



UK Health
Security
Agency



TB Action Plan for England 2021-2026

Y&H TB Clinical Network, Feb 2023

TB elimination targets

- WHO End TB Strategy 2015 ; reaffirmed at HLM 2018
- all UN member states recommitted to existing targets for TB in the SDGs and End TB strategy
- SDG 3 2015 - includes TB elimination
- What is UKHSA accountable for?
Where does the governance sit?

A WORLD FREE OF TB

ZERO deaths, disease, and suffering due to TB

END THE GLOBAL TB EPIDEMIC

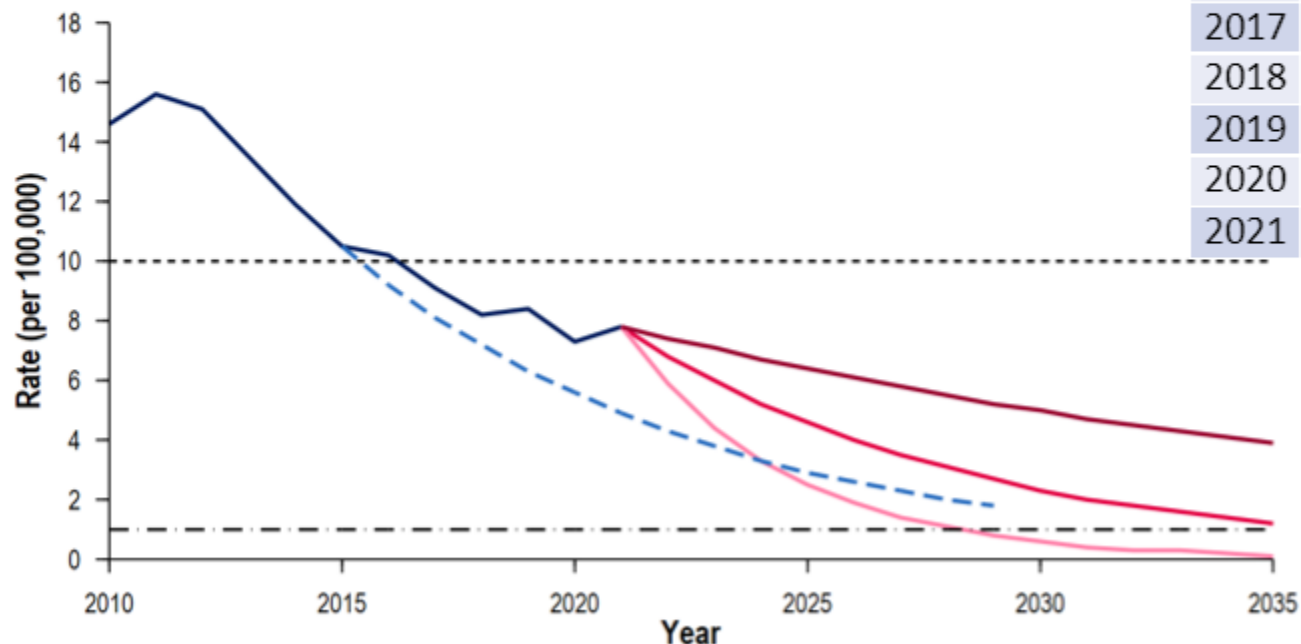
	MILESTONES		TARGETS	
	2020	2025	SDG* 2030	END TB 2035
<i>Reduction in number of TB deaths compared with 2015 (%)</i>	35%	75%	90%	95%
<i>Reduction in TB incidence rate compared with 2015 (%)</i>	20%	50%	80%	90%
<i>TB-affected families facing catastrophic costs due to TB (%)</i>	0%	0%	0%	0%

* The United Nations Sustainable Development Goals (SDGs) include ending the TB epidemic by 2030 under Goal 3.

WHO targets and observed/ predicted rates

This is England data – target is UK

90% reduction =
1.05/100k in 20 years =
10.9% annual reduction



England incidence over time

Yr	No	Rate	Annual change no	Annual change rate
2015	5,734	10.5 (10.2 to 10.7)	-11.4	-11.8
2016	5,618	10.2 (9.9 to 10.4)	-2.0	-2.9
2017	5,067	9.1 (8.9 to 9.4)	-9.8	-10.8
2018	4,610	8.2 (8.0 to 8.5)	-9.0	-9.9
2019	4,705	8.4 (8.1 to 8.6)	2.1	2.4
2020	4,123	7.3 (7.1 to 7.5)	-12.4	-13.1
2021	4,425	7.8 (7.6 to 8.1)	7.3	6.8

