

## Nigeria Implementation of the FAST strategy in Lagos State

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### Background

Lagos State with a population of over 24 million, accounts for 8.4% of the national TB burden (Lagos Bureau of Statistics). Lagos State is made up of 20 districts and over 3,450 health facilities, 953 of which are providing TB services. These include Primary Health Centers (PHCs), secondary/general hospitals and tertiary institutions. Poor knowledge of TB and infection control measures was evident in most facilities and though quite a number of them have an infection control committee, these were often non-functional. The FAST strategy was introduced in 2015, via the Challenge TB (CTB) project to stop the spread of TB in healthcare facilities. FAST stands for **F**inding patients with (presumptive) TB, **A**ctively, **S**eparating and **T**reating them effectively, and is implemented in seven general hospitals, one tertiary hospital, one military hospital and one comprehensive PHC.

**FTMP implementation area:** Triage and screening & Quality Prevention and Care

### Description

The FAST Strategy was deployed to increase knowledge of TB and infection control among general health care workers (HCWs) and to increase TB case finding in high burden health facilities in the CTB-supported districts in Lagos State. Finding unsuspected TB patients at the OPD can be done simply by enquiring about TB symptoms, for example coughing, fever, night sweats and weight loss. As per national guidelines, nursing and auxiliary staff are assigned daily to, identify those patients with a cough, fast track them for screening for other TB related symptoms, and promptly collect sputum from those with presumptive TB for lab investigations, including rapid molecular testing. The intervention started with a 3-day on-site training for state, district and 15-20 key focal persons comprising of doctors, nurses, laboratory and information management personnel across all service delivery points. A representative from the health facility's infection control committee also took part in order to understand what infection control measures were in place and agree on how to revive dormant infection control committees.. The training comprised classroom presentations and practical sessions, which included visits to the service delivery points. Participants could provide feedback to the hospital's management and the key focal persons at the respective service delivery point.

Monthly follow-up review meetings were instituted. These review meetings addressed key issues including, comparisons of presumptive patients with hospital attendance, collecting participant feedback on referral activities in the month(s) under review, cross checking referrals' time to diagnosis and time to treatment for diagnosed TB patients from the respective service delivery points in comparison with previous months. Also discussed were the challenges facing FAST implementation, e.g. missing presumptive and diagnosed patients, lab challenges and enrollment on treatment.



Training on FAST Strategy at General Hospital Badagry: didactical presentation (L) and practical session (R) (Courtesy of David Folivi)

### Outcomes/successes

There was an increase in the number of referrals (presumptive TB patients) across all facilities from 7,952 in the year before the intervention to 11,515 in the following year. There was also an increase in the number of notified TB patients from 1,486 to 2,275 in the same period. (see the figure below). The principal nursing officer of a general hospital, who identified a colleague as a presumptive TB patient, has now become a TB champion. The patient turned out to be the first reported HCW with drug-resistant TB in Lagos State.

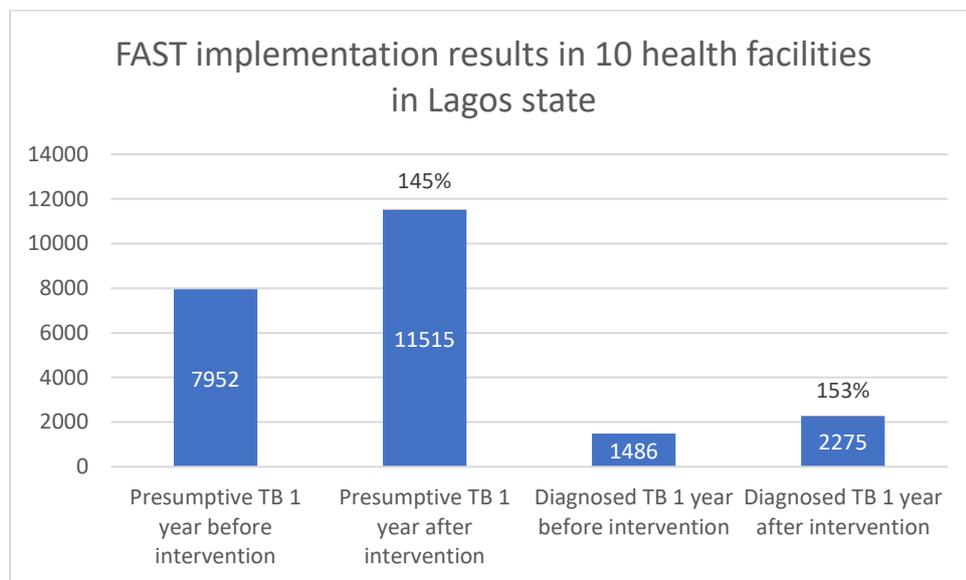


Figure. TB case finding results through FAST strategy

### Lessons learned

Besides contributing to TB case notification in Lagos state, these facilities have potentially minimized the risk of nosocomial TB infection as time to diagnosis and treatment has been reduced from an average of 1-2 weeks pre-intervention to 1-3 days post-intervention. In addition to the staff trainings, regular review meetings, supportive supervision, advocacy supporting TB stigma and TB infection control have all contributed to the success of this intervention.

### Sustainability/scale-up

The successful implementation of the FAST Strategy has facilitated a scale up to other health facilities in Lagos and other CTB-supported states. It has been adopted by the National TB Program for implementation in all government health facilities nationwide. Other implementing partners are also encouraged to support this intervention.