

DECIDE TB NEWSLETTER Nº5

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Improve the diagnosis of tuberculosis in children with treatment decision algorithms



EDITORIAL

With Treatment Decision Algorithms (TDAs) now implemented in all participating facilities in the 10 districts in Mozambique and Zambia, the project reaches a pivotal moment. The project focus now turns to data consolidation, analysis, and translation of findings into evidence to inform national and global TB strategies. Refresher trainings implemented in Zambia and soon to be launched in Mozambique are further strengthening TDA implementation during the follow-up phase that will last until mid-2026.

The 2026 World TB Day theme — “Yes! We Can End TB: Led by countries, powered by people” — reflects the foundation of the Decide TB project. Country leadership has driven implementation and science, while frontline healthcare workers have ensured TDAs are applied in routine practice. Ongoing efforts to optimize implementation, as detailed in the “News from the Field” section, further strengthen the potential for sustainable integration within national programmes.

Decide-TB is now actively preparing for the Union World Conference on Lung Health in November 2026, where key trial results will be presented. As we move toward dissemination, our objective remains clear: to translate robust scientific and practical evidence into actionable policy and improved outcomes for children affected by tuberculosis.

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FUNDER

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As we commemorate **World TB Day 2026**, Decide-TB embraces this year's WHO theme — “**Yes! We Can End TB: Led by countries, powered by people.**” This message reflects the core of our work.

Led by countries – The National TB Programmes in Mozambique and Zambia as key project partners leading the piloting TDAs within primary and district health systems and aligning this innovation with national priorities. Country research teams at Instituto Nacional de Saúde, University Eduardo Mondlane, and University of Zambia are playing a key role in coordination, implementation and generating evidence to inform scale up and adoption.

Powered by people – Healthcare workers and communities are central to the success of TDAs. Through strengthened training, supervision and use of digital tools, Decide-TB supports frontline teams in improving childhood TB diagnosis and care. Researchers contributing to the project at national and international level also dedicate their expertise, talent, time and energy to this great evidence-generating effort by designing comprehensive packages, conducting trainings, supporting field implementation and mentoring healthcare workers.

By transforming field experience into sustainable integration, Decide-TB contributes to scalable, people-centred TB services — moving closer to the shared goal of ending TB.



NEWS FROM THE FIELD

Optimizing the delivery and implementation of the comprehensive TDA-based approach

As Decide-TB is now well advanced into its follow up phase of implementation, all participating facilities in Mozambique and Zambia have now gained hands-on experience using Treatment Decision Algorithms (TDAs) with enrolled patients, with continued use and monitoring of the TDAs planned over the coming year. With the TDA intervention now launched across all trial sites, the project has reached a critical stage: moving from deployment to optimization.

Based on field experience and initial implementation feedback, the consortium highlighted the need to optimize the delivery and implementation of the comprehensive TDA-based approach. Following internal review, dedicated workshops and consultation with the Scientific Advisory Board, the optimization consisted of reinforcing both clinical delivery processes and system-level implementation. Key areas of optimization included refresher trainings, EMR simplification, updated job aids, and strengthened supportive supervision. The detailed components of this optimization are presented below.

Strengthening the clinical TDA package

Field feedback and clinical mentoring visits led to targeted revisions of the procedures supporting the use of the TDAs, including through the development of refresher training sessions for healthcare workers.

Particular attention was given to strengthening the assessment of vital signs and nutritional status, clarifying criteria for identifying children eligible for the 6-month treatment regimen, and reinforcing community-level screening through trained community health workers. Updated job aids were developed to improve the use of TDAs during consultations.



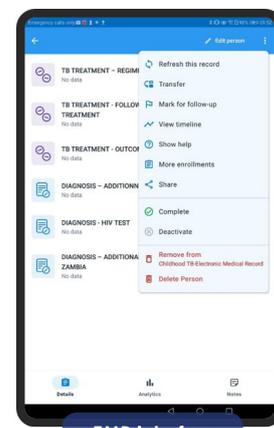
Decide TB Job Aids - TDA A

Streamlining the digital (EMR) tools

Experience with the electronic medical record (EMR) resulted in significant simplification of this data collection tool. The interface has been updated to make it more user-friendly. Redundant variables were removed, screening steps were streamlined, and the severity assessment section refined.

The clinical decision support system (CDSS) embedded within the EMR was also adjusted to better align with clinical workflows and support decision-making. Tablet availability was increased to facilitate smoother patient flow in primary health centres and district hospitals.

In addition, training materials on EMR use were developed and integrated into refresher training sessions to strengthen health care workers' ability to use the tool effectively in routine practice.



EMR interface screen

Reinforcing supportive supervision

Support supervision has been strengthened through conducting structured tele-supervision, continuous communication channels and collaborative involvement of district and provincial leadership teams. Supervision reports were redesigned to ensure recommendations are actionable, clearly assigned, prioritized, and time-bound.

Consolidating the training model

The cascade training model has been formalized, with clearer roles, accountability mechanisms, and increased emphasis on practical sessions. Greater attention is now being paid to the systematic involvement of key implementers at facility level.

Refresher trainings were conducted in each health facility in order to optimize the delivery and implementation of the comprehensive TDA-based approach. The agenda included TDA and clinical aspects of the TDAs, EMR use, clinical case studies and practice using the EMR and integration of the TDAs into health system.

Through this optimization process, Decide TB is aiming to strengthen the feasibility and scalability of the TDA-based approach, thus bringing TDAs closer to sustainable integration within national TB programs.

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