as outlined in the Uganda One Health			Health integrated surveillance and reporting strategy in FY 2022 Q2.
Strategic Plan 2018 – 2022 at two selected districts			
	-	1	
SURV-5.1: Support the National One Health Platform (NOHP) to		In progress	
provide sensitization on the			
integrated OH surveillance and			
reporting, operationalizing this			
strategy in two locations			
UGA-GHS-SURV-6: Improve	Benchmark 9.3	In progress	No update.
surveillance and data analysis of priority	Deficilitian K 7.5	in progress	No update.
zoonotic diseases in the animal health			
sector at four selected district sites			
SURV-6.1: Install the new electronic		In progress	
data entry and analysis database			
tool in selected districts and train			
the district staff			
SURV-6.2: Pilot new data entry and		Not started	
analysis database tool in four			
selected districts			
SURV-6.3: Review and update the		Not started	
electronic system based on			

Uganda GHS			
Activity	IHR benchmark	Status	Activity implementation updates
feedback and observations from pilot			
SURV-6.4: Support Trainer of Trainers (TOT) on data analysis and use at the national level		Not started	
SURV-6.5: Support the training of veterinary staff from the four selected districts on data analysis, routine data quality assessment, and use		Not started	
SURV-6.6: Conduct geo-spatial mapping of GHS partner support in IDDS-supported regions		Not started	
SURV-6.7: Hold first data review meetings at national level		Not started	
SURV-6.8: Hold data review meetings at four districts		Not started	

Vietnam GHS			
Activity	IHR benchmark	Status	Activity implementation updates
VNM-GHS-NTW-I: Strengthen the	Benchmark 7.2	In progress	IDDS completed procurement of the materials and tools necessary for
Human Specimen Referral System (SRS)			piloting the human health specimen referral system (SRS). These include
NTW-1.6: Develop human health		Completed	barcode printers, scanners, and thermometers. SRS key chain cards are in
SRS pilot plans in three provinces		·	production and will be ready to use for the implementation of the SRS pilo
and prepare tools and materials for			in FY 2022 Q2. A training video clip on specimen packaging and transport
implementation and monitoring			was produced, and a video clip on handling of specimen spilling and leakage
NTW-1.7: Initiate the		Completed	during transport will be finalized in early February 2022.
implementation of the human		·	IDDS worked with regional public health institutes to develop or update 16
health SRS pilot plans in three			standard operating procedures (SOPs) needed for the human and animal
provinces			SRS pilot. Accompanying forms for each SOP are currently under revision.
NTW-1.8: Continue implementing		In progress	IDDS continued discussions with courier companies, including Vietnam Pos
the pilot human SRS in the three			and Viettel Post, for developing specialized specimen transport services.
pilot provinces (Binh Dinh, Dong			There is no company in Vietnam currently providing the specialized service
Thap, and Thai Nguyen), monitor			for specimen transport.
and provide technical assistance to			IDDS collaborated with the National Institute of Hygiene and Epidemiology
the sites			to develop a preliminary specimen information management system to
NTW-1.9: Develop the advocacy		Not started	support the implementation of the SRS pilot for the health sector in three
roadmap with key stakeholders of			provinces. As a follow-up to the development process, IDDS provided 4
the Government of Vietnam (GVN)			training courses on using the system for the SRS pilot, training a total of 73
on Social Health Insurance (SHI)			participants from human and animal health sectors. This preliminary system
coverage of specimen referral costs			is currently being tested in Binh Dinh and Thai Nguyen provinces to obtain
in the human health curative sector			feedback in January and February 2022. After that, IDDS will revise and
NTW-1.10: Evaluate the pilot		Not started	adjust the system to ensure that each province has the most effective tool
human SRS, including technical			for the SRS pilot.
performance measures, operational			In November and December, IDDS conducted SRS meetings with
costs, and potential to reduce costs			participants from the Pasteur Institute of Nha Trang and the Provincial
per specimen referred once scaled			Centers for Disease Control of Binh Dinh and Thai Nguyen provinces to
up			discuss plans for using an SRS information management system in these two
NTW-1.11: Refine the human SRS		Not started	provinces.
based on results from the pilot and			IDDS's work in FY 2022 Q2 will include the following: (1) conducting
make recommendations for scale-			similar meetings and training in Dong Thap province (same as in Binh Dinh
			and Thai Nguyen provinces as described above) to implement the SRS pilot
			with support from the Pasteur Institute of Ho Chi Minh City; (2) finalizing a

Activity	IHR benchmark	Status	Activity implementation updates
up/application of the system to additional provinces/sites			specialized transport service contract with a selected courier company to support the SRS pilot; and (3) providing trainings on SRS SOPs for local health staff and courier staff who will be involved in the pilot.
VNM-GHS-NTW-2. Strengthen the Animal SRS	Benchmark 7.2	In progress	Updates for NTW-2 (animal health sector) are similar to those for activity NTW-I provided above (human health sector) because the SRS pilots in
NTW-2.5: Develop the animal health SRS pilot plans in three provinces and prepare tools and materials for implementation and monitoring		Completed	the human health and animal health sectors are analogous (i.e., similar activities are conducted in each sector, but separate and independent SRS are being set up because the stakeholders and managing agencies are different). The only notable difference is that the key stakeholders in the animal health sector are provincial Sub-Departments of Animal Health
NTW-2.6: Initiate the implementation of the animal health SRS pilot plans in three provinces		Completed	(SDAHs) and Regional Animal Health Offices (RAHOs).
NTW-2.7: Continue implementing the pilot animal SRS in the three pilot provinces (Binh Dinh, Dong Thap, and Thai Nguyen), monitor, and provide technical assistance to the sites		In progress	
NTW-2.8: Evaluate the pilot animal SRS on various aspects, including technical performance measures, operation costs, and potential to reduce costs per specimen referred once scaled up		Not started	
NTW-2.9: Refine the animal SRS based on results from the pilot and make recommendations for scale-up/application of the system to additional provinces/sites		Not started	

Vietnam GHS				
Activity	IHR benchmark	Status	Activity implementation updates	
VNM-GHS-SURV-I: Increase use of Vietnam Animal Health Information System (VAHIS)	Benchmark 9.2	In progress	In November, IDDS collaborated with RAHOs to organize five virtual bimonthly meetings with SDAHs of pilot provinces (Thai Nguyen, Binh Dinh, Khanh Hoa, Can Tho, and Dong Thap) to operationalize the pilot	
SURV-1.7: Operationalize the pilot VAHIS use enhancement plan developed in FY21 in the five provinces (Binh Dinh, Can Tho, Dong Thap, Khanh Hoa, and Thai Nguyen)		In progress	Vietnam Animal Health Information System (VAHIS) use enhancement plan. During these meetings, participants reviewed VAHIS reporting by SDAH staff and discussed challenges and solutions. IDDS provided technical support to correct the errors of SDAH staff on VAHIS data entry and export. In the bimonthly meetings, participants also discussed a general plan to extend VAHIS use to the district level. In addition, IDDS worked closely	
SURV-1.8: Assist RAHOs and provincial SDAHs to conduct quarterly data reviews and propose solutions to improve VAHIS reporting timeliness, completeness, and accuracy		In progress	with Department of Animal Health, RAHOs, provincial SDAHs, and the Food and Agriculture Organization of the United Nations to improve VAHIS, based on feedback obtained from provincial SDAH users. IDDS collaborated with the Department of Animal Health to organize an online training course on the use of the upgraded version of VAHIS on November 18. Seven RAHO surveillance and data management staff and 20	
SURV-1.9: Evaluate and refine the model for strengthening VAHIS use at regional, provincial, and lower levels		Not started	SDAH surveillance and data management staff attended the training. Through the training, VAHIS users at regional and provincial levels gained proficiency in data entry and export from VAHIS. Based on results of the training course, RAHOs extended this virtual training to other province their respective regions in December. At the end of December, IDDS organized three VAHIS data quarterly review meetings with focal points at provincial, regional, and central level in the meetings, participants reviewed the animal disease data reported VAHIS; timeliness, completeness, and accuracy of the data; and discusse improvement solutions. The meetings were organized for project proving in each region with the participation of representatives from other RAH to share experiences and exchange lessons learned between regions. IDDS's work in FY 2022 Q2 will include the following (1) supporting provincial and regional animal health agencies to improve VAHIS report timeliness, completeness, and accuracy; and (2) supporting the operationalization of the pilot VAHIS use enhancement plan in the five provinces.	

