

# ANNUAL PROGRESS REPORT

YEAR 2020



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## **The Center for Health Policies and Studies (PAS Center)**

**The mission** of the Center for Health Policies and Studies is to build democratic societies through improvement and development of health and social sectors, policy advocacy, capacity building and reform support.

The PAS Center is a regionally exposed Moldovan, independent, non-profit, non-political organization that implements a vast range of public health programs related to health systems, communicable and non-communicable diseases and social accountability in Moldova and Eastern Europe and Central Asia region. Founded in 1999 to take over the activities of the Medical Internet Program of the Open Society Foundations and ensure its sustainable development, in 2007 we underwent reorganization including the reshaping of mission and objectives. To date, PAS Center implemented a portfolio of projects valued for more than USD 40 million, with an annual average of USD 4 million.

Our team includes 20 persons working in social and public health areas. Key positions include: director, financial director, program coordinators and managers (Regional TB/Health Systems, TB, Public Health and Health Systems, Social Accountability, Communication, Media), team of accountants, specialists in M&E, procurement and logistics, IT and others. Our team ably provides program and financial management of high-intensity regional multi-partner and national grants of the Global Fund and other donors, analyzes public policy-making and effectively advocates for public interest, conducts qualitative and quantitative research and builds capacity at the national and regional levels. PAS Center has a proven track record of public health programs implementation focused on responding to the needs of the key affected populations; civil society and community systems strengthening in HIV, TB and STIs, hepatitis B and C; conducting studies, assessment and operational research; providing technical assistance in community mobilization and patient centered care models. Additionally, PAS Center has a watchdog and think tank functions.

The PAS Center past and current projects are implemented in collaboration with national health authorities and agencies, national and regional civil society organizations and networks, key population networks, World Health Organization Regional Office for Europe and 11 country offices, academia and other bilateral and multilateral organizations. These projects are or have been financed by the Global Fund, the World Bank, Open Society Foundations, UNFPA, Bloomberg Philanthropies (Campaign for Tobacco-Free Kids and Tobacco-Free Kids Action Fund)", European Commission, UNICEF, Swiss Agency for Development, Japan Social Development Fund, and others. PAS Center is a Principal Recipient of the Global Fund national TB Grant as part of the dual-track financing mechanism. In 2016-2018, PAS Center implemented a multi-partner project covering 11 countries: Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Republic of Moldova, Tajikistan, Turkmenistan, Ukraine and Uzbekistan (2016-2018). It aimed to prevent TB and drug-resistant TB, and to improve TB treatment outcomes by increasing political commitment and accelerating adoption of people-centered models of care. In 2018 PAS Center and its implementing partners have been awarded a multi-country grant for 11 EECA countries: TB-REP 2.0 Advancing People-Centered Quality TB Care – From the New Model of Care Towards Improving DR-TB Early Detection and Treatment Outcomes for years 2019-2021. PAS center acts as a fiduciary agent for grants from Centers for Disease Control Atlanta, National Institutes of Health/Yale University to National Agency of Public Health and National Institute of Phthysiopneumology after Chiril Draganiuc.

## ACRONYMS AND ABBREVIATIONS

CSO	Civil Society Organization
DOT	Directly Observed Treatment
DR-TB	Drug Resistant Tuberculosis
EECA	Eastern Europe and Central Asia
Global Fund	The Global Fund to Fight AIDS, Tuberculosis and Malaria
HLM	High Level Meeting
HPRC	Hospital Performance Report Card
IDUIT	Injecting Drug User Implementation Tool
IEC	Information Education Communication
LEM	List of Essential Medicines
MDR-TB	Multidrug-resistant Tuberculosis
MSMIT	Men Who Have Sex with Men Implementation Toolkit
NGO	Non-governmental Organization
NHIC	National Health Insurance Company
NLEM	National List of Essential Medicines
NTP	National Tuberculosis Program
OMI	Open Medical Institute
PAS Center	Center for Health Policies and Studies
PHC-PIA	Primary Health Care Performance-Based Incentives Audit
RFA	Regulatory Framework Assessment
RM	Republic of Moldova
STP	Stop TB Partnership
SRH	Sexual Reproductive Health
SWIT	Sex Workers Implementation Tool
TA	Technical Assistance
TB	Tuberculosis
TRANSIT	Transgender Implementation Tool
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VOT	Video-observed Treatment
WHO	World Health Organization

