The WHO planning and budgeting tool for TB control: An introduction
Overview

1. Background
2. Development process
3. Main features – practical demonstration
4. Expected benefits
5. Promotion and practical application
6. Requirements
1. Background:
The Global Plan to Stop TB and comparisons with country plans
The Global Plan to Stop TB, 2006–2015

Plan sets out:

- Range and scale at which interventions need to be implemented in 7 regions to achieve MDG and Stop TB Partnership targets for TB control at global level, based on WHO Stop TB Strategy.

Targets are:

- At least 70% case detection rate and 85% treatment success rate among new cases of TB.
- Halving number of cases and deaths by 2015 compared to baseline year of 1990 (rates per 100,000 pop.).
- Halting and reversing incidence i.e. number of new cases per 100,000 population should be falling by 2015.
Funding requirements 2006–2015 in the Global Plan to Stop TB

Total required US$56.1 billion
Expected on current trends US$25.1 billion
Gap to fill US$31 billion
The Global Plan – what does its success depend on?

1. Whether or not country plans are consistent with the regional-level plans included in the Global Plan

2. Whether or not all the funding required for country plans is mobilized

3. Whether or not all planned activities/interventions are actually implemented (and have expected impact)
Comparisons with the Global Plan

BRAZIL

DR CONGO

UGANDA

INDIA

Bar charts showing comparisons with the Global Plan for Brazil, DR Congo, Uganda, and India. The charts display funding allocated to various programs in US$ millions for the years 2006 and 2007.
Comparisons with the Global Plan

**CHINA**

- **2006**
  - GP: $200 million
  - CR: $100 million

- **2007**
  - GP: $220 million
  - CR: $120 million

- **Categories**
  - Other
  - ACSM
  - TB/HIV
  - MDR
  - DOTS

**NIGERIA**

- **2006**
  - GP: $80 million
  - CR: $50 million

- **2007**
  - GP: $100 million
  - CR: $70 million

- **Categories**
  - Other
  - GHS
  - ACSM
  - TB/HIV
  - MDR
  - DOTS

**PAKISTAN**

- **2006**
  - GP: $80 million
  - CR: $50 million

- **2007**
  - GP: $100 million
  - CR: $70 million

- **Categories**
  - Other
  - GHS
  - ACSM
  - TB/HIV
  - MDR
  - DOTS

**INDONESIA**

- **2006**
  - GP: $80 million
  - CR: $50 million

- **2007**
  - GP: $100 million
  - CR: $70 million

- **Categories**
  - Other
  - GHS
  - ACSM
  - TB/HIV
  - MDR
  - DOTS
Planning and funding of TB control, 2007

Based on 84 countries with 90% global TB cases

Funding gap for the Global Plan: $1.1 billion in 2007
Why has a planning and budgeting tool been developed?

- Plans for individual countries for 2006 onwards not always in line with Global Plan, especially for newer components of Stop TB Strategy (country plans tend to be less ambitious)

- TB "planning and budgeting" tool developed to assist planning and budgeting in general, and in particular country planning and budgeting in line with Global Plan

- Called a "planning and budgeting" tool to highlight that:
  - Plans should include a budget, but sometimes do not
  - Budgets should be based on and in line with plan goals, objectives and planned activities
2. The tool itself: Development process
## Development process

<table>
<thead>
<tr>
<th>Date</th>
<th>Work done</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 2006</td>
<td>Proposal developed and submitted to USAID via TBCAP</td>
</tr>
<tr>
<td>March 2006</td>
<td>Proposal approved by USAID</td>
</tr>
<tr>
<td>April–May 2006</td>
<td>Draft version of tool developed: Building on planning frameworks developed for Global Plan and STB workshops for Global Fund proposal development</td>
</tr>
<tr>
<td>June–Dec 2006</td>
<td>Field-testing + practical application: Malawi, Indonesia, Kenya, Somalia, South Africa, regional planning workshop for 10 priority countries in Latin America</td>
</tr>
<tr>
<td>June–Dec 2006</td>
<td>Revisions and finalization based on field-testing</td>
</tr>
<tr>
<td>Oct–Dec 2006</td>
<td>Accompanying documentation + sharepoint site prepared</td>
</tr>
<tr>
<td>January 2007</td>
<td>Translation into French, Spanish, Russian Launch of sharepoint site</td>
</tr>
</tbody>
</table>
3. Main features of the tool – practical demonstration
The tool itself

WHO - StopTB

Planning & Budgeting for TB Control

Indonesia

SEAR

Guidance available within tool

1°: Please select your country

Menu-driven system

Choosing country via menu system selects correct set of epi/demographic/financial historical data, projections and default values