Vietnam GHS				
Activity	IHR benchmark	Status	Activity implementation updates	
VNM-GHS-SURV 3: Support event- based surveillance (EBS) using One- Health approaches	Benchmark 4.1	In progress	IDDS continued to provide virtual support and coaching to provincial and district surveillance staff on recording and classifications of event-based surveillance (EBS) signals to improve accuracy and coverage of EBS	
SURV-3.6: Monitor and provide technical assistance to the two existing pilot provinces (Dong Thap and Thai Nguyen), including online support/coaching and on-site supportive supervision. SURV-3.7: Coordinate with relevant human and animal health agencies to conduct quarterly data		In progress In progress	reporting. Quarterly data review meetings for QI were delayed due to the COVID-19 pandemic and have been rescheduled to late January 2022. In FY 2022 Q2, IDDS will continue to provide virtual support and coaching to provincial and district surveillance staff on recording and classifications of EBS signals. IDDS will also organize quarterly data review meetings with Dong Thap and Thai Nguyen provinces in late January Evaluation and refinement of the IDDS-supported EBS approach is planned to start in FY 2022 Q3.	
reviews SURV-3.8: Evaluate and refine the approach and materials and develop a transition plan to phase out this activity		Not started		

Tuberculosis Activity Implementation Progress

Core TB		
Activity	Status	Activity implementation updates
CTB-NTW-1: TB-NET tool Revisions and Translation		The TB-NET tool has been updated to Airtable, a cloud-based database platform, instead of separate Excel sheets. This system will preserve data quality and allow IDDS to add new questions without losing the integrity of past questions, while ensuring version control. In
NTW-1.1: Adapt existing training materials to account for remote application and verification visits	Completed	addition, the Airtable database will feed into the existing mobile app for the TB Diagnostic Network Assessment (DNA) with the most updated questions. IDDS adapted the TB-NET tool and developed a checklist to assess the capacity and availability
NTW-1.2: Develop quality control component for Remote TB DNA	Not started	of testing for drug-resistant (DR)-TB and drug susceptibility. The current checklists focus on bacteriological confirmation and rapid molecular diagnostics. Assessing DR-TB capacity will
NTW-1.3: Update the TB Net Tool to incorporate pediatric specific checklist	Completed	expand the application of the DNA and incorporate more of the network into the assessment. The checklist was sent to USAID for review in December. The checklist will be piloted in Ethiopia in February 2022.
NTW-1.4: Adapt TB Net Tool to include more information on DR-TB	In progress	
NTW-1.5: Implement an electronic version of the TB NET Tool	Completed	
CTB-NTW-2: Conduct the TB DNA		IDDS presented two laboratory diagnostic network spatial analyses to the national TB programs and other stakeholders for Kenya on November 2 and for the Democratic Republic of Congo
NTW-2.1: Conduct laboratory diagnostic network analyses in USAID Priority Countries	In progress	(DRC) on November 24. Another laboratory diagnostic network spatial analysis was presented to USAID Washington and to the Mission in Zambia on December 21. IDDS will present final results to the National TB Program (NTP) and other stakeholders in FY 2022 Q2. The spatial
NTW-2.2: Expand the LNA tool to incorporate second-line DST	Not started	analysis results for Kenya and DRC have been used by the respective NTPs to inform placements of the Truenat rapid molecular testing instruments.

Core TB		
Activity	Status	Activity implementation updates
NTW-2.3: Expand, update, and verify the roster of consultants able to implement DNAs	In progress	IDDS started data collection activities for Ethiopia and Malawi. The IDDS team has requested master facility lists for health centers, GeneXpert inventories, and routine TB programmatic data on diagnostic testing and results.
NTW-2.4: Conduct DNAs	In progress	In FY 2022 Q2, IDDS will develop questions and strategies and identify data sources to expand the Laboratory Network Analysis to include second-line drug susceptibility testing (DST).
NTW-2.5: Track status of laboratory network analyses and DNAs for all USAID priority countries	In progress	IDDS supported planning for the TB-DNA in Ethiopia scheduled for February 2022. IDDS provided technical guidance to the country team and participated in weekly planning meetings
CTB-NTW-3: TB Diagnostic New Tools Implementation		IDDS and the Stop TB Partnership completed delivery of Truenat instruments to Zimbabwe and Nigeria. A total of 20 Truenat Duo instruments were delivered to Zimbabwe, and 38 were delivered to Nigeria. In addition, IDDS financed and facilitated centralized Truenat training for
NTW-3.1: Develop curriculum and training materials for Truenat introduction	In progress	22 participants in Zimbabwe (15 men and 7 women) and 39 (28 men and 11 women) in Nigeria. Participants included lab managers, NTP representatives, and other decision makers involved with modifying the TB diagnostic algorithm and operational planning moving forward.
NTW-3.2: Introduce Truenat in iNTP and non-iNTP countries	In progress	IDDS supported ultra-portable X-ray/computer-aided detection (CAD) device procurement for increased access to digital X-ray to diagnose TB in rural settings in which access has been
NTW-3.3: Introduce / Scale-up diagnostic connectivity solutions	In progress	limited. IDDS also supported a centralized training of trainers on the use of ultra-portable X-ray/CAD in Nigeria in November, which included 37 radiographers and technical staff, in partnership with the Stop TB Partnership, Institute of Human Virology, Nigeria (IHVN), and Koninklijke Nederlandse Chemische Vereniging (KNCV).
		IDDS collaborated with the Stop TB Partnership for revision and translation of training modules and facilitator guides for X-ray/CAD and Truenat implementation. In addition, IDDS helped adapt the training materials for the Zimbabwe and Nigeria context.
		IDDS added external quality assessment (EQA), warranty information, and biosafety training slides to further improve the Truenat implementation training modules.

Core TB		
Activity	Status	Activity implementation updates
		IDDS contracted with SmartSpot, a long-established <i>Mycobacterium tuberculosis</i> EQA provider in Africa, to provide validated dry culture spot panels for Truenat sites. A total of 263 sites in 8 countries (Bangladesh, Cambodia, DRC, Kenya, the Philippines, Uganda, Vietnam, and Zimbabwe) will receive 3 cycles of EQA in FY 2022. These panels will provide an early assessment of the effectiveness of the implementation and identify weaknesses in the test system, which will help direct additional technical support resources to low-scoring sites.
CTB-NTW-4: Introduce Stool-Based Diagnosis Using WRDs for Children		IDDS is collaborating with the KNCV Tuberculosis Foundation to provide training to countries that are implementing stool-based GeneXpert testing for detection of pediatric TB using the
NTW-4.1: Build IDDS capacity to support pediatric TB detection	In progress	simple one-step method. IDDS signed an agreement with KNCV to offer training in Bangladesh, Burma, DRC, Malawi, Ukraine, and Vietnam. The first of these trainings is expected to take place in DRC in FY 2022 Q2.
NTW-4.2: Expand access and use of simple-one step specimen processing protocol	In progress	In DRC, IDDS shared the protocol for implementing the simple one-step stool method w national stakeholders and experts before submission to the ethics committee. IDDS trans the protocol into French to facilitate review and localization by the NTRL. Also, in collaboration the NTP, IDDS drafted implementation timelines and training plans. In FY 2022 Q2, I will train 12 laboratory technicians from 7 GeneXpert sites in Kinshasa. The trained technical conduct stool testing for children with presumptive TB at the respective sites.
NTW-4.3: Expand use of community and home-based stool specimen collection	Not started	
CTB-NTW-5: Mono-Isoniazid and Second-line Drug Resistance Testing Strengthened in USAID Priority	In progress	IDDS received contingent approval for the DR-TB Addendum Work Plan in December. DR-TB activities will target six countries: Cambodia, Malawi, Mozambique, Pakistan, Uganda, and Ukraine.
Countries		IDDS hired and on-boarded two DR TB advisors for Asia and Africa to support DR-TB
NTW-5.0: Preparation and Management of DST	In progress	activities in the six selected countries.
NTW-5.1: Increased number of patients with confirmed rifampicin	In progress	

Core TB		
Activity	Status	Activity implementation updates
resistance receiving fluoroquinolone resistance testing		
NTW-5.2: Increased number of patients with drug susceptibility testing for isoniazid	In progress	
NTW-5.3: Increased capacity for susceptibility testing for new and repurposed drugs	In progress	
NTW-5.4: Health care providers follow DST algorithms reflective of WHO guidance	In progress	
NTW-5.5: DST quality and timeliness improved	In progress	
NTW-5.6: Evaluations and Recommendations	In progress	
CTB-NTW-6: Share Relevant Information to a Wide-ranging Audience	In progress	Four IDDS country teams from India, Bangladesh, Vietnam, and Zimbabwe presented five posters at the 52nd Annual Union World Conference on Lung Health held in October. Poster titles included: "Expenditure incurred by households for TB diagnostic services during hospitalisation in India," "Impact of the Covid-19 pandemic on TB notification rates in high-burden states in India,"
NTW-6.1: Document best practices, guidance, and models	In progress	"Impact of the Covid-19 pandemic on TB case detection using GeneXpert, Dhaka, Bangladesh," "Childhood TB case detection by culturing samples submitted for Xpert testing at the National TB Reference Laboratory Zimbabwe, January 2018—December 2020," and "Community-based stool specimen collection, storage and transport to improve TB diagnosis in children."
		IDDS organized a satellite session at the 52nd Annual Union World Conference on Lung Health, entitled "Infectious Diseases Detection and Surveillance (USAID-IDDS) resilience

Core TB				
Activity	Status	Activity implementation updates		
		strategies to mitigate Covid-19," with participation by IDDS teams from Bangladesh, India, Tanzania, and Zimbabwe. In December, IDDS participated in an episode of the TB People (of the Philippines) Internet radio program. IDDS presented on DR-TB and the potential of the Truenat instruments for TB testing in the Philippines and highlighted the role of IDDS in the Introducing New Tools Project. As of December, I0 TB research protocols were under development in 6 of 8 IDDS TB countries. India had two protocols cleared by the ICF Institutional Review Board (Truprep DNA pilot and root cause analysis of indeterminate/invalid Truenat results), and Zimbabwe had one protocol cleared (Analysis of Truenat ultra trace calls). The ethical review of these protocols at the country level is underway. In addition, IDDS initiated a study (Bacc-study) to investigate the root causes of the stagnation of the detection of bacteriologically confirmed TB cases and the impact of systematic use of rapid diagnostic tests on this indicator. The concept note for this research was finalized, and the study is anticipated to be implemented in five countries (DRC, Tanzania, Zimbabwe, India, and Vietnam). In FY 2022 Q2, IDDS will engage with targeted countries for buy-in. Thereafter, the concept will be developed into a full research protocol, submitted to respective Institutional Review Boards. Data collection is expected to start in Q3.		
NTW-6.2: Convene a TB technical working group across the project and the consortium	In progress	IDDS formed a subject matter expert (SME) working group with consortium partners and NTPs to develop Country Action Plans (CAP) for NTW 5 to guide activities and strengthen TB drug susceptibility testing (DST) in the six countries. The working group met several times to review country context for expanded DST and offer cross-cutting expertise for CAP development for all countries. The six CAPs will be completed in FY22 Q2.		

Bangladesh TB	Bangladesh TB				
Activity	Status	Activity implementation updates			
BGD-TB-NTW-I: A comprehensive TB diagnostic network with strong underlying health systems	In progress	The TB Diagnostic Network Assessment was postponed because the National Tuberculosis Program (NTP) is prioritizing the COVID-19 response until the pandemic situation improves.			
NTW-1.1: Continue to support the NTRL and NTP to finalize and operationalize a functional national TB laboratory network, regional and peripheral TB (GX) laboratory facilities according to the developed Terms of Reference (TORs)	In progress	IDDS addressed comments from the Global Fund on the draft TB Laboratory Strategic Plan (LSP) and resubmitted the LSP to the NTP. Per the NTP's request, IDDS will organize a two-day costing workshop for LSP implementation, to take place in January 2022. IDDS submitted the revised algorithm for GeneXpert as an initial test for TB to the NTP, and the NTP incorporated the algorithm into the National Guidelines and Operational Manual for TB.			
NTW-I.2: Support the further review, update, and correct use of the diagnostic algorithm to improve accurate and timely bacteriological confirmation and reporting of TB NTW-I.3: Enable functional TB diagnostic equipment	Completed In progress	IDDS conducted onsite training on preventive maintenance of TB equipment for Shyamoli TB Hospital on December 12–13 and for the Rajshahi Regional TB Reference Laboratory (RTRL) on December 29–30. A total of 19 laboratory st from Shyamoli Hospital and 10 from Rajshahi RTRL, and 3 of whom were femal participated in the training. In FY 2022 Q2 a similar training will be held at the Chattogram RTRL.			
BGD-TB-NTW-2: Strengthened capacity of the national, regional, and peripheral GeneXpert (GX) TB laboratories	In progress	IDDS organized a National TB Laboratory Working Group meeting with the NTP on December 22, discussed activities planned for strengthening the laboratory network, and rescheduled implementation of activities as per Laboratory Working Group recommendations.			
NTW-2.1: Enhance NTRL capacity to serve as the lead institution of the TB diagnostic network	In progress	IDDS organized a 3-day line probe assay (LPA) training at the Shyamoli TB Hospital RTRL from October 4 to 6, for 13 microbiologists (7 female) from the National TB Reference Laboratory (NTRL) and 5 RTRLs. Also at the Shyamoli TB Hospital RTRL,			
NTW-2.2: Continue to strengthen the Sylhet and Rajshahi RTRLs and the Shyamoli TB Hospital and expand support to the Khulna and Chattogram RTRLs to expand TB diagnostic services at those facilities	In progress	IDDS organized a two-day training in November on processing and testing specimens for extrapulmonary tuberculosis (EPTB) and childhood TB for seven microbiologists and eight medical technologists (6 female) from the NTRL and the Shyamoli TB Hospital RTRL. IDDS selected an engineer for assistance in specifications development and monitoring of refurbishment work planned for Sylhet, Rajshahi, Chattogram, and			

Bangladesh TB		
Activity	Status	Activity implementation updates
NTW-2.3: Propose and get buy-in to transition the NTRL testing activities to a more suitable space	In progress	other laboratories at the district level as selected in discussion with the NTP. The agreement with the engineer is expected to be signed by the first week of January 2022.
NTW-2.4: Develop an e-learning platform for TB laboratory capacity building	In progress	IDDS completed evaluation of quotations for the procurement of falcon tubes, refurbishment of the Sylhet RTRL training room and external quality assurance (EQA) room, and local procurement of laboratory equipment and consumables for
NTW-2.5: Strengthen laboratory capacity for testing Extrapulmonary TB (EPTB) and childhood TB at Rajshahi, Sylhet, Khulna, Chattogram RTRLs,	In progress	Shyamoli and Rajshahi RTRLs. In FY 2022 Q2, IDDS will complete procurement of falcon tubes and refurbishment works for Sylhet RTRL. IDDS will also develop specifications and selection of bidders to complete refurbishment of Shyamoli and Rajshahi RTRL.
Shyamoli TB Hospital, and Rangpur (selected laboratory)		IDDS provided technical assistance to start the process of partial transition of the LPA and liquid culture testing from the NTRL to the Shyamoli RTRL for multidrug-
NTW-2.6: Strengthen and expand the specimen referral network for increased access to culture/DST and LPA	In progress	resistant TB patients being treated at the Shyamoli TB Hospital. This transition would require no referral of specimens or patients to the NTRL for testing. IDDS also provided technical support that enabled the newly established Rajshahi RTRL t perform LPA and liquid culture testing for all patients from Rajshahi and Rangpur divisions, which contributed to the elimination of referral needs for these tests. IDDS developed standard operating procedures (SOPs) for EPTB and LPA and training materials on EPTB and stool processing, which are currently in the internal review process.
		IDDS developed a report with an analysis of LPA test results for Sylhet RTRL and circulated it with IDDS experts for review and feedback.
		Development of the quality management system (QMS) training materials by IDDS in progress. In FY2022 Q2, IDDS will conduct QMS training at two laboratories to be identified in discussion with NTP.
		IDDS revised training materials for biosafety and biosecurity, which will be offered an online course. Training materials are currently being reviewed internally. A web outline for the training course has been developed. In FY22 Q2, IDDS will hire a local IT company to complete development of Software Requirement Specifications

Bangladesh TB	Bangladesh TB				
Activity	Status	Activity implementation updates			
		and host the online biosafety and biosecurity training for laboratory staff through NTP's website.			
		IDDS has completed procurement of ph meters, sterile surgical blades, forceps, and petri dish, chlorine tablets, and supplied these materials to NTP to support specimen processing of Extra-pulmonary TB specimens.			
		IDDS and NTP staff jointly visited a laboratory in Mymensingh on November 16-17 to assess the facility condition for upgrading it to Biosafety Level-2+. Findings from this assessment have been shared with NTP and the Damien Foundation to plan renovation works for upgrading the facility.			
		IDDS' M&E Specialist along with the NTP M&E expert and Training Coordinator conducted a joint visit to three sub-district hospitals and TB laboratories on December 27-28, to monitor and supervise TB data collection and reporting.			
BGD-TB-NTW-3: Functional network of TB laboratories using molecular	In progress	IDDS submitted the GeneXpert Assessment Report and Database for Khulna and Chattogram divisions to USAID.			
NTW-3.1: Implement a package of comprehensive and linked interventions enabling functional GX sites at the national and subnational levels and connecting the sites with regional reference laboratories	In progress	IDDS is reviewing paperwork for a subcontracting arrangement with two local nongovernmental associations (NGOs)—the Bangladesh Rural Advancement Committee and the Damien Foundation, which maintain a large network of GeneXpert laboratories, to improve the functionality and use of GeneXpert. These two NGOs will be IDDS' implementing partners in this activity to provide technical assistance to laboratories on GeneXpert IDDS proposed to the NTP to replicate the GeneXpert EQA model that was implemented in Vietnam. The NTP has not yet confirmed its decision to go with this			
NTW-3.2: Continue to support improving access and utilization of GX	In progress	EQA model.			

Bangladesh TB	Bangladesh TB			
Activity	Status	Activity implementation updates		
NTW-3.3: Develop an External Quality Assurance (EQA) program for rapid diagnostic tests	In progress	IDDS Diagnostic Specialists placed at the Sylhet RTRL conducted two joint visits with NTP staff on November 11 and December 27 to monitor performance of GeneXpert in four sites. IDDS's work in FY 2022 Q2 will include the following: (1) finalizing the subcontract		
NTW-3.4: Support installation and functioning of GX for bidirectional testing of TB and COVID-19 among TB presumptive cases and patients	Not started	arrangements with the Bangladesh Rural Advancement Committee and the Damier Foundation, (2) providing technical assistance for the training of medical technologists on GeneXpert operation and maintenance, and (3) organizing a meeting with the Bangladesh NTP and the Vietnam NTP to discuss EQA technical and implementation modalities. IDDS finalized the Truenat implementation plan. IDDS also updated and shared the Truenat SOP with the NTP for feedback. IDDS also completed adaptation of Truenat training materials. In addition, IDDS developed the relevant tools for		
BGD-TB-NTW-4: Piloting of new technologies and tools to improve TB diagnosis	In progress			
NTW-4.1 Pilot Truenat, a new diagnostic tool, to improve access for rapid detection of TB and rifampicin-resistant TB	In progress	recording and reporting Truenat data and several job aids. IDDS's work in FY 2022 Q2 will include the following: (I) organizing a workshop with the NTP and partners to finalize the Truenat training materials and SOP; (2) updating the GX/XDR implementation plan; (3) organizing a training of trainers for Truenat in collaboration with the NTP, NGO partners, and the local agent of the Truenat manufacturer (Molbio); (4) organizing basic training on Truenat for the medical technologists who will be responsible for Truenat implementation and testing, in collaboration with the NTP and NGO partners; and (5) coordinating we FHI 360 HQ on the procurement of four GX/XDR equipment and cartridges through core TB funds.		
NTW-4.2: Pilot of Xpert/MTB/XDR to assess its operation and efficiency for detection of Ist and 2nd line resistance	In progress			

Burma TB		
Activity	Status	Activity implementation updates
BMA-TB-NTW-I Strengthen the TB diagnostic network framework and systems	In progress	IDDS collaborated with stakeholders, USAID, the World Health Organization, and the Global Fund in the TB Diagnostic Network Assessment process. IDDS and the TB Diagnostic Network Assessment consultants finished cleaning the data collected in previous quarters and initiated the spatial analysis. They also conducted a discussion session with USAID using the outputs of the preliminary spatial analysis to give USAID a better understanding of the available data and expected results. In FY 2022 Q2, IDDS will conduct a scenario analysis to identify potential GeneXpert expansion sites in which new GeneXpert machines should be installed for better diagnostic network and coverage accessibility. IDDS will share and discuss the results with more partners to synthesize meaningful recommendations for priority diagnostic network expansion. IDDS drafted the costed plan with a scope and design for an electronic laboratory information management system (LIMS) which is suitable to deploy at the National TB Reference Laborator (NTRL) and two other biosafety level 3 laboratories. The electronic LIMS is intended to improve access to diagnostic testing and accurate, timely information for patient care, public health planning, and policy decisions. In FY 2022 Q2, after the coordination consultant is recruited, IDDS will finalize the costed plan and continue providing technical assistance to develop the LIMS system.
NTW-1.2: Conduct a comprehensive TB diagnostic network assessment (DNA) and spatial analysis on the distribution and functionality of TB diagnostic.	In progress	
NTW-1.3: Introduce a simplified laboratory information management system (LIMS) to strengthen the electronic results reporting	Not started	
BMA-TB-NTW-2 Increase access to quality TB diagnostic services	In progress	IDDS submitted an updated TB diagnosis algorithm for drug-resistant (DR) TB to include in the national DR-TB management guidelines as a FY 2021 key deliverable to USAID in October. This
NTW-2.1: Support implementation of updated TB diagnostic algorithms	In progress	new algorithm will ensure accessibility to molecular World Health Organization-recommended diagnostics in line with international standards.
NTW-2.2: Strengthen the TB specimen referral and transport system in the private and the public sector	In progress	IDDS reviewed and revised the laboratory request form for extensively drug-resistant (XDR TB testing to ensure linkage of diagnosis services in the LIMS. Due to a disrupted coordinating mechanism at the National TB Program, IDDS could not continue to provide technical assistance in strengthening the Xpert Mycobacterium tuberculos (MTB)/XDR diagnosis capacity and follow-up technical support for implementing the updated DR-TB diagnosis algorithm in Burma. In FY 2022 Q2, IDDS will seek opportunities to provid technical assistance through the newly recruited coordination consultant.
NTW-2.3: Increase access to quality CXR	In progress	