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## TB REGIONAL EECA PROJECT (TB-REP 2.0) ON ADVANCING PEOPLE-CENTERED QUALITY TB CARE – FROM THE NEW MODEL OF CARE TOWARDS IMPROVING DR-TB EARLY DETECTION AND TREATMENT OUTCOMES

**Period of implementation:** January 2019 – December 2021

**Budget:** USD 4,998,976

**Donor:** The Global Fund to Fight AIDS, Tuberculosis and Malaria

**Goal:** The overall goal of the program is to foster timely TB case detection and improved treatment outcomes in patients with special emphasis on drug-resistant TB in eleven countries of Eastern Europe and Central Asia through meaningful involvement of communities and civil society and integrated people-centered TB care delivery systems able to address the needs of key and vulnerable populations.

### **Project objectives:**

- (1) To ensure full engagement of communities and civil society in TB prevention and care for improving TB and DR-TB case detection and patient care outcomes;
- (2) To strengthen health systems to enable integrated patient-centered TB and DR-TB care delivery systems for meeting challenges and addressing the needs of key populations.

**Countries:** Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.

**Implementing partners:** World Health Organization Regional Office for Europe (WHO/Europe), TB Europe Coalition (TBEC), TB People and Global TB Caucus (GTBC) at regional level and Ministries of Health, National TB Programs (NTP) and civil society organizations (CSOs) at country level.

In March 2020, in the context of the exceptional international situation created by the COVID-19 pandemic and the restrictions set in place by many countries in the EECA region, the Center for Health Policies and Studies, together with TB-REP 2.0 partners has taken actions to redesign and reorganize project activities to suit changing circumstances with more focus on tele-working and virtual interaction.

### **Activities carried out:**

#### **Focused on enhanced case finding:**

1. *Collect evidence on barriers to finding people with TB who are missed by national programs and who delay access to care through roll-out of communities, rights, and gender (CRG) assessment.*
  - CRG assessments based on Stop TB Partnership methodology and tools are finalized in three TB-REP countries - [Georgia](#), [Kazakhstan](#) and [Tajikistan](#) (with the support from the GF CRG Strategic Initiative).
  - Implementation of CRG informing activities in (i) Georgia - to reduce stigma and strengthen collaboration between CSO and governmental stakeholders and (ii) Kazakhstan - to integrate gender-sensitive and human rights-based approaches into the national case-finding strategy.
  - CRG assessment is initiated in the fourth TB-REP country - Armenia with CRG introductory workshop for the country team (remotely, September 2020) and country-level multi-stakeholders inception meeting to discuss desk review,

assessment methodology and tools, as well as prioritize the key populations for the conducted data collection (November 2020).

- The regional overview '[Breaking the Silence: Human Rights, Gender, Stigma and Discrimination barriers to TB services in EECA Region](#)' was developed based on CRG assessments conducted in Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine and [virtually presented](#) by PAS Center in December, 2020 with a [high-level keynote address](#) from the Global Fund, Stop TB Partnership, WHO EURO.
2. *Bridge the gap between civil society and the health services to provide people-centered TB services.*
    - Under the lead of TBEC, National Dialogues to bridge the gap between CSOs, TB affected communities and NTP were conducted in 3 countries: Armenia (October 2020), Ukraine (November 2020) and Tajikistan (October-December 2020). As a result, national teams developed roadmaps to strengthen partnership between the civil society and governmental stakeholders, which were designed in accordance with the country priorities and processes: (i) for Armenia, as a set of recommendations to be included in the NSP to ensure the engagement of CSOs and TB affected communities in TB response, (ii) for Ukraine, as a set of recommendations to the Action Plan for National ACSM Strategy and (iii) for Tajikistan as a strategy for the engagement of civil society and TB-affected communities in achieving national goals for protection of the population from TB, with a roadmap for 2021-2023.
    - [Regional policy](#) to strengthen partnership between civil society, TB affected communities and governmental stakeholders was developed.
  3. *Standardize package of community-based services and provide tools to community-based services to provide support to case finding.*
    - The draft Standardized Package of Community-Based Supportive People-centered Services to improve TB outcomes along with the costing methodology (Standardized package) was jointly developed by TBEC, PAS Center and WHO EURO. Aimed to support countries in eastern Europe and central Asia in implementing the people-centred model of care, the Standardized package provides recommendations and tools to engage the community and civil society actors in the service delivery to better address patients and communities affected by TB and support healthcare providers. The Standardized package will be published under WHO EURO umbrella in 2021 after a peer review process and adapted by TB-REP countries to specific country needs and contexts.
    - PAS Center and country-level CSO partners carried-out activities on promoting social contracting, as part of the small grants program implemented in Kazakhstan (ALE "Kazakhstan Union of People Living with HIV"), Moldova (National Association of Tuberculosis Patients "SMIT"), Tajikistan (Association "Stop TB Partnership Tajikistan") and Uzbekistan (Non-governmental organization Republican Information – Education Centre "INTILISH").

#### ***Focused on improving early diagnosis:***

4. *Developing a planning approach to rapid and modern diagnostics at subnational level.*
  - Technical assistance to strengthen TB diagnostics network by developing and operationalizing a planning approach to rapid and modern diagnostics at sub-national level was initiated in Belarus and Ukraine.

#### ***Focused on improving quality of TB care and case holding:***

5. *Rollout of community-based monitoring application through small grants.*

- OneImpact digital platform was developed by Stop TB as a tool for community-led monitoring (CLM) of TB response. It was adapted to countries' needs and is available for download within the framework of small grants implemented in Belarus (Republican Public Association "Defeat Tuberculosis Together"), Kyrgyzstan (Public Foundation "AIDS Foundation East-West in the Kyrgyz Republic"), Ukraine (TBpeople Ukraine), Azerbaijan ("Saglamliga Khidmat") and Kazakhstan (ALE "Kazakhstan Union of People Living with HIV").
  - Training for trainers for CLM OneImpact was conducted in March 2020 in Azerbaijan, Belarus and Kyrgyzstan.
  - OneImpact application is used by the people affected by TB in Azerbaijan, Belarus, Kyrgyzstan and Ukraine. The response team of the implementing CSO partners is providing real time response on reported barriers.
  - Data generated by the OneImpact platform is presented for action to country stakeholders in Azerbaijan, Kyrgyzstan and Ukraine.
  - In October 2020 another TB-REP country - Kazakhstan initiated and conducted the adaptation workshop and by the end of the year the final version of the app was available on the stores.
6. *Patient Pathway Analysis*
- Patient Pathway Analyses (PPA) conducted in Kazakhstan, Kyrgyzstan and Tajikistan, PPA country reports drafted and available for countries' teams analyses and validation.
7. *Country work to improve clinical practice*
- Virtual Medical Consilium (VMC) was established and is providing support to countries for management of patients treated with modified fully-oral shorter DR-TB treatment regimens (mSTR). During the year, monthly webinars were organized to strengthen capacity in clinical management of DR-TB.

### ***Focused on increasing TB treatment adherence:***

8. *Small grants to advocate for the integration of the patient support package into the national model of TB services.*
- Promotion of people-centered approaches, including advocacy activities for the integration of the patient support package into the national model of TB services (mentioned under item 3 above) makes a part of the small grants implemented in Moldova (National Association of Tuberculosis Patients "SMIT"), Turkmenistan (National Society of the Red Crescent of Turkmenistan), Tajikistan (Association "Stop TB Partnership Tajikistan"), and Uzbekistan (Non-governmental organization Republican Information – Education Centre "INTILISH").
  - Video-supported treatment (VST), as a people-centered model of providing TB treatment, is rolled out in Tajikistan and Turkmenistan, where the platform "I LIKE VST", developed by PAS Center has been adjusted to countries' context.
9. *Support development of digital health strategies and innovative approaches.*
- Additional work on VST conducted by WHO. In 2020, a planning tool, allowing countries to structure their efforts, document the replication process and track the implementation progress has been developed and online training on its use has been provided to the NTP staff and other stake-holders in: Azerbaijan, Armenia, Kyrgyzstan and Uzbekistan.

### ***Focused on addressing health system barriers:***

10. *Capacity building for aDSM*
- WHO workshop on "Strengthening vigilance in healthcare systems: Support and strengthen country-adapted Active tuberculosis drug-safety monitoring and

management (aDSM) systems and align its requirements to national pharmacovigilance (PV) approaches” was conducted as an on-line WHO certified course in December 2020, tailored for the needs of four countries: Azerbaijan, Tajikistan, Turkmenistan, Uzbekistan.

**11. Support improvement of TB medicines regulation practices in countries**

- Preparation for self-assessment of the WHO Collaborative Registration Procedure in Uzbekistan started in October 2020. The work and self-benchmarking is ongoing and, therefore, it is expected that the Institutional Development Plan (IDP) for the National Regulatory Authority (NRA) will be developed and approved by the MoH in 2021.

**12. Support countries in introducing new treatment regimens for MDR-TB in line with latest WHO recommendations**

- Throughout 2020, the WHO Regional Office has been supporting 11 EECA countries with transition towards fully-oral treatment regimens for RR/MDR-TB. WHO-led regional operational research on introduction of modified fully-oral shorter treatment regimens for RR/MDR-TB has been supported by TB REP 2.0 Project during October-December 2020.

**13. Establishment and operation of intercountry teams of professionals to work on aDSM, regulatory systems and procurement mechanisms.**

- The virtual collaborative space for the inter-country practitioners’ network established based on nominations by the Ministries of Health of the countries has been configured for the network activity and a webinar on implementation of the WHO Collaborative Registration Procedure was conducted jointly with the WHO EURO in December 2020.

**14. Build national M&E systems.**

- The “Regional Monitoring and Evaluation Workshop for Capacity Building of National TB Surveillance Focal Points on Data Collection and Reporting to the Global TB Database” was redesigned as country focused mentoring assistance provided remotely to the national TB surveillance focal points in collecting data, including TB financial data, and reporting to the global TB database during April-June 2020.

**Focused on increasing the political visibility and commitment to TB reform:**

**15. Involvement of the Parliamentary Caucuses to provide political support to advance TB agenda.**

- Regional calls with heads of national TB caucuses conducted in April 2020 and June 2020.
- Online bilateral visit of a Ukrainian MP to Kazakhstan was conducted by GTBC (November 2020).
- Six Parliamentary hearings were conducted in Belarus (March 2020), Tajikistan (April 2020), Armenia (May 2020), Azerbaijan (May 2020) and Ukraine (April and June 2020).

**16. Advocating for policy changes according to developed policy recommendations**

- The regional level [Guide for TB Budget Advocacy](#) and [briefing package on budget advocacy](#) developed by TBEC in 2019 have been published.
- Two country-specific analysis of the environment and approaches on implementation of the social contracting were conducted for [Belarus](#) and [Moldova](#) and published alongside with two other developed in 2019 ([Kazakhstan](#) and [Ukraine](#)).
- A series of webinars for CSO were conducted in December 2020 through cooperation between two regional programs – TB-REP 2.0 with support from PAS

Center and TBEC and - SoS with the support of Alliance for Public Health and Institute of Analysis and Advocacy on (i) [quality assessment of HIV and TB services in the context of transition to public funding](#); (ii) [regulations of HIV and TB services, standards and tariffs, their importance in the process of transition to public funding](#); (iii) [mechanisms of financing HIV and TB services from budget funds](#) and (iv) [financing of services through national health insurance agencies - current practice and prospects](#) (December 2020).