Ready-made framework for planning/budgeting for each component of TB control

Application options to enhance user-friendliness

Please select an intervention

<table>
<thead>
<tr>
<th>Status</th>
<th>Current situation: budget reported 2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>NNNNN</td>
<td>Estimating TB patients to be treated</td>
</tr>
<tr>
<td>NNNNN</td>
<td>First-line drugs</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Staff involved in TB control</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Routine programme management and</td>
</tr>
<tr>
<td>NNNNN</td>
<td>supervision activities</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Training</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Laboratory inputs</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Patient support</td>
</tr>
<tr>
<td>NNNNN</td>
<td>MDR-TB</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Collaborative TB/HIV activities</td>
</tr>
<tr>
<td>NNNNN</td>
<td>PPM</td>
</tr>
<tr>
<td>NNNNN</td>
<td>PAL</td>
</tr>
<tr>
<td>NNNNN</td>
<td>ACSM</td>
</tr>
<tr>
<td>NNNNN</td>
<td>CTBC</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Operational Research</td>
</tr>
<tr>
<td>NNNNN</td>
<td>International technical assistance</td>
</tr>
<tr>
<td>NNNNN</td>
<td>M&amp;E</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Other</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Use of general health services</td>
</tr>
</tbody>
</table>

Reports / Outcome

<table>
<thead>
<tr>
<th>Status</th>
<th>Summary of costs and funding sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>NNNNN</td>
<td>Total costs - Figure</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Sources of funding - Figure</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Total costs by Stop TB Strategy</td>
</tr>
<tr>
<td>NNNNN</td>
<td>component</td>
</tr>
<tr>
<td>NNNNN</td>
<td>Budgets &amp; sources of funding</td>
</tr>
</tbody>
</table>

Summary tables and figures automatically produced

Actions for Life

For your information, this workbook allows countries to plan and budget for TB control in line with the Global Plan to Stop TB 2006-2015 and the Stop TB Strategy. It is a flexible tool that you can adapt to your own circumstances if needed.

To Navigate, open the sheet you want to see and come back to the main menu by pressing the "BACK" button on the top right hand side of the sheet. Please take a look at the "USER GUIDE" to familiarize yourself with the colour code scheme and the use of default values.

1°: Please select your country

2°: USER GUIDE - CLICK HERE!

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Version 5.14

>> Application Options <<
The tool itself

Please select an intervention

Current situation: budget reported 2006
Estimating TB patients to be treated
First-line drugs
Staff involved in TB control
Routine programme management and
supervision activities
Training
Laboratory inputs
Patient support
MDR-TB
Collaborative TB/HIV activities
PPM
PAL
ACSM
CTBC
Operational Research
International technical assistance
M&E
Other
Use of general health services

Ready-made framework for planning/budgeting for each major component of TB control

Menu-driven system

Status bar
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To Navigate, open the sheet you want to see and come back to the main menu by pressing the "BACK" button on the top right hand side of the sheet. Please take a look at the "USER GUIDE" to familiarize yourself with the colour code scheme and the use of default values.
The tool itself – application options to enhance user-friendliness

- Applications options menu allows
  - Unprotecting or protecting of all sheets simultaneously
  - Showing or hiding names of worksheets as in a standard Excel workbook
  - Showing or hiding background data
  - Showing or hiding row numbers and column headings simultaneously in all worksheets
The tool itself – internal user guide

List of activities within interventions

Click on the cell to go directly to the desired activity. You can use this short menu to navigate within each worksheet.

Use this button to return to the Menu screen

1 Fill in all yellow cells. Read the cell on the left and write the answer in the yellow cell.
2 Numbers in blue are default values. This means, these are values we have estimated for your country based on various sources such as the Global Plan to Stop TB, 2006-2015, the annual WHO TB control report, UNAIDS and WHO/EIP.
   If you have more accurate values please overwrite these default values.
3 Calculations are shown in purple and cannot be changed.
   Epidemiological results (such as TB patients to be treated) and costing results are shown in black font, like this one.
4 All values are in US Dollars (US$) and prices of 2006.
### The tool itself – e.g. of summary table