From 2021 to 2035
need to achieve 13.3%
annual reduction

Average 2017-21 = 3%

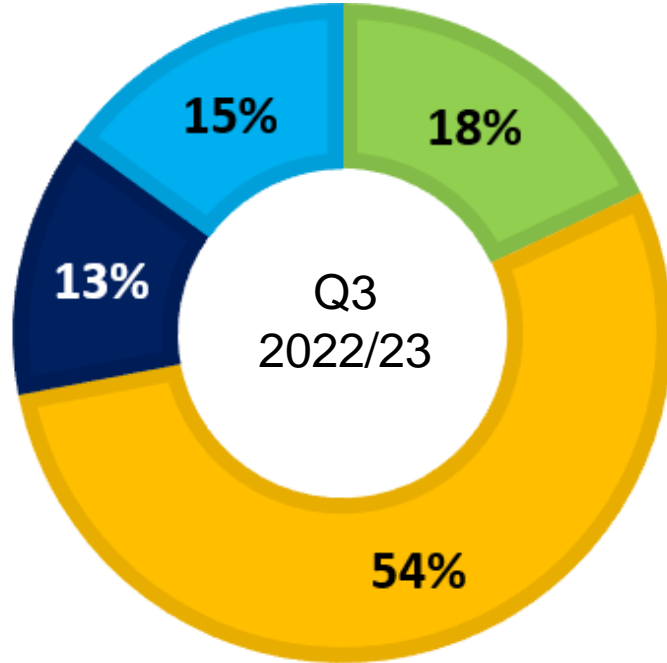
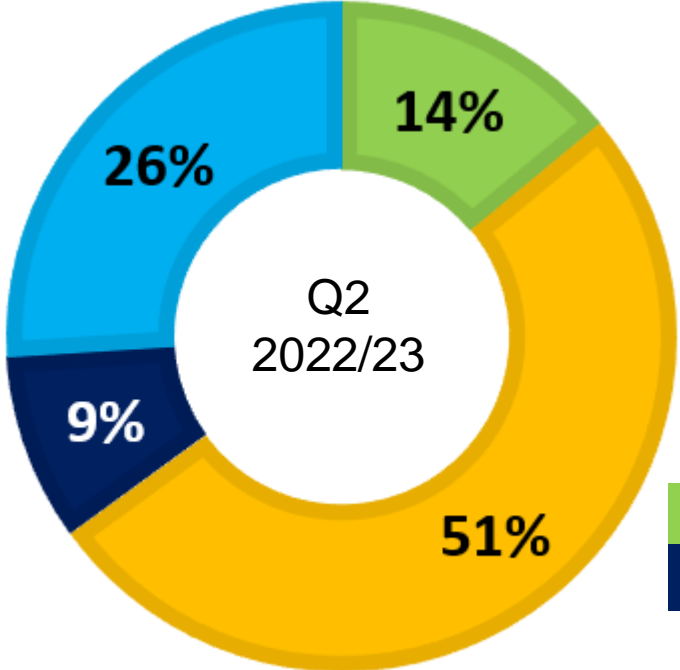
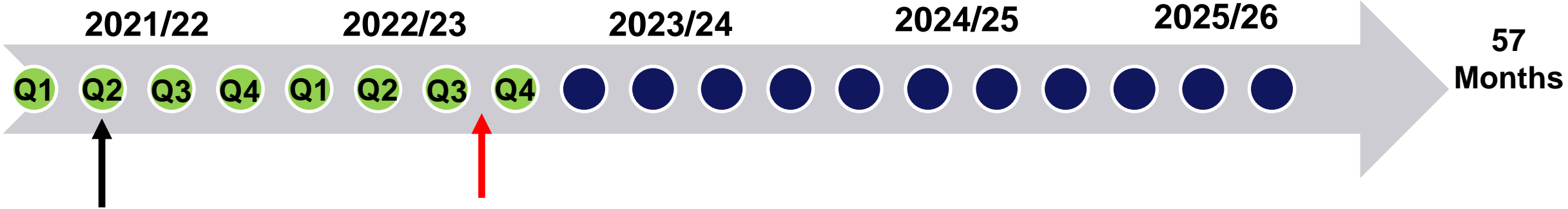
TB Action Plan for England 2021-2026

- Priority 1 – Recovery from Covid-19
- Priority 2 – Prevent TB
- Priority 3 – Detect TB
- Priority 4 – Control TB Disease
- Priority 5 – Workforce

Actions: 82, Indicators: 100 to deliver by March 2026

Ambitious programme of work - breadth and depth

TB Action Plan for England – Progress Q3 2022/23



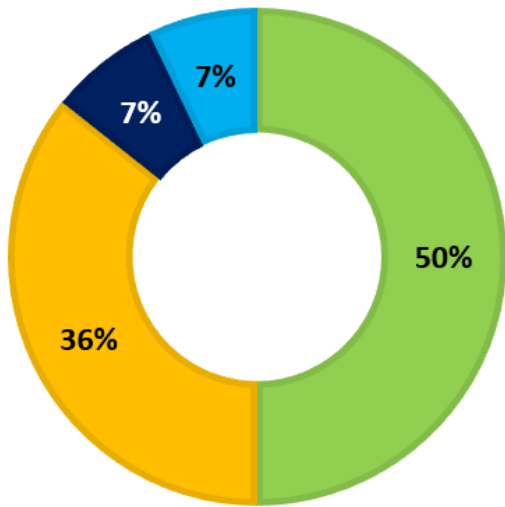
In Progress	↑
To Start	↓
Complete	↑
Delayed	↑

Priority Area 1 - Progress Q3 2022/23

Summary

- 50% of objectives in the Recovery from COVID Priority are complete
- 1.3.2 delayed – to be picked up at ‘check point’ review
- Publish monthly, quarterly and annual reports – statistical process review to enhance quality - resulting in publication delay
- Review of printed and online patient information has informed a project to update and translate key assets for publication in '23
- Reinstatement of regional strategic TB control forums (TBCBs) and improving strategic working with regional NHS teams

N = 14



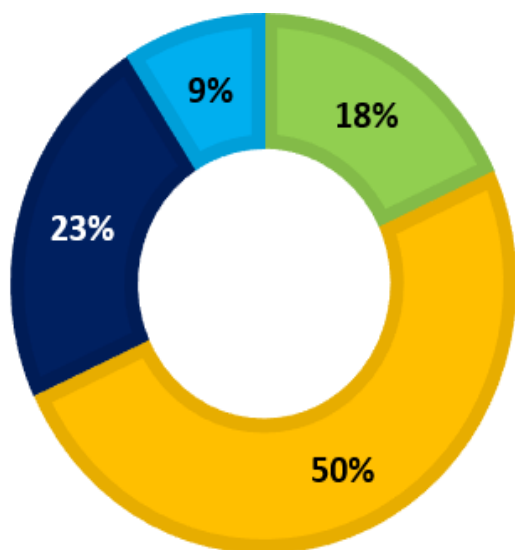
1.2.1	Report annually for two years (2022/23, 2023/24) on access to laptops, mobile phones, Attend Anywhere/virtual clinics, MS Teams against a baseline established in 2021/22	In Progress
1.2.2	Report annually for two years (2022/23, 2023/24) on access to outpatient clinic space	In Progress
1.3.3	Review and report in 2022/23 TB patients' technological access to TB services and other health care providers	In Progress
1.6.1	Publish annual report on the work of the regional TBCBs	In Progress
1.6.2	Monitor and report annually TB incidence at TBCB, regional and commissioning levels	In Progress
1.3.2	Review behaviour toolkits, developed for COVID -19 work, to support 1.3.1 during 2021/22	Delayed
1.5.3	Re audit 1.6.1 in 2023/24	To Start

Priority Area 2 - progress Q3 2022/23

Summary

- Guidance to improve detection and treatment of active and latent TB in resettlement refugees and asylum seekers
- Collaboration - NHSE H&J, UKHSA HE Team and OHID to develop guidance for prisons update USP toolkit and MH Guide
- Ongoing support for evaluation of changes the BCG Programme with Bristol HPRU and LSTHM
- Ongoing support for LTBI programme through co-funded surveillance posts NHSE/UKHSA
- Agreement that UKHSA Guidance and Evidence team will support the contact tracing handbook

N = 22



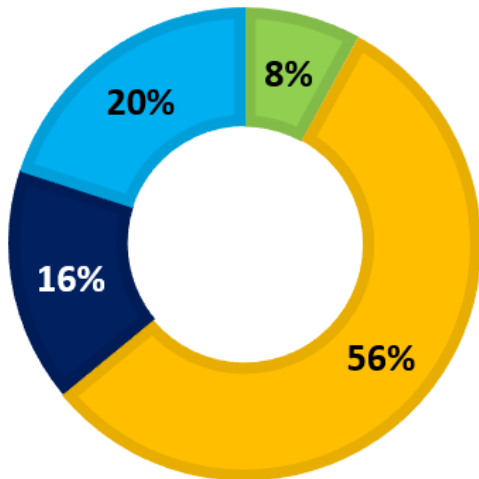
2.6.1b	Publish national evidence-based guidance on Occupational Health screening for TB in 2023/24	
2.6.2	Publish national guidance on managing incidents and outbreaks in 2023/24	
2.4.2	Report on an annual basis the progress in increasing the proportion of people screened for active TB and/or latent TB in groups a - f a. targeted screening in asylum seekers, including unaccompanied asylum-seeking children b. healthcare workers through Occupational Health c. the immunocompromised d. the homeless e. those in contact with the criminal justice system f. people newly starting biological therapies and demonstrate active engagement with Local Authorities, their Public Health teams and the third sector.	
2.6	Demonstrate and report biennially on the use of guidance and / or toolkits by local teams through local assurance mechanisms	
2.8.2	Review the outcomes of TB disease in age groups not included in current provision to inform the review of commissioning and provision of BCG to those groups in 2022/23	

Priority Area 3 - progress Q3 2022/23

Summary

- UKHSA funded academic partnership (SCHARR) - systematic review to understand components of delayed diagnosis
- NHS audit work to understand health care components of delayed diagnosis
- Collaboration with H&J / HMPPS to develop share WGS insights and improve data linkage & TB surveillance systems in prisons
- Monitoring, modifying and maintaining NTBS

N = 25



3.1.2a – Identify the components of delays in diagnosis on a regional and national basis through TB service provider MDT workshops to collate the components in 2022/23

3.1.2b – Each TB service and/or UKHSA region or TBCB to develop and publish an action plan in 2022/23 to address local components of delays in diagnosis

3.2.2 - Report annually cohort review monitoring of diagnostic delay

3.3.1a - Monitor and report annually on the target of 100% compliance in PCR use in accordance with NICE guidance in all pathology networks / TB services (Paediatrics and Adults) for all pulmonary/infectious TB cases

3.3.3 - Monitor and report annually on diagnostic delay due to delayed referral based on abnormal X-rays using ad hoc sampling

3.1.1 - Report the outcomes of the national survey for people affected by TB in 2023/24 (2021/22)

3.1.3 – Publish and report annually, commencing 2023/24, on the identified components that contribute to delay in diagnosis

3.3.2a - Increase the proportion of cultured confirmed cases to the European standard of 80% for pulmonary TB by 2024/25

3.3.2b - Reduce regional variation in culture confirmation of pulmonary TB (2019, 57.5% - 73.4%) with all areas progressing to achieve 80% by 2024/25

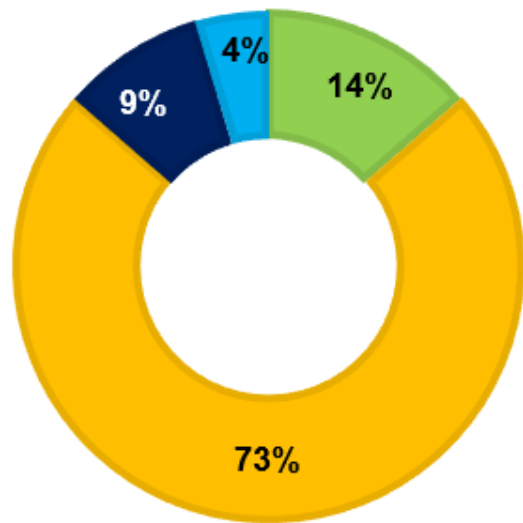
3.7.1 - Implement use of WGS direct from clinical specimens commencing 2023/24

Priority Area 4 - progress Q3 2022/23

Summary

- UNHLM September 2023, member states review progress against global elimination targets set in 2018 – review UK target
- TB included in GIRFT – a national in-depth review of services, analysis and bench marking to improve patient treatment care
- Recruitment of Microbiologist, Clinical Fellow and StR to undertake clinical and lab audit work

N = 22



4.1a - Decrease TB incidence at TBCB level by an average of 11.5% per year to meet the WHO target for TB elimination

4.7 - Set up an annual reporting mechanism to report and disseminate information on TB research projects, progress and outcomes

4.1.1b - Achieve 90% treatment completion rates by 2026

Complete

In Progress

Delayed

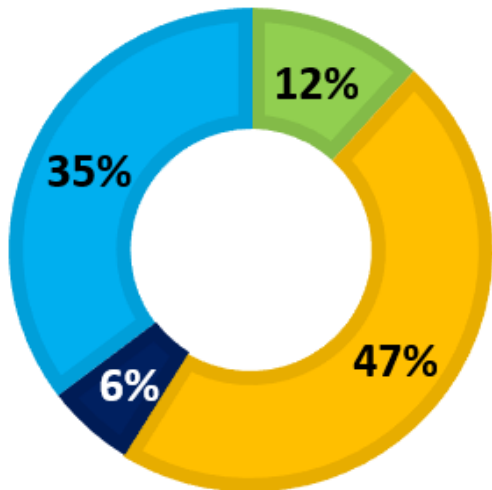
To Start

Priority Area 5 - progress Q3 2022/23

Summary

- Delivery of 13 national training webinars on clinical and public health management. A training and induction package for TB and HPT workforce
- Covid-19 TB Nurse Peer Support Network, transitioned back to local leadership
- BTS will host a short course on TB management on-line on in 2023 (widening access to a popular educational resource)

N = 17



Complete In Progress

Delayed To Start

5.2.2 - Commencing in 2022/23 biennially report on the provision of induction training for the TB workforce

5.1.4a – Organise a national workshop in 2023/24 in collaboration with BTS, RCN, BAPT, Royal Colleges etc to identify the minimum number of people affected by TB to provide a ‘safe’ and appropriate TB service and maintain staff expertise in response to GIRFT report recommendations

5.1.4b - Draft and publish guidance and recommendations in 2023/24 (2022/23) re a ‘safe’ TB service and TB workforce provision

5.2.5 - Survey and report on student nurse placements in TB services in 2023/24

5.2.6a - Biennially, commencing 2023/24, (review provision and access to TB educational resources and courses)

5.3.2 – Commissioners and/or ICBs and/or TB service providers to review and report on the provision of TB services in 2023/24 in response to GIRFT report recommendations

5.3.3 Report on future provision to meet changing local population and workforce needs from 2023/24 onwards

Key 'wins' since Action Plan launch

- Action Plan revision post organisation transition
- Reinstate TB SEN Network in conjunction with FS.
- Developed new suite of monitoring indicators & shared with regions for local priority setting – (multiple)
- Full launch of the National TB Surveillance NTBS – 3.6
- Agreement that GIRFT will review TB and is underway -4.1
- Regional nursing networks refocus on local workforce priorities with new national overview - 'Do once and Share' - 1.4
- Publication of the WGS Handbook online - 2.5, 3.4
- Engagement of Regional Health Protection Teams in re-building TB structures post COVID - 1.6
- Continued consultant microbiology and public health support for the BTS MDR forum - all

Delayed variables – deliverables

1.3.2 – Review behaviour toolkits, developed for COVID -19 work, to support 1.3.1 during 2021/22

2.4.1 – Establish baselines and trajectories in 2021/22 for screening for active TB and/or LTBI in groups a to f to improve proportions of people screened in groups a to f.

2.4.2 - Report on an annual basis the progress in increasing the proportion of people screened for active TB and/or latent TB in groups a - f

a. targeted screening in asylum seekers, including unaccompanied asylum seeking children

b. healthcare workers through Occupational Health

c. the immunocompromised

d. the homeless

e. those in contact with the criminal justice

system

f. people newly

starting biological therapies

and demonstrate active engagement with Local Authorities, their Public Health teams and the third sector.

2.8.2 - Review the outcomes of TB disease in age groups not included in current provision to inform the review of commissioning and provision of BCG to those groups in 2022/23

3.1.2b – Each TB service and/or UKHSA region or TBCB to develop and publish an action plan in 2022/23 to address local components of delays in diagnosis

3.2.2 - Report annually cohort review monitoring of diagnostic delay

3.3.1a - Monitor and report annually on the target of 100% compliance in PCR use in accordance with NICE guidance in all pathology networks / TB services (Paediatrics and Adults) for all pulmonary/infectious TB cases

3.3.3 - Monitor and report annually on diagnostic delay due to delayed referral based on abnormal X-rays using ad hoc sampling

3.3.4 - Plan and implement a three-year audit of TB provision in microbiology laboratories commencing 2022/23

4.1a - Decrease TB incidence at TBCB level by an average of 11.5% per year to meet the WHO target for TB elimination

4.7 - Set up an annual reporting mechanism to report and disseminate information on TB research projects, progress and outcomes

5.2.2 - Commencing in 2022/23 biennially report on the provision of induction training for the TB workforce

Next Steps

- Action for all members of NTBAP-AIG – delayed deliverables deadline
- UNHLM September 2023 – review of UK commitments and assess progress against elimination targets
- UKHSA – check point and deep dive Jan 2023 to review progress, resources and actions to support action plan
- **Progress Recruitment**
- Begin GIRFT process
- Progress stakeholder access to Jira Dashboard for access to detailed updates on individual deliverables

Questions...