Burma TB		
Activity	Status	Activity implementation updates
NTW-2.4: - Strengthen the access to GX as an initial diagnostic test for TB	In progress	IDDS explored further collaborations with the non-profit and profit private sector to roll out an innovative approach by developing a mobile application and a web-based system for strengthening the specimen transport and referral system (SRS) in the community. The mobile
NTW-2.6: Pilot use of stool specimens for TB diagnosis in children using GX Ultra	Not started	application will provide patients with better and equitable access to sputum microscopy by enabling them to access specimen transportation services through social media or a hotline or web application through their mobile phone. This initiative will complement the existing sputum
NTW-2.7: Pilot Truenat to expand access to rapid TB diagnostics	In progress	transport system to overcome the physical and social barriers posed by security concerns during COVID-19 pandemic and political crisis. In FY 2022 Q2, IDDS will recruit an information technology consultant, who will design the software architecture of the SRS mobile application and web-based system. IDDS will also focus on collaboration with more implementing partners to increase the use of this innovative SRS initiative. The SRS system is expected to be launched in FY 2022 Q3. IDDS developed the draft implementation plan for the SRS application to identify patient pathways and technology integration to the existing sputum referral system. IDDS continued collaboration with the USAID-funded Local Action To TB-free Myanmar project to define pilot areas and implementation strategies. IDDS conducted two virtual sessions of the "TB Chest X-ray (CXR) Taking Procedures Training" for 39 participants (10 female) from nongovernmental organizations, international nongovernmental organizations, and private hospitals, including X-ray technicians and medical doctors, during October and November. IDDS submitted the training report with comprehensive findings and recommendations as a deliverable. IDDS prepared videos for chest X-ray taking procedures as training materials. In FY 2022 Q2, these videos will be released afte final review. To improve access to GeneXpert diagnosis in the private sector, IDDS started the procurement process for GeneXpert machines and Xpert MTB/rifampicin cartridges. In FY 2022 Q2, IDDS will hold a consultative meeting with nongovernmental organization laboratory supervisors and assess the performance of international nongovernmental organization GeneXpert sites through the collection of performance indicators. Based on the results and recommendations, IDDS will conduct refresher trainings as necessary. IDDS collected global and local TB diagnostic guidelines, standard operating procedures (SOPs) and training materials (e.g., video clips) to include as technical content in an e-learning platform
NTW-2.8: Increase continuous medical education opportunities for TB diagnostic professionals	In progress	

Burma TB		
Activity	Status	Activity implementation updates
		In FY 2022 Q2, IDDS will hold a consultative meeting with the World Health Organization to discuss learning strategies. After identifying approaches and content, IDDS will work with an information technology company on the development of an e-learning platform.
BMA-TB-NTW-3 Improve TB and MDR-TB case detection at TB diagnostic facilities	In progress	IDDS reviewed the "SOP on the preparation of first- and second-line drugs stock solutions" and identified the areas to update. In FY 2022 Q2, if coordination with NTRL can be resumed, IDDS will ask the NTRL to update the SOP.
NTW-3.1: Build diagnostic capacity of technical staff to perform quality-assured culture, genotypic and phenotypic drug-susceptibility testing (DST), including line probe assay (LPA)	In progress	The NTRL requested IDDS to revise the "SOP for second-line DST with automated BACTEC Mycobacteria Growth Indicator Tube (MGIT) 960 culture system" to include two new drugs (delaminid and pretomanid). The revisions were completed in November. With the objective to assess performance characteristics of Xpert MTB/XDR assay for second-line drug resistance detection, IDDS developed the "SOP for laboratory validation of Xpert MTB/XDR assay for detection of TB second-line drug resistance" in November. IDDS submitted the infection control chapter for subnational facilities in the national guideline on infection control as a FY 2021 key deliverable in October. This new chapter provides guidance to TB laboratory staff and managers working in public health laboratories, TB hospitals, and private clinics. It will serve as a technical guidance document, as part of the comprehensive manual on TB infection control. IDDS prepared the assessment tool (minimal checklist for external assessment visit) for TB laboratory biosafety measures for each tiered level adapted to the local situation, which is under review. In FY 2022 Q2, this assessment tool will be launched. IDDS initiated the preparation of training materials, including training videos, for the TB laboratory biosafety and biosecurity training, which will be held in February 2022.
NTW-3.2: Strengthen TB laboratory infection control at national and sub-national levels in public and private sectors	In progress	

Cambodia TB	Cambodia TB		
Activity	Status	Activity implementation updates	
KHM-TB-NTW-1: Implementation of diagnostic connectivity solution in COMMIT and Global Fund-supported sites	In progress	IDDS worked with Savics, the National Center for Tuberculosis and Leprosy Control (CENAT), and Community Mobilization Initiatives to End Tuberculosis (COMMIT) to develop the DataToCare (DTC) training and installation plan, expected to take place in February 2022. In FY 2022 Q2, IDDS will support travel to Cambodia for one Savics technical consultant to conduct training and install DTC in person across the 10 COMMIT-supported operational districts (ODs). IDDS worked with CENAT to issue an announcement letter in the 10 COMMIT-supported sites for DTC training and installation. In collaboration with Savics, CENAT, and COMMIT, IDDS developed the Connectivity Detailed Implementation Plan for the DTC connectivity solution in the 10 COMMIT-supported sites. In FY 2022 Q2, IDDS will provide technical support to operationalize DTC including setting up a server, finalizing an interactive dashboard, installing DTC for GX instruments in the COMMIT ODs, and supporting CENAT staff to extract, analyze, and use DTC data. IDDS will also test the feasibility of DTC integration and interoperability with the TB-management information system (MIS) in selected sites, and work toward the connectivity of Truenat instruments.	
NTW-1.1: Support the establishment of connected GX instruments in COMMIT project ODs and scale-up diagnostic connectivity to the GX instruments in selected Global Fund-supported ODs	In progress		
NTW-1.2: Build the capacity of CENAT and local OD staff to implement and manage the connectivity solution, analyze data, and recommend corrective actions	Not started		
NTW-1.3: Expand data connectivity to Truenat instruments and TB-MIS	Not started		
KHM-TB-NTW-2: Pilot Truenat and 10 color GX to expand access to rapid TB and DR-TB diagnostics	In progress	IDDS submitted the Truenat pilot protocol to the National Ethics Committee for Health Research for clearance. IDDS worked with the Stop TB Partnership, Molbio, CENAT, and stakeholders to develop a detailed plan for Truenat installation and training, which will be held on February 14–24, 2022. Truenat delivery was delayed, but the Stop TB Partnership confirmed with IDDS that the Truenat instruments will arrive in Cambodia by mid-January 2022. IDDS worked with CENAT to localize all Truenat training modules and materials. Training modules are currently being translated into Khmer.	
NTW-2.1: Pilot Truenat in selected sites and assess the feasibility of testing for TB and rifampicin resistance at peripheral point-of-care health centers	In progress		
NTW-2.2: CENAT and OD staff capable of conducting Truenat testing and pilot completed.	Not started	In FY 2022 Q2, IDDS will provide technical assistance to CENAT, COMMIT, and OD staff to implement the Truenat pilot and collect and analyze data to evaluate the impact on TB case finding. In conjunction with COMMIT, IDDS will monitor implementation of the pilot and assess	
NTW-2.3: Introduce GX with 10 color system	Not started	the competency of CENAT, COMMIT, and local TB program staff to perform Truenat tests	

Cambodia TB		
Activity	Status	Activity implementation updates
NTW-2.4: Perform a spatial analysis of the rapid molecular diagnostic (RMD) network to inform the placement of new TB WHO Recommended Diagnostics (WRD) for future expansion of molecular diagnostics	Not started	provide mentorship; IDDS will also select the sites for the GX 10-color system by conducting a spatial analysis and defining site selection criteria.
KHM-TB-NTW-3: Improve the CXR reading and Telegram platform for interpretation of CXR	In progress	IDDS conducted a debriefing with CENAT and stakeholders about the chest x-ray (CXR) Telegram platform assessment report, standard terms of reference (TOR) for the Telegram platform, and its detailed Implementation Plan to operationalize the TOR, including
NTW-3.1: Improve a platform (Telegram) for interpretation of CXR	In progress	recommendations to improve the quality of CXR reading. The report and TOR were shared with CENAT and stakeholders. CENAT agreed on the findings and is committed to work with IDDS to improve the CXR Telegram platform, with a particular focus on developing an action
NTW-3.2: Develop and disseminate training materials for the use of the platform for CXR interpretation	Not started	plan to outline improvements to the CXR Telegram platform. IDDS's work in FY 2022 Q2 will include the following: (I) developing standardized reporting formats for experts to advise on CXR in a consistent manner and assist the decision making on
NTW-3.3: Develop an online training module and provide training on the correct reading and interpretation of CXR	Not started	CXR reading and interpretation; (2) developing and adapting training materials and job aids fo Telegram; (3) procuring a suitable artificial intelligence (AI) software based upon the IDDS experience in other countries; and (4) developing a detailed implementation plan for AI feasibility study.
NTW-3.4: Test the feasibility of artificial intelligence (AI)-enabled CXR reading for TB screening at the peripheral sites and for EQA of CXR in selected ODs	Not started	
KHM-TB-NTW-4: Provide technical support to improve bi-directional	In progress	In collaboration with COMMIT, IDDS finalized the situational analysis report of the TB-diabetes mellitus (DM) assessment in five COMMIT ODs.
screening for TB-Diabetes Mellitus (DM) comorbidity		IDDS developed the standard TOR for the TB-DM technical working group, which has been approved by CENAT.
NTW-4.1: Support COMMIT for the implementation and expanding	Not started	IDDS's work in FY 2022 Q2 will include the following: (1) disseminating the situational analysis report outlining recommendations to enhance implementation of the bidirectional screening in

Cambodia TB		
Activity	Status	Activity implementation updates
bi-directional TB-DM in 10 COMMIT supported ODs		ODs and presenting the report to the TB-DM technical working group for consideration and to the CENAT director for approval; (2) collecting additional data (if required) to develop a manuscript using the TB-DM report and publishing the results; and (3) preparing documents for local and HQ institutional review board approval of the manuscript, if required.
KHM-TB-NTW-5: Implementation of stool GX testing for improving pediatric TB diagnosis	Not started	The FY 2022 work plan was approved with contingency on January 5. IDDS will start activities under NTW-5 in Q2.
NTW-5.1: Implement stool specimen testing with GX ultra for pediatric TB diagnosis	Not started	

India TB		
Activity	Status	Activity implementation updates
IND-TB-NTW-I: Institutional strengthening of public sector network of TB laboratories to improve the quality and efficiencies of the TB diagnostics care cascade in NTEP	In progress	IDDS, in collaboration with the NRL National Institute for Research in Tuberculosis (NIRT) Chennai, conducted the pilot testing of the guiding supervisory checklist and feedback formats at the Intermediate Reference Laboratory (IRL) Pune and one linked district (October 11-14), along with the National Tuberculosis Institute Bangalore, IRL Puducherry (November 8-9) and IRL Madurai (November 10-12).
NTW-1.1: Update and upgrade the existing supervision, monitoring and evaluation (SME) framework into an integrated and comprehensive framework	In progress	IDDS prepared the minutes of the Central TB Division (CTD)-NRL review meeting and facilitated sharing the document with all NRLs on November 9 for compliance and implementation of action points. IDDS organized the first IRL and TB culture and drug sensitivity testing laboratory review meeting linked with the NRL Bhopal Memorial Hospital and Research Centre, in coordination with the Bhopal Memorial Hospital and Research Centre and the CTD, on November 25. The objective of this review meeting was to improve the coordination among different laboratory tiers and help resolve laboratory-related issues by providing a platform for direct discussion and cross-learning among the laboratories. IDDS refined the laboratory ranking tool based on inputs received from NRLs and the CTD laboratory unit and finalized the tool for piloting planned at selected NRLs and IRLs. IDDS prepared the framework for developing the National TB Laboratory Biosafety Manual and discussed and received inputs from the CTD laboratory unit. IDDS is currently hiring a
NTW-1.2: Reinforce management capacity of all NRLs and 12 IRLs to lead the laboratory diagnostic network in assigned institutions and geographies and strengthen NRLs and IRLs for supportive supervision, monitoring, mentoring, and troubleshooting	In progress	
NTW-1.3: Develop a forecasting tool to assist NRLs, IRLs and TB C&DST laboratories to estimate the requirement of laboratory consumables	consultant/agency to provide short-term technical assistance. IDDS participated in joint supportive supervisory mission visits organized by CTD to monitor the implementation of NTEP policies from October 17-20 to two districts in the state of Manipur and on October 22-25 to two districts in the state of Nagaland.	
		IDDS team also visited IRL Thiruvananthapuram, Kerala state on December 24 along with CTD representative to assess the performance and propose solutions to the potential issues limiting the laboratory from performing efficiently and effectively for supportive supervisory visits, mentoring, monitoring, and troubleshooting to the linked set of institutions and geographies.

India TB	India TB		
Activity	Status	Activity implementation updates	
		IDDS conducted a visit to the TB culture and drug sensitivity testing Laboratory, Rajan Babu Institute of Pulmonary Medicine and Tuberculosis, Delhi on December 28, along with representatives from CTD, NRL National Institute of Tuberculosis and Respiratory Diseases, and IRL New Delhi TB Centre. During the visit, IDDS assessed the progress made toward panel testing and re-testing related to the application for the National Tuberculosis Elimination Program (NTEP) certification for liquid culture and drug susceptibility testing, deliberated on the key issues with underlying challenges, and proposed potential solutions with mutual consensus for initiation of drug-resistant (DR) TB diagnostic services at the earliest time possible.	
		In FY 2022 Q2, IDDS will follow up with the CTD on key challenges, including shortages of laboratory staff and laboratory consumables, arranging for the required resources and improving laboratory efficiencies.	
IND-TB-NTW-2: Private sector laboratory engagement for the TB/DR-TB diagnostic care cascade	In progress	IDDS visited Hisar district in Haryana on October 4–5, a site identified for demonstrating the "One-stop TB/DR-TB diagnostic solution" model. IDDS deliberated with key district officials, collected baseline information (geography, functioning status of NTEP health facilities, access and coverage, historic TB rates, and TB/DR-TB test volume), and calculated the anticipated volume of tests expected to feed into the model. IDDS conducted a coordination meeting with Haryana state officials (state TB officer, district TB officer, World Health Organization consultant, medical officer TB control), along with USAID and the IQVIA team on November to deliberate on the scenarios for the volume of tests for implementation of the model. As suggested by the state TB officer Haryana, IDDS developed a brief proposal document on the conceptualized model and shared it with the state TB officer Haryana on November 18 for necessary approvals. IDDS received approval on December 9. On December 13, IDDS posted the request for proposals (RFP) in the job portal for engaging a private laboratory in the implementation of the "One-stop TB/DR-TB diagnostic solution" model in NTEP, Hisar District, Haryana, and published the RFP in national leading newspapers (<i>Times of India</i> and <i>Navbharat Times</i>) on December 14. IDDS received diagnostic TB data from the National Health Resources Repository from the CTD on December 19 and initiated the mapping exercise of potential laboratories for engagement with the NTEP.	
NTW-2.1: Initiate demonstration of "One-stop TB diagnostic solution" model for private sector laboratory engagement for TB/DR-TB diagnostic care cascade in collaboration with CTD	In progress		
NTW-2.2: Review of "One-stop TB diagnostic solution" model for private sector laboratory engagement for TB/DR-TB diagnostic care cascade	Not started		
NTW-2.3: Explore other possible options for engagement of private sector laboratories for TB diagnostic care cascade	In progress		

India TB		
Activity	Status	Activity implementation updates
IND-TB-NTW-3: Support the Central TB Division and USAID in design and conduct of research on new TB and DR-TB diagnostics		IDDS prepared two proposals: one on the feasibility of using Truenat DNA for line probe assay testing, and the second on assessing invalid and indeterminate rates of Truenat results at diagnostic facilities in the NTEP. IDDS received Institutional Review Board approval on the Truenat invalid and indeterminate study in the "Not Human Subjects Research" category on October 4. IDDS conducted the systematic analysis of retrospective data for 1,690 out of 1,972 Truenat sites in the NTEP, as part of the Truenat invalid and indeterminate study. The IDDS team visite NIRT, Chennai on October 7–8 to receive input on the data analysis from the NIRT team. The data analysis results of the study were presented to the CTD lab unit on November 22. IDDS received concurrence from CTD on the 12 shortlisted sites for a field visit on December 9. IDDS conducted the first visit to Truenat sites in Kerala and IRL Thiruvananthapuram on December 22–24 for root cause analysis of high invalid and indeterminate rates in the Truenat results. The team is planning to visit the remaining sites in January 2022. IDDS received Institutional Review Board approval of the Trueprep DNA feasibility study proposal in the "Not Human Subjects Research" category on October 2. The team prepared the terms of reference for the laboratory technician and data entry operator positions and developed the RFP document for procurement of consumables and kits for the study.
NTW-3.1: Comprehensive assessment of Truenat invalid and indeterminate results for Mycobacterium tuberculosis and Rifampicin resistance testing at NTEP's sites and possible solutions to address the same	In progress	
NTW-3.2: Feasibility of using Trueprep extracted DNA for line probe assay testing in NTEP	In progress	
NTW-3.3: Situational analysis, desk review and deliberation with CTD to assess the potential of new technologies, tools and approaches and research questions to be evaluated in NTEP	Not started	
NTW-3.4: Support, mentor and monitor relevant USAID-funded programs and partners for	Not started	

India TB		
Activity	Status	Activity implementation updates
development and evaluation of new diagnostic tools		
IND-TB-NTW-4: Support NCDC and identified laboratory(ies)/ laboratory networks for AMR containment and	In progress	IDDS is coordinating with the National Centre for Disease Control and other key stakeholders to get approval on the proposal to support the FY 2022 concurred antimicrobial resistance (AMR) activities and guidance to move forward.
surveillance		IDDS conducted a meeting with the focal point for AMR in the World Health Organization on
NTW-4.1: Technical and managerial support for development of new NAP-AMR with the leadership of NCDC	Not started	
NTW-4.2: Support developing the State Action Plan on Containment of Antimicrobial Resistance (SAP-CAR) for the identified state(s) aligned to NAP-AMR	Not started	
NTW-4.3: Develop and demonstrate a model of district level AMR surveillance in the identified district(s) of Punjab	Not started	

Tanzania TB			
Activity	Status	Activity implementation updates	
TZA-TB-NTW-1: Strengthen the TB Diagnostic Network	In progress	IDDS completed, edited, and submitted the following FY 2021 deliverables to USAID Washington:	
NTW-1.1: Strengthen the capacity and quality of testing in four zonal laboratories	In progress	 Procurement Documents for External Quality Assessment (EQA) Panels for GeneXpert Machines in Tanzania Summary of Quarterly Meeting Minutes from the National Tuberculosis (TB) 	
NTW-1.3: Provide GxAlert connectivity	In progress	Laboratory Technical Working Group for FY 2021 Report on GeneXpert Connectivity in Tanzania from January—September 2021	
		IDDS also submitted the country operational plan 2021 (USAID FY 2022) for United States President's Emergency Plan for AIDS Relief-funded activities and is writing a workplan for FY 2022, which will be submitted to USAID Washington in early Q2. Activities in the FY 2022 work plan will build on completed FY 2021 activities to enhance universal access to TB diagnostic services, improve the quality of screening and diagnostic evaluation for active TB, and strengthen and optimize the use of all available diagnostics (GeneXpert and other molecular World Health Organization-recommended rapid diagnostic tests, C-reactive protein, chest X-ray, and TB lipoarabinomannan) for active TB among people living with HIV who screen positive and are presumed to have TB.	

Vietnam TB		
Activity	Status	Activity implementation updates
VNM-TB-NTW-1: Optimize the diagnostic network to address issues of access, timeliness, and diagnostic accuracy	In progress	IDDS discussed with System One, the National TB Program (NTP), and the mission regarding the pilot of the specimen referral system (SRS) module in Nghe An province. System One offered a pilot SRS module for three to six months free of charge and shared the draft memorandum of understanding for this pilot.
NTW-1.1 Strengthen and digital transformation of specimen referral network	In progress	In FY 2022 Q2, IDDS will implement the pilot of the artificial intelligence-enabled chest X-ray to strengthen the double X strategy in Khanh Hoa province and start the pilot of the SRS after the NTP signs the memorandum of understanding with System One.
NTW-1.2 Support the expansion of molecular testing systems	In progress	
NTW-1.3 Strengthen the DST testing laboratory system to enhance diagnosis and treatment of drug-resistant TB (DR-TB), MDR-TB, and XDR-TB	In progress	
NTW-1.4: Provide continuous technical assistance for laboratory quality improvement	In progress	
NTW-1.5 Support the artificial intelligence-enabled chest X-ray to strengthen the Double X strategy	In progress	
VNM-TB-NTW-2 Improve pediatric stool testing using GX	In progress	IDDS had discussions with the NTP, the mission, and implementing partners about this activity. IDDS is working with the NTP and provincial hospitals to collect the pediatric stool testing
NTW-2.1 Provide technical assistance to GX facilities on stool GX testing to enhance the pediatric TB diagnosis	In progress	data. IDDS will share the updated report with the mission after the NTP and provincial hospitals provide the data. In FY 2022 Q2, IDDS will revise the report of stool GeneXpert (GX) activities in seven USAI provinces with updated data from Support to End Tuberculosis and the NTP. IDDS will also start providing technical assistance to the provincial laboratory on stool GX testing.
VNM-TB-NTW-3 Deploy innovative tools and equipment for Vietnam TB diagnostics	In progress	IDDS started the data analysis of trace results of GX Ultra. IDDS is developing a detailed implementation plan for the implementation of whole genome sequencing for drug-resistant TB detection.

Vietnam TB						
Activity	Status	Activity implementation updates				
NTW-3.1 Conduct an evaluation of trace results in application of GX Ultra testing	In progress	In FY 2022 Q2, IDDS will complete the data analysis on trace results of GX Ultra and present the draft report to the NTP and the mission for their review. IDDS will also finalize the detailed implementation plan for whole genome sequencing for drug-resistant TB detection.				
NTW-3.2: Support the implementation of whole genome sequencing for DR-TB detection	In progress					
VNM-TB-NTW-4: Technical assistance for new TB tools	In progress	IDDS worked with the NTP to prepare for the import of equipment delivered by the Introducing New Tools Project. IDDS finalized the relevant paperwork, which was submitted to the Ministry of Health for approval by the NTP. IDDS is working with the National Reference Laboratory technical team to prepare for the technical assistance schedules. IDDS met with the NTP and the mission in December to organize a handover ceremony of Truenat machines and develop an implementation plan for the Truenat feasibility for TB and rifampicin resistance testing. The NTP is finalizing the selection of implementation sites. IDDS's work in FY 2022 Q2 will include the following: (1) organizing a handover ceremony in collaboration with the mission, the NTP, and other stakeholders; (2) collaborating with Molbio and its local agency, Tekmax, to discuss training materials for Truenat; (3) discussing the implementation plan of the feasibility assessment of artificial intelligence-enabled ultra-portable X-ray after the NTP's final selection of implementation sites; and (4) working with a vendor selected through the STOP TB Partnership's bidding process on diagnostic connectivity solutions.				
NTW-4.1: Molbio Truenat—Assess the feasibility of testing for TB and rifampicin resistance at peripheral point-of-care health centers and active case finding sites	In progress					
NTW-4.2: Computer-aided detection with Ultra-portable X-ray— Assess the feasibility of ultra-portable X-ray with AI in TB active case finding	In progress					
NTW-4.3: Diagnostic connectivity Solutions developed by SystemOne (GxAlert Aspect) or SAVICS (DataToCare)—Expand a diagnostic connectivity solution to improve functioning of diagnostic equipment and to ensure timely service and maintenance is provided by manufacturers	Not started					

Zimbabwe TB					
Activity	Status	Activity implementation updates			
ZWE-TB-NTW-1: Strengthen a comprehensive TB diagnostic network with strong underlying health systems	In progress	IDDS awarded the tender for the installation of solar systems in 50 Ministry of Health and Child Care (MoHCC) TB laboratories to ThulaSiso. In collaboration with engineers from the MoHCC and the Ministry of Local Government and Public Works, ThulaSiso conducted an onsite verification process to identify the individual solar needs of the 50 TB laboratories. Findings from this assessment will inform next steps of procurement and installation, which will occur in FY 2022 Q2 and Q3. The solar systems are expected to provide uninterrupted power supply in the selected laboratories for continuous testing services for TB patients. The MoHCC TB-HIV Public Private Partnership, which is being developed through IDDS financial and technical support, is still undergoing final review by the MoHCC. The framework is expected to be finalized in FY 2022 Q2. IDDS trained 44 laboratory personnel in 2 training workshops held in Kadoma on use of the GxAlert system. The Northern region training was conducted on October 20, during which 26 (12 female/14 male) participants were trained. The Southern region training was conducted on October 21, during which 18 (8 female/10 male) participants were trained. The trainings focused on use and maintenance of GeneXpert machines, inventory management, and analysis of data transmitted through the GxAlert system. IDDS provided financial and technical support for the MoHCC to conduct GxAlert troubleshooting visits in 29 GeneXpert laboratories located in 8 provinces (Manicaland, Midlands, Masvingo, Mashonaland Central, Mashonaland East, Mashonaland West, Matabeleland South, and Matabeleland North) that were facing connectivity challenges. These visits were conducted from December 13 to 17, by IDDS team members in collaboration with GxAlert super users. The teams also trained laboratory personnel at these sites on the use of the GxAlert system, results recording and reporting, and inventory management. A total of 36 (21 female/15 male) participants were trained.			
NTW-1.1: Increase TB case detection through comprehensive strategies in collaboration with local organizations network in Harare Province	In progress				
NTW-1.2: Strengthen functionality of the GeneXpert network	In progress				

Zimbabwe TB					
Activity	Status	Activity implementation updates			
NTW-1.3: Expand and decentralize TB	In progress				
diagnostic network					
NTW-1.4: Strengthen quality in the TB	In progress				
diagnostic network					
NTW-1.5: Reinforce the TB diagnostic	In progress				
network within the private sector					
NTW-1.6: Expand supportive supervision	In progress				
and analysis of quality TB data to improve					
program performance					
NTW-1.7: Implement the DXO strategy	In progress				
to strengthen the GeneXpert network					
ZWE-TB-NTW-2: Support the NTRL and	In progress	The National Health Laboratory Strategy (2022–2026) was submitted to IDDS			
NTP to develop and operationalize functional		headquarters for review.			
national and provincial TB reference		IDDS provided financial support to engineers from the MoHCC and the Ministry of Local			
laboratory structures		Government and Public Works to support the installation of the modular laboratory,			
NTW-2.1: Strengthen the NTRLs to	In progress	which was procured with USAID support through the Challenge TB funding mechanism			
serve as the leading laboratories in the		and delivered in FY 2021. The modular laboratory will serve as a stopgap measure as the			
TB diagnostic network		main Bulawayo National TB Reference Laboratory is renovated. In FY 2022 Q2, IDDS will			
NTW-2.2: Support the NTP's leadership	In progress	financially support the relocation of the Mycobacteria Growth Indicator Tube machines			
activities and TWGs sessions	, ,	from the main laboratory to the modular laboratory so that culture activities can be			
		conducted in the modular laboratory.			
		IDDS started the procurement process of air conditioners for the Harare National TB			
		Reference Laboratory. The air conditioners will be installed in FY 2022 Q2 to control			
		temperatures in the line probe assay laboratory.			
ZWE-TB-NTW-3: Conduct OR to generate	In progress	ICF's Institutional Review Board approved the protocol for GeneXpert MTB/RIF Ultra "trace			
evidence on TB diagnostic strategies in		call" results in Zimbabwe, and IDDS submitted the protocol to the Medical Research			
Zimbabwe context		Council of Zimbabwe for ethical approval. After feedback is received in FY 2022 Q2, IDDS			
NTW-3.1: Conduct OR on clinically	In progress	will start conducting the operational research.			
diagnosed TB patients using CXR and					
other TB clinical signs					

Zimbabwe TB					
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Activity	Status	Activity implementation updates			
NTW 3.2: Conduct OR on GeneXpert	In progress	IDDS submitted the draft protocol on Clinically diagnosed TB patients using chest X-ray (CXR)			
MTB/RIF Ultra "trace call" results in		and other TB clinical signs, which was developed in FY 2021, to the MoHCC for review. This			
Zimbabwe		protocol is expected to be submitted to ICF's Institutional Review Board in FY 2022 Q2.			