#### SUMMARY TABLE ACCORDING TO THE STOP TB STRATEGY COMPONENTS

<table>
<thead>
<tr>
<th>COMPONENT 1: Pursue high quality DOTS expansion and enhancement</th>
<th>Budget items to be included under each component and sub-component</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Political commitment</td>
<td>Advocacy component of ACSM activities (defined as &quot;activities designed to place TB high on the political agenda, foster political will, increase and sustain financial and other resources&quot;).</td>
</tr>
<tr>
<td>1.2 Quality assured bacteriology</td>
<td>Laboratory supplies, equipment, investment/rehabilitation of lab infrastructure, EQA, training specifically related to laboratory issues, and equipment/supplies for X-rays</td>
</tr>
<tr>
<td>1.3/5.3 Standardized treatment, with supervision and patient support</td>
<td>Incentives and enablers (e.g. social support, food packages, transport vouchers) and patient charter promotion and dissemination</td>
</tr>
<tr>
<td>1.4 An effective drug supply and management system</td>
<td>First-line drugs and drug management</td>
</tr>
<tr>
<td>1.5.1 M&amp;E, including impact assessment</td>
<td>Routine surveillance and periodic surveys (e.g. drug resistance surveillance, disease prevalence surveys, surveys of HIV prevalence among TB patients)</td>
</tr>
<tr>
<td>1.5.2 Programme management and supervision activities</td>
<td>All inputs required for programme management and supervision (excl staff)</td>
</tr>
<tr>
<td>1.5.3 Human Resources</td>
<td>Staff working on TB control, all training activities except those specifically for TB/HIV, MDR-TB, PPM, PAL or CTBC, and other aspects of HRD</td>
</tr>
</tbody>
</table>

**NB years continue up to 2015**

<table>
<thead>
<tr>
<th>COMPONENT 2: Address TB/HIV, MDR and other challenges</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 TB/HIV</td>
<td>All activities classified as &quot;Collaborative TB/HIV activities&quot;, except for HIV surveillance among TB patients which is included under 1.5.1 e.g. TB/HIV coordinating bodies, joint TB/HIV training and planning, routine HIV testing for TB patients, TB screening for people living with HIV, isoniazid preventive therapy, joint TB/HIV information/education/communication, CPT and antiretroviral treatment for TB patients. Excludes any staff already accounted for under 1.5.3.</td>
</tr>
<tr>
<td>2.2 Management of MDR-TB</td>
<td>All inputs and activities needed for MDR-TB management, excluding laboratory tests included in 1.2 and excluding DRS included in 1.5.1</td>
</tr>
<tr>
<td>2.3 TB control for prisoners, refugees and other high-risk groups</td>
<td>All TB control activities specifically related to these population groups. If you have not included activities and budget for these population groups separately within each page of the tool, you can estimate what proportion of your budget applies to 2.3 according to the proportion of patients belonging to these population groups.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMPONENT 3: Contribute to health system strengthening</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Actively participate in efforts to improve system-wide policy, human resources, financing, management, service delivery, and information systems</td>
<td>Any budget required for NTP staff to participate in system-wide activities/initiatives. Does NOT include TB specific activities such as training of general health staff on TB control, training for TB programme staff, salaries for TB programme staff, purchase of laboratory supplies and equipment, which should be included under sub-components 1.2, 1.5.2, and 1.5.3. If activities cover both TB-specific and non-TB specific activities, include the non-TB specific component here.</td>
</tr>
<tr>
<td>3.2 Share innovations that strengthen systems, including the Practical Approach to Lung Health (PAL)</td>
<td>PAL</td>
</tr>
<tr>
<td>3.3 Adapt innovations from other fields</td>
<td>To be defined by individual countries</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>COMPONENT 4: Engage all care providers</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1/4.2 PPM, including ISTC</td>
<td>All PPM activities, excluding first-line drugs and diagnostic test already included under 1.2 and 1.4</td>
</tr>
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<tr>
<th>COMPONENT 5: Empower people with TB and communities</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1 ACSM</td>
<td>All ACSM excluding Advocacy (already included under 1.1)</td>
</tr>
<tr>
<td>5.2 Community TB care</td>
<td>All CTBC activities not covered under ACSM</td>
</tr>
<tr>
<td>5.3/1.3 Patients’ charter for TB care</td>
<td>Already included in sub-component 1.3</td>
</tr>
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<thead>
<tr>
<th>COMPONENT 6: Enable and promote research</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 Programme-based operational research</td>
<td>Operational research (NB include Phase 4 trials here, if relevant).</td>
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SUMMARY TABLE
ACCORDING TO THE STOP TB STRATEGY COMPONENTS

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</tr>
</tbody>
</table>
Key features – the welcome page

1. Excel-based

2. Ready-made framework for planning and budgeting for each major component of TB control

3. Menu system for choosing country to plan and budget for

4. In-built user guide – explains colour coding scheme, default values, how to navigate between and within worksheets

5. Summary tables and figures automatically produced, including summary tables required for Global Fund grant agreements (Rd 6) and proposals (Rd 7)