### ***Focused on strengthening the capacity of civil society:***

**17. *Monitoring and communication activities to support project monitoring and ensure progress; tracking the progress towards improved quality of care and increased access to tests and drugs***

- On-site technical support provided by the PAS Center programmatic team to CSO partners in Azerbaijan, Belarus, Georgia, Moldova, Kyrgyzstan and TB People team, as well as on-line technical assistance and on-going supportive supervision to all country-level and regional-level CSO partners.
- An integrated [TB-REP platform](#) was developed by PAS Center to share regional and national partners' knowledge, experience and resources developed under TB-REP 2.0 via one single entry point. The platform pools the tools developed to 1) [build and consolidate the capacity of TB community and CSOs](#); 2) provide a space for Inter-country Practitioners Network to foster rapid exchange of knowledge and practical expertise on aDSM, regulatory and procurement aspects related to ensuring affordable, quality and sustainable access to TB medicines; 3) provide a discussion space for the Medical Consilium on RR/MDR-TB and TB clinicians from TB-REP countries on implementation of the all-oral Shorter Treatment Regimen for RR/MDR-TB, latest guidelines on latent TB, management of TB/DR-TB complicated clinical cases, 4) [provide a project regional and country overview](#), 5) [share the regional and national level events calendar for TB-REP partners](#), 6) [share the webinars and online interventions from TB-REP partners](#), and 7) [share the reports and publications produced under the grant](#).
- Annual planning meeting was held in February 2020 in Copenhagen which brought together the regional partners for joint analyses of progress, challenges and opportunities, mapping of regional and country level priorities, screening of regional and country level support from other donors for synergies, discussing communication and coordination mechanisms between partners, drafting detailed implementation report of the year.

**18. *Building the advocacy and operational capacity of CSOs***

- A series of on-line coaching visits for CSO partners was conducted under the lead of TBEC in Ukraine (May-June 2020), Tajikistan (June-September 2020), Kazakhstan (September-December 2020) and Kyrgyzstan (November-December 2020).
- The regional capacity-building event on operational role of CSOs has been redesigned to a 5-day online course "[Tools for CSOs](#)" to be launched in February 2021 on TeachMeTB e-learning platform.

**19. *Capacity building through an e-learning platform for community groups and civil society providers.***

- An e-learning platform was jointly designed by TBpeople and PAS Center to build capacity of a wide range of actors working on TB advocacy and service delivery by providing interactive, evidence-based training on all topics related to TB prevention, diagnosis, treatment, care and support, human rights, integrated people-centered care, advocacy, communication, awareness raising, service

provision, etc. In 2020 the work on the content development and personalization of the platform has been initiated. The content for the first training module '[TB basics](#)' was finalized by the end of 2020 and is available for participants since January 2021.

### **Outputs and products developed during 2020:**

1. CRG assessment reports in [Georgia](#), [Kazakhstan](#) and [Tajikistan](#);
2. Regional CRG overview [Breaking the Silence: Human Rights, Gender, Stigma and Discrimination barriers to TB services in EECA Region](#);
3. Regional policy documents [Transition to People-centered Model of TB Care: Role of Civil Society and Affected Communities](#);
4. Training materials for the WHO workshop on “Strengthening vigilance in healthcare systems: Support and strengthen country-adapted Active tuberculosis drug-safety monitoring and management (aDSM) systems and align its requirements to national pharmacovigilance (PV) approaches”;
5. [Guide for TB Budget Advocacy](#) and [Briefing Guide for TB Budget Advocacy](#)
6. Analytical reports on opportunities for engaging civil society organizations and social contracting to ensure sustainable TB services in [Belarus](#), [Kazakhstan](#), [Moldova](#) and [Ukraine](#);
7. Integrated [TB-REP platform](#) that gives access to all resources and tools developed under the program by regional and national partners ([www.tb-rep.net](http://www.tb-rep.net));
8. E-learning platform for capacity building of community groups and civil society actors working on TB advocacy and service delivery [TEACHmeTB \(https://teachmetb.net\)](https://teachmetb.net).

## **STRENGTHENING TB CONTROL IN MOLDOVA**

<b>Period of implementation:</b>	January 2018 – December 2020
<b>Budget:</b>	EUR 3,960,620
<b>Donor:</b>	The Global Fund to Fight AIDS, Tuberculosis and Malaria

**Goal of the Project:** To reduce the burden of tuberculosis in Moldova by ensuring universal access to quality diagnoses and treatment, implementing sustainable patients – centered approaches, addressing the needs of high-risk groups and strengthening NTP management capacity.

### **Project objectives:**

- (3) To ensure universal access to timely and high quality diagnosis of all forms of TB including M/XDR-TB;
- (4) To strengthen patient- centered approaches to M/XDR-TB treatment;
- (5) To improve management of HIV-associated tuberculosis.

### **Activities carried out:**

1. **Case detection and diagnosis:** MDR-TB related intervention TA for ensuring functionality of the GenXpert method of testing; procurement of laboratory consumables for GeneXpert testing; monitoring visits to district level facilities to support further implementation of Xpert MTB/RIF technology; capacity building of laboratory specialists from national and local levels.

2. **Treatment:** MDR-TB related interventions concerning provision of incentives to MDR-TB patients from both banks of the Dniester River from civil and penitentiary system; provision of incentives to patients with sensitive forms of TB from penitentiary system from both banks of the Dniester River and from civil sector from Transnistria region.
3. **Community MDR-TB care delivery with related interventions:** providing support to Community Centers for Support of TB patients on outpatient treatment; capacity building for the teams of Community Centers through training courses and on-the-job support during monitoring visits.
4. **Key populations (MDR-TB) support and enhancing their involvement through small grants program for NGOs:** TB, DR-TB and TB/HIV control in groups at-risk; support for homeless people at municipal level in Chisinau; TB, DR-TB and TB/HIV control in prisoners and ex-prisoners.
5. **Prevention of MDR-TB through peer to peer educators:** provision of IEC materials for DR-TB prevention and control; broadcasting video / audio materials focused on IEC.
6. **Collaborative activities with other programs and sectors (MDR-TB).**

### **Outputs:**

1. **Community MDR-TB care delivery:**
  - PAS Center has signed agreements with 27 Community Centers for Support of TB patients on outpatient treatment (further CC, which legally make part of District Public Medical Institutions). CCs provided different types of services to 1459 patients. During the last year, 208 cases of sensitive TB and 228 cases of MDR-TB at risk of treatment interruption were returned back to treatment. Also 489 cases were prevented from being lost to follow up.
  - Psychologic counselling services were provided to 139 patients. On average they provided 4.5 sessions per patient.
  - In order to improve DOT implementation at the local level, 902 working visits to primary health care services and 3372 home visits to patients and their family were organized with the aim to prevent risk of treatment interruption.
  - The CC teams jointly with TB service organized 143 working meetings with local public authorities, 215 meetings with social assistance institutions, 254 cases of collaboration with other stakeholders at the district level (child protection institution, police, etc.) to enhance their involvement in TB control related problems.
2. **Key populations support and enhancing their involvement (NGOs):**
  - A total of 5 grants for case finding and psycho-social support were awarded for 2020: 3 grants for key populations in communities; three grants for PWID; one grant for prisoners and ex-prisoners; one grant for homeless people in Chisinau. The NGOs provided support to 142 people with TB, ensured screening of 5838 people at high risk, (21 diagnosed out of 1215 investigated) in 5 districts. A total of 1603 homeless people in Chisinau were screened (41 diagnosed with TB out of 360 investigated).
3. **MDR-TB Prevention through ACSM:**
  - The communication activities included development and printing of 25 items of IEC materials for DR-TB prevention and control in Romanian and Russian; 10 video spots on TB prevention (in Romanian and Russian), which were broadcasted on 4 TV channels and 5 audio spots (in Romanian and Russian) were broadcasted on 5 radio stations with national coverage. The total volume of the broadcast time was almost 619 minutes on TV and 280 minutes on radio.

## PEOPLE CENTERED TB CARE IN MOLDOVA: SCALING UP DIGITAL TREATMENT ADHERENCE APPROACH

<b>Period of implementation:</b>	July 2018-June 2021
<b>Budget:</b>	USD 423,250
<b>Donor:</b>	UNOPS/STOP TB Partnership - TB REACH Initiative Wave 6

**Goal of the Project:** To generate additional treatment success through scaling up digital treatment adherence approach with proven success and community-led monitoring in Moldova.

### **Project objective:**

To strengthen TB treatment adherence through innovative monitoring technology by rolling out video-supported treatment (VST) at national level.

### **Activities carried out:**

In March 2020 in the context of COVID-19 related lockdown, PAS Center re-emphasized on the importance of using digital tools during pandemic situation and isolation measures, to ensure daily monitoring of treatment adherence for people with TB. An action plan has been developed jointly with the NTP and submitted to the Ministry of Health, Labour and Social Protection (MoHLSP) for issuing the ordinance on VST implementation in Chisinau municipality, using the mobile application I LIKE VST. The app, previously developed by PAS Center, couldn't be rolled-out since June 2019 due to the national registration procedures of the medical electronic systems. The MoHLSP ordinance has been signed on March 30 and in April 2020 the enrollment of eligible patients started in Chisinau and further expanded to other districts. PAS Center and its partner AFI ensured the allocation of the necessary human resources to offer assistance to each TB room and enrolled patients, also being responsible for training of the medical staff, training of TB patients enrolled in VST and providing uninterrupted technical support to medical staff during 2 months after the initial training, until the stage when TB services were able to independently manage the processes.

PAS Center also fulfilled the role of VST system administrator together with the NTP ensuring necessary technical support.

The preliminary results on treatment adherence show an increased adherence level of patients in VST and also an increased level of satisfaction on behalf of medical staff. The results of the VST rollout allowed for a national scale-up and also provided additional information where and for which patients and providers it works best.

### **Outputs:**

- 16 ATUs (14 on the right bank and 2 on the left bank of the Dniester river) are implementing VST;
- 31 healthcare institution received necessary IT equipment for doctors and phones for 400 patients to be enrolled in VST;
- 46 doctors and 52 nurses completed online retraining;
- 250 patients receiving VST were trained and receive ongoing technical support provided by civil society implementing partners, PAS Center and AFI.

## IMPLEMENTING PARTNER OF UNFPA 2018-2022 PROGRAMME FOR THE REPUBLIC OF MOLDOVA

<b>Period of implementation:</b>	April 2020 – December 2020
<b>Budget:</b>	USD 22,486,61
<b>Donor:</b>	UNFPA Moldova

### **Anticipated Programme Outputs:**

Enhanced health system capacity to develop and implement policies and programs at all levels that ensure equal access to high-quality sexual and reproductive health and reproductive rights services, including commodities by those women, adolescents and youths left furthest behind, including in humanitarian settings.

### **Output indicators:**

1. Number of NGO staff capacitated per each on-line training to deliver qualitative HIV Prevention Services to Key Populations;
2. Number of thematic leaflets on HIV Prevention developed and published in Russian and Romanian languages;
3. Number of interview-style thematic articles on HIV Prevention developed and published in Romanian language.

### **Activities carried out:**

1. Two thematic trainings for the staff of NGOs working with key populations conducted on-line on September 7-11 and on September 14-18 on (i) “Standard on organizing and functioning of the HIV Prevention Services provided to Key Populations and Accreditation of HIV prevention services and of psychosocial support interventions provided to vulnerable groups of population in the context of HIV” and (ii) “Peculiarities and principles of HIV Prevention Services targeting women drug users within the Harm Reduction Programs”. The NGOs staff have their capacities built, being able to provide qualitative HIV Prevention Services to KPs, including Young KPs.
2. Following the conducted on-line thematic trainings three thematic articles on HIV Prevention were drafted and published in Romanian language on the e-sanatate.md social media platform <http://sanatateinfo.md/News/Interview>
3. Two thematic leaflets on HIV prevention have been developed:
  1. “Information guide for service providers in standards and accreditation of services in the context of HIV”;
  2. “Women, HIV, drugs and harm reduction”.
4. The leaflet is tailored for use in their daily activity by the staff of NGOs working with key populations. The printed materials were distributed by PAS Center to NGOs working with KPs.

### **Outputs:**

1. 51 people participated in the 1st thematic on-line training (held on 7-11 September 2020) and 30 people participated in the 2nd thematic on-line training (held on 14-18 September 2020) for the staff of NGOs working with key populations.
2. The content of 2 thematic leaflets was developed, designed, layoutted and published.

3. 3 thematic articles were developed and published in social media in Romanian language.

## HEALTH MONITOR FOR GOOD GOVERNANCE IN THE REPUBLIC OF MOLDOVA

**Period of implementation:** January, 2010 - December, 2020

**Budget:** USD 49,000.00 per year

**Donor:** Soros Foundation-Moldova

**Goal of the Project:** The goal of the project is to maintain and develop sustainable mechanisms for independent and neutral monitoring of health policies in order to promote good governance in the health system of Moldova.

### **Project objective:**

The objective is to monitor central and local health authorities' actions through constant monitoring of public policy development and subsequent reflection in mass media.

### **Activities carried out:**

1. Promoting citizen participation in the evaluation and monitoring of hospital care.
2. Updating the information of 57 passports of the public health care institutions and their evaluation indicators;
3. Continuous monitoring of the development of key health policies and the solution of problems related to the reform of the health system;
4. Reflecting the results of monitoring in independent media by disseminating results of the public policy analysis in the media.

### **Outputs:**

1. 8 contests that promoted the evaluation of hospitals and the sharing of the patient hospital experience were held on social networks on [www.spitale.md](http://www.spitale.md);
2. Two #Thanksdoctor campaigns - "Most appreciated nurse" and "Most appreciated doctor" were conducted;
3. 57 informational passports of public hospitals were updated quarterly on Spitale.md platform;
4. Dynamic info graphics (cumulative by years, starting with 2013) were developed based on 44 GENERAL EVALUATION and HEALTHCARE EVALUATION indicators and published on Spitale.md platform for 56 hospitals (except mental health hospital);
5. 25 founders of public hospitals were informed about patients' comments regarding their experience in the hospital;
6. 14 official position papers were prepared, sent to the authorities and published on the website of PAS Center, which included complex analyzes of policy monitoring, opinions, position notes, express / summary analyzes of current policies, etc.;
7. 163 journalistic materials on health promotion aspects were highlighted and distributed on SanoTeca.md, highlighting health risk factors (alcohol, tobacco, unhealthy diet and low physical activity), healthy lifestyle, informing the population about access to medicines, access to palliative care services, access to reproductive health services, information on vaccination, etc.

## FACILITATING THE EFFICIENT AND EFFECTIVE IMPLEMENTATION OF THE REGULATORY FRAMEWORK RELATED TO ENSURING THE ACCESS OF THE POPULATION TO ESSENTIAL MEDICINES IN OUTPATIENT CONDITIONS

**Period of implementation:** November, 2019 - December, 2020

**Budget:** USD 69,800

**Donor:** Soros Foundation-Moldova

**Goal of the Project:** to facilitate the access of the population to essential medicines under outpatient conditions.

### **Project objectives:**

1. Adjustment of the National List of Essential Medicines for adults and children prescribed in outpatient conditions, based on the current regulatory framework and recommendations of the World Health Organization (WHO).
2. Development of a set of indicators to monitor access to essential medicines for adults and children prescribed in outpatient conditions.
3. Elaboration of the Regulation for the Selection Committee for the essential drugs.

### **Activities carried out:**

1. Development of the Draft National List of Essential Medicines (NLEM) for adults, for children, palliative care (adults and children) prescribed / used in outpatient conditions.
2. Development of criteria for the selection of essential medicines for adults and children prescribed in outpatient conditions, as well as for palliative care based on the NLEM.

### **Outputs:**

1. National List of Essential Medicines for adults and children prescribed in outpatient conditions, based on the current regulatory framework and recommendations of the World Health Organization (WHO) <http://pas.md/ro/PAS/Studies/Details/187>
2. Regulation for the Selection Committee for the essential drugs <http://pas.md/ro/PAS/Studies/Details/221>

## SUPPORT TO REFORMS IN THE PRIMARY HEALTH CARE IN MOLDOVA

**Period of implementation:** October, 2020 - November, 2020

**Budget:** EURO 9,686

**Donor:** The Embassy of the Republic of Lithuania in the Republic of Moldova (the project is funded under the Lithuanian Development Cooperation and Democracy Promotion Programme)

**Goal of the Project:** Develop a new primