

TB Strategy Update

This is a regular update that provides information on the progress of the **Collaborative TB Strategy for England 2015 - 2020**. To subscribe to future updates please [click here](#)

1. World TB Day 2019

World TB Day is a day to raise awareness about TB around the world. ... the Stop TB Partnership theme for **World TB Day 2019** is "It's TIME...."

- It's time to work together to #End TB
- It's time to keep patients at the centre of all we do
- It's time to test and treat latent TB infection
- It's time to speak up
- It's time to end the stigma of TB

World TB Day, falling on March 24th each year, is designed to build public awareness that tuberculosis today remains an epidemic in much of the world, causing the deaths of nearly one-and-a-half million people each year, mostly in low income countries. This annual event commemorates the date in 1882 when Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacillus that causes tuberculosis (TB).

This year in the run up to World TB Day the National TB Programme encouraged TB stakeholders to make a 'TB Pledge' to raise awareness of TB in England. We'd like to thank the the North-West TB Control Board (TBCB) who initiated this campaign. TB pledge cards were sent to all TBCBs for onward dissemination and we hope very much that many of you will have seen and used them. If not and you'd like to get involved, either before or after World TB Day, please email TBStrategy@phe.gov.uk and we'd be happy to send the pledge cards on to you.

How can you get involved in the World TB Day 'TB Pledge' campaign?

- Using one of the TB pledge cards, make a pledge to help tackle TB
- **Take a photo of yourself holding the pledge card and share via:**
 - social media - using the hashtag **#WorldTBDay2019**
 - email - copying in TBStrategy@phe.gov.uk
 - or make a poster to hang in a prominent place to raise awareness of TB

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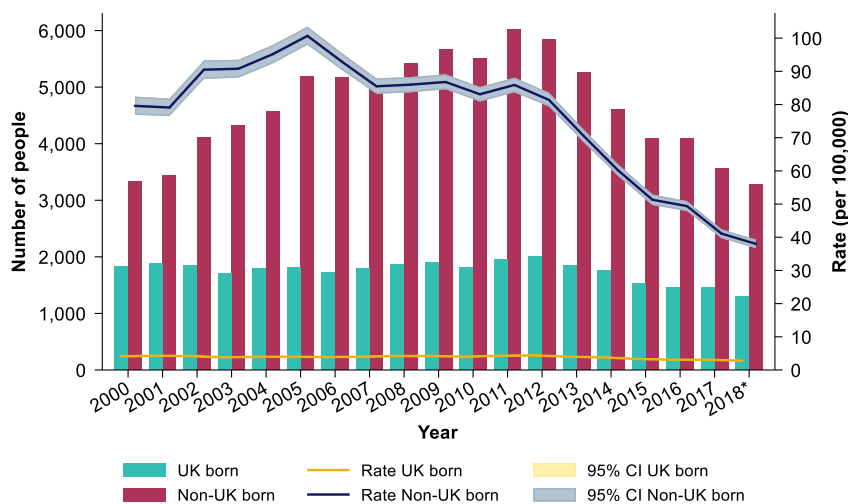
Please see the final page for a montage of WTD pledge photos taken by the PHE TB Unit

2. Good news – TB rates and numbers decreased again in 2018!

Provisional data for 2018 show a further decline in the number of TB case notifications and rates in England. A total of 4,672 people with TB were notified in 2018, a rate of 8.4 per 100,000. This represents an 8.4% and 8.7% annual decline in the number and rate of TB, respectively. These are now the **lowest figures ever recorded for TB incidence in England** and since the peak of 2011, there has been a 44% drop in new TB diagnoses.

This continuous decline brings the rate of TB in 2018 further below the 10 per 100,000 threshold which defines the UK as a WHO **low incidence country**.

In 2018, after no decline in 2017, we are pleased to report that the number of UK born TB patients declined by approximately 10% (N=1,304), see figure below. In contrast, the number of cases (N=3,288) and the rate (43.1 per 100,000) in the non-UK born population declined at a slower rate of 7.5% in the same period.