6. Applications options feature to enhance user-friendliness

7. One worksheet for each major component of TB control
Key features – beyond the welcome page

1. Selection of country automatically selects the correct set of historical epidemiological, demographic and financial data and epidemiological/demographic projections up to 2015

2. Menu system for navigating within and between worksheets

3. Each worksheet allows for making either
   a. "Quick estimates" OR
   b. Detailed development of new plans and budgets

4. Each worksheet includes ready-made list of likely inputs and activities to consider as well as default values, including relevant default values from the Global Plan

5. Tool is flexible e.g. names of inputs and activities and default values can be modified as appropriate

6. Status bar

7. Summary figures and tables – e.g. summary figure for budget by line item, summary table for one year of costs by SDA and funding source, summary table for WHO TB data collection form
4. General benefits of using of the tool
General benefits of using the tool

1. Ready-made framework for planning and budgeting for each major component of TB control

2. Ready-made list ("checklist") of inputs/activities to consider for each component of TB control

3. In Excel, therefore easy to revise or update plans/budgets when necessary

4. Plans and budgets for TB control set out comprehensively in one place, in standardized format

5. Much of plan document itself can be produced by writing written text description of what is set out in tool (e.g. recently done in Zambia)
General benefits of using the tool

5. Much of plan document itself can be produced by writing a written text description of what has been set out in the tool

- Background epidemiological situation and financing (historical data within the tool)
- Goal and objectives – can be written based on targets set in tool
- Components of Stop TB Strategy to be implemented to achieve targets
- Activities to be implemented and inputs required, for each major component of the Stop TB Strategy (*NB not all will be relevant/top priorities for the next 2-3 years*)
- Budget summary with detailed breakdown and assessment of funding required, existing funding and funding gap to be filled
- How monitoring and evaluation will be done
General benefits of using the tool

6. Provides solid foundation for resource mobilization including discussions with national/local governments, applications to Global Fund and other donors

7. Automatically produces summary budget tables required for Global Fund proposals

8. Provides framework for monitoring and evaluation of plan implementation as well as comparisons among and within countries

9. Automatically produces financial information requested on annual WHO TB data collection form
General benefits of using the tool

Overall, these benefits should help to improve the quality of planning and budgeting.
5. Promotion and practical application
# Promotion and practical application

<table>
<thead>
<tr>
<th>Date</th>
<th>Work done</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dec 2006-Jan 2007</td>
<td>Presentation to WHO EURO regional and county office staff followed by training in how to use the tool</td>
</tr>
<tr>
<td>Jan-Feb 2007</td>
<td>Discussions with Global Fund r.e. use of tool in Rd 6 and Rd 7&lt;br&gt;Presentation of tool at workshops for countries with Round 6 grants</td>
</tr>
<tr>
<td>Feb 2007</td>
<td>PPM inter-regional planning and budgeting workshop for 10 countries, Cairo</td>
</tr>
<tr>
<td>March 2007</td>
<td>Planning and budgeting 5-day workshop for priority African countries in Brazzaville, 19 countries represented</td>
</tr>
<tr>
<td>March-May 2007</td>
<td>• Presentation of tool at Global Fund Round 7 workshops in Nepal (SEAR, EMR), Cairo (EMR, AFR), Harare and Dakar (AFR)&lt;br&gt;• Follow-up support to countries that have used the tool&lt;br&gt;• Adaptation to sub-national level in Indonesia</td>
</tr>
<tr>
<td>June 2007</td>
<td>Workshop for TBCAP technical partners and countries</td>
</tr>
<tr>
<td>August 2007</td>
<td>Workshop for regional and country WHO/STB staff in WPRO as well as NTP staff from Cambodia, Philippines and Mongolia</td>
</tr>
<tr>
<td>September 2007</td>
<td>Second planning and budgeting workshop for African countries (Ghana, Accra)</td>
</tr>
</tbody>
</table>
Promotion and practical application

Complete plans and budget in the tool for:

♦ Kenya
♦ Malawi
♦ Zambia
♦ Gabon
♦ South Africa (almost)
♦ Uzbekistan

And in process for an additional 11 African countries
Plus demand for regional workshops in 2008 in Latin America, South-East Asia
6. Requirements for using the tool
Requirements

1. Understanding of TB control situation and what interventions are needed to achieve goals, objectives and related targets

2. Investment of time and effort at the beginning
   - Working through the tool can be time-consuming
   - Tool may seem "daunting" at first
   - Willingness and ability to think

3. Some knowledge and understanding of Excel
   - Field-testing showed it is important to build capacity in this area