*Provisional data. The rate of TB for 2018 has been calculated using 2017 population estimates

Quarterly reports for TB notifications in England are now being published on a regular basis, providing provisional high level figures and data on key TB indicators, and include further breakdowns by region. These reports aim to provide timely and up-to-date figures on key epidemiological indicators to inform ongoing TB control efforts in England. The first **quarterly report** was published in February 2019 presenting data to the end of 2018.

Detailed results for 2018 will be published in the annual report 'Tuberculosis in England' later in 2019. The most recent annual report with data up to the end of 2017 is available [here](#).

3. National TB Strategy Progress – areas for action update 2018/19

Area 1 - Improve access to services and early diagnosis

- A National TB Communication Strategy and Plan have been completed and submitted for funding. This plan will provide targeted awareness raising to ‘at-risk’ groups and healthcare workers using social and digital media and social marketing alongside a whole raft of other measures
- TB Alert (funded by NHS England) have developed innovative communication approaches to increase the uptake of LTBI testing that include social media, social marketing, radio, local libraries and other community access points



Area 2 - Provide universal access to high quality diagnostics

- **A National lab audit** to assess TB diagnostic services capability was completed in 2017 and over the last year outputs have been used locally to improve access to diagnostics
- **Whole Genome Sequencing for TB rolled out country wide 2017/18** Some of the advantages of the this new technology include, but are not limited to:
 - providing speciation more rapidly than traditional techniques
 - predicting drug sensitivities more rapidly for first line drugs
 - providing vital diagnostic and public health information to support cluster investigation by PHE and TB services

Area 3 - Improve treatment and care services

- TBCBs are working to support and strengthen local TB networks and clinical services e.g. via expansion of TB clinical networks, strengthening nurse networks and increasing uptake of cohort review
- **National TB clinical policy and service specification** updated in 2017 and shared by TBCBs through 2018 with commissioners to improve TB services
- **North West paediatric care pathway**, delivering a weekly ‘virtual’ multi-disciplinary clinic that networks a specialist paediatric consultant to district general hospital consultants and teams, shared nationally with TBCBs for their consideration
- A resource for Health Protection teams to support appropriate consideration and action around **Part 2A Orders** has been prepared and circulated



Area 4 - Improve contact tracing

- Roll out of WGS technology nationally is supporting more focused contact tracing
- A contact tracing training session was delivered to TB nurses at the 2018 national TB nurse conference, to which 50% of all TB nurses attended



Area 5 – Improve BCG vaccination uptake

- PHE and NHS England secured alternative supply of Intervax BCG vaccine for use in 2017 and 2018
- In August 2018, a new UK-licensed BCG vaccine became available from AJ Vaccines (formerly SSI). PHE developed information resources and a slide set to support use of the new vaccine and shared this via *Vaccine Update* 283 in August 2018

Area 6 - Reduce drug resistant TB

- Work is underway to take forward the recommendations from the 'National MDR-TB needs assessment' undertaken by PHE in 2017
- PHE and NHSE continue to support the British Thoracic Society **MDR-TB Clinical Advice Service** (launched in January 2018). This service runs a monthly telephone MDT where MDR-TB cases notified to this service are discussed and advice provided by formally appointed MDR-TB experts including clinicians, microbiologists, public health specialists and TB nurses.



Area 7 - Tackling TB in under-served populations

- In 2018 the PHE / Local Government Association 'Tackling TB – local government's public health role' was updated
- In January 2019, an update to "[Tackling Tuberculosis in Under-Served Populations: A Resource for TBCBs and their partners](#)" was released
- TBCBs have worked hard to develop **streamlined accommodation pathways** to house the homeless with TB
- Some TBCBs working with CCGs and local authorities have agreed **funding mechanisms to accommodate the homeless with TB** for the course of their treatment e.g. London TBCB
- A **Video Observed Therapy (VOT) Service**, provided by the London based 'Find and Treat' team, has been made available nationally on a tariff basis

Area 8 - Implement new entrant latent TB (LTBI) testing and treatment

- To date, the majority of the 59 priority CCGs who met the criteria for an LTBI (latent TB infection) programme have received funding
- A total of 43,938 LTBI tests have been reported from programme commencement to December 2018, with a test positivity rate of 17%
- The number of tests processed increased in 2018 compared to 2017 by 5%
- The NHS England team is working with CCGs who have not yet submitted plans to ensure the LTBI testing and treatment programme is implemented in all priority areas
- The PHE TB Screening Team continues to develop a national web portal and database for submitting LTBI programme data. The webportal was piloted in November/December 2018 and further developments are underway with the aim to release an updated version for further testing by June 2019
- PHE and TB Alert have designed a leaflet on 'LTBI testing and treatment' to be given to migrants prior to entering the UK once their visa to the UK has been granted. The purpose of this leaflet is to increase awareness of the LTBI programme and encourage uptake of LTBI testing once an individual has migrated to the UK

Area 9 - Strengthen surveillance and monitoring

- **TB Strategy monitoring indicators** - updated yearly in annual report and available via [PHE Fingertips tool](http://fingertips.phe.org.uk/profile/tb-monitoring) to enable interactive interrogation at Local Authority and CCG level <http://fingertips.phe.org.uk/profile/tb-monitoring>
- **Strategy progress measures** developed to support monitoring of implementation of ten 'areas for action' at a national and TBCB level – **16 out of 22 measures now met**
- **TB Infographics**, based on Annual TB report data, prepared and released at national and TBCB level each autumn with the Annual TB report (available on PHE website)

Area 10 - Ensure an appropriate workforce to deliver TB control



- Two, one-day **TB nurse leadership workshops** were held in March this year. Ninety five nurses attended and both workshops were well received. Topic areas covered at the workshops included:
 - How to use contracts and commissioning to future proof TB services
 - How to develop a business plan
 - Case studies, highlighting nurses leading change ensuring a person-centred approach and developing a service to meet the needs of the local population
 - NursingNowEngland and Change Agency explained
 - BCG: refresher session
 - Cohort Review: training for the role of Chair
- **The 4th annual National TB nurse conference** organised by PHE and NHSE 2019 will be on Friday, 20 September 2019 in Birmingham as it was last year. Over 50% (200) of all TB nurses attend each year and we welcome all again this year
- Review of **wider TB support staff** (non-nurse / non-doctor) completed and recommendations being taken forward to build a multi-disciplinary approach to TB care
- **Project ECHO** is currently being explored as a way to further improve quality of care, reduce variation and to provide expertise and TB education for the workforce
- The updated Royal College of **Nursing TB case management guidance** completed in 2019 and available on the RCN website

4. National TB Strategy Priorities (2019/2020)

Over the next 12 months (to the end of the current strategy), the National TB Programme team will prioritise the following activities:

- Increase awareness of TB in health care workers and at-risk populations using the new National TB Communications strategy and plan
- Work to improve treatment and care services
- Continue to tackle TB in USPs
- Sustain new entrant LTBI testing and treatment programs

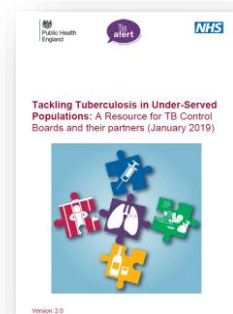
- Improve TB diagnostics and increase use of WGS
- Review and report on Video Observed Treatment (VOT)
- Follow-up on the proposal to create a 'National Integrated Outreach Service to reduce health inequalities' as part of the NHS Long-term Plan
- Continue to review current TB Strategy deliverables - to assess what is outstanding and action needed in 2019/2020
- Develop a new vision for TB to 2035 and a TB Action Plan for 2020-2025. Preparatory work has started for beyond 2020, refocusing the TB work to deliver the outstanding actions of the current Strategy but also taking into account new ideas, research and technology to ultimately sustain the downward trend in TB incidence. In due course, the National TB Strategy team will be reaching out to stakeholders for input

5. An updated USP Resource was launched in January 2019

Dealing with TB among under-served populations (USPs) is one of the key 'areas for action' identified in the **Collaborative TB Strategy for England**. From 2016 to 2017, the number of TB notifications fell by over 9%, however people with social risk factors (SRF) continue to be disproportionately affected by TB. In 2017, 12.6% of people with TB had a Social Risk Factor (SRF), the highest proportion since data collection began in 2010, highlighting the ongoing need for this resource.

Key features of the revised document include:

- **updated epidemiological data** from 2012 – 2017 across all chapters
- **new graphs** with numbers and proportions by local authority with risk factor introduced for each of the relevant chapters
- **additional recommendations** particularly relating to Social Care and Models of Care included in the relevant sections as **blue text**
- **many new exemplars of best practice** included across all chapters, **boxed in blue**
- links have been included to all new resources
- the burden of TB in each CCG is provided as an Appendix
- an updated section in Chapter 7 on what local authorities can do for USPs with TB
- new recommendations for Chapter 9 on community, voluntary sector and programmes of work



For the purpose of this resource the people considered as under-served include:

- people who are homeless
- some migrants groups
- people in contact with the criminal justice system
- people who misuse drugs and/or alcohol
- people with mental health needs

PHE is encouraging TBCBs and their partners to develop services that better meet the needs of under-served groups susceptible to TB and thus mitigate the health inequalities commonly associated with TB.

Please find the **updated USP Resource** [here](#)

6. VOT study by London “Find and Treat”

The world’s first randomised controlled trial of smartphone-enabled 'Video Observed Therapy' (VOT) to support patients to complete TB treatment has just been published in the [Lancet](#). It shows that Directly Observed Therapy (DOT) patients are more likely to continue TB treatment if they have video-observed treatment over smartphone rather than face to face appointments. The study found seven out of 10 patients using a smartphone app to track their drug treatment completed at least 80 per cent of the course, filming themselves taking the dose and submitting the footage to a clinical team.

This is a really exciting study with huge implications. The national TB programme team have been reviewing the use of VOT over the last few months and will now add the findings of this paper to those already collated and will shortly share this review.

7. TB Alert – changing behaviour around TB

During the last year TB Alert has been working on three sets of initiatives to increase uptake of latent TB testing and treatment: supporting CCGs to work with local partners to engage communities; developing new channels to reach communities directly; and producing new resources which can be used by statutory and non-statutory stakeholders.

The new channels to reach communities include student media, trades unions, social media and faith settings. TB Alert are also working with QMUL and the Royal College of Midwives to reach new entrants in antenatal settings, offering latent TB testing during pregnancy for treatment after delivery. These initiatives all reflect the social marketing techniques described in TB Alerts latent TB toolkit, of using audience insight and behaviour change theory to improve health seeking behaviour and reduce health inequalities.



TB Alert’s new resources can all be accessed through the ‘Professionals’ tab on [The Truth About TB](#) website, where you can search by resource type, language and keyword. Sample resource packs have been sent to high incidence CCGs but since these don’t always filter through to TB and communications teams. The website contains an order form and you can contact Helen Clegg at TB Alert to discuss customising resources for local use (01273 234030, helen.clegg@tbalert.org).

LATENT TUBERCULOSIS (TB), THE SLEEPING FORM OF TB, IS A SERIOUS, HIDDEN HEALTH THREAT

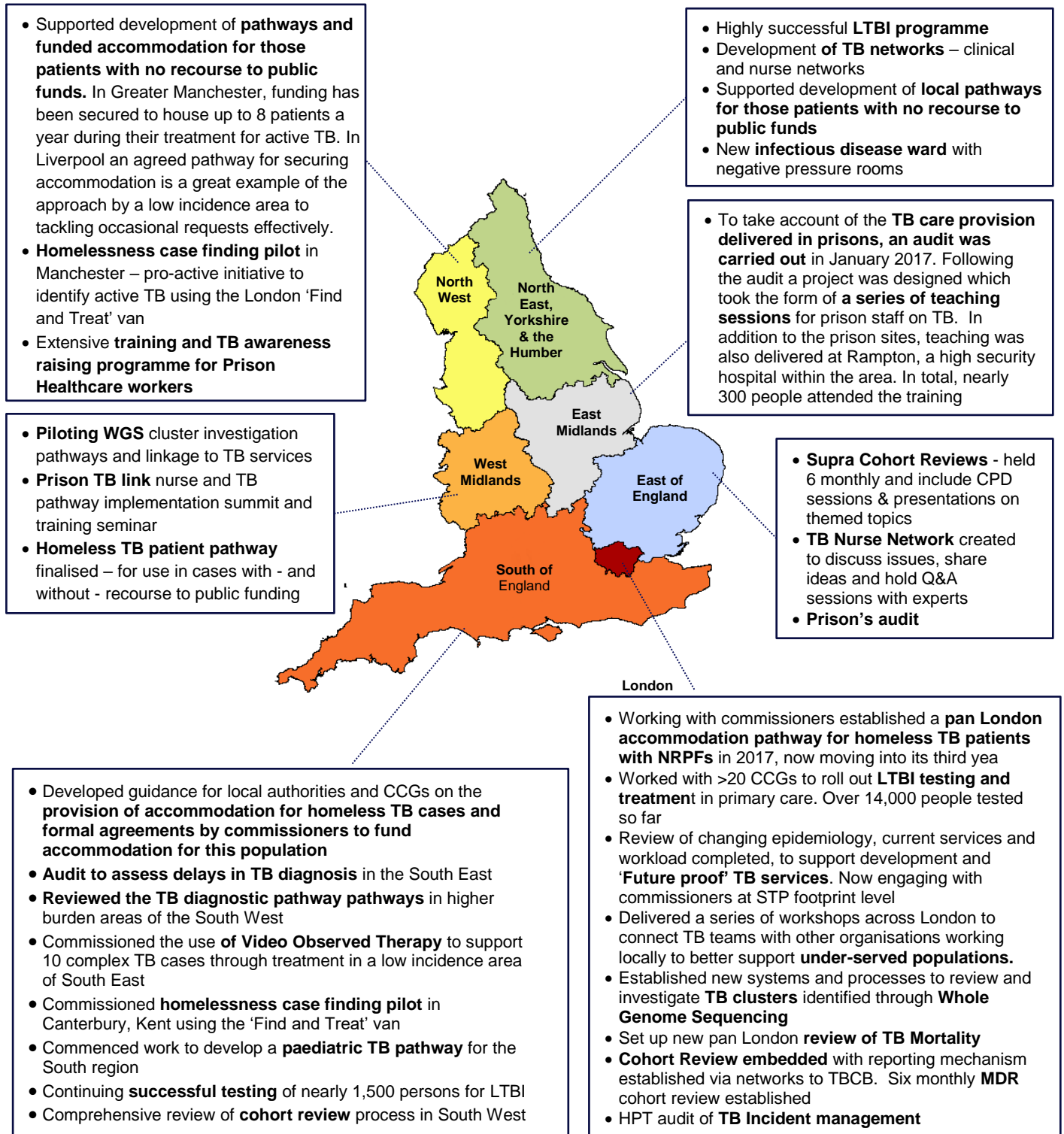
<p>16-35 years? Settled in England in the last 5 years?</p> <p>From one of these countries?</p> <p>Why not ask your GP for a FREE LATENT TB TEST?</p>	<p>GP services are FREE to everyone living in the UK</p> <p>Find your nearest practice online www.nhs.uk</p>	<p>Did you know you can still get TB even if you've had the BCG vaccine?</p>	
<p>Did you know that a chest x-ray CANNOT find all forms of TB?</p>	<p>A simple, FREE BLOOD TEST can detect latent TB</p>	<p>Latent TB is QUICKER and EASIER to treat than active TB</p>	<p>Latent TB: PREVENTION is better than cure</p>
<p>8 in 10 people have heard of TB...</p>	<p>...but only ONE in 10 have heard of latent TB...</p>	<p>...even though a QUARTER of the world has latent TB</p>	<p>If you have latent TB, there is a 1 IN 10 CHANCE that it will become active!</p>

www.thetruthabouttb.org/latent-tb

8. Show casing achievements of TBCB in 2018/19

The local implementation of the TB Strategy has been achieved through the hard work of seven TBCBs and their partners. As a reminder, TBCBs are multi-stakeholder groups working to deliver improved local TB control. They:

- meet at least three times per year
- focus on 'areas for action' relevant to their local epidemiology as well as some national priorities
- utilise the national TB Strategy teams support and nationally developed resources
- have been highly successful at creating a forum for local TB stakeholders to work collectively to deliver better local TB control



9. Contact details for TBCB leads and managers

TB Control Board	TB Lead	TB Programme Manager
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We'd like to thank all stakeholders working to improve TB control in England; TB rates continue to decline and together we are making a difference. However, we must not become complacent as there is still much to do! Thank you for your continued support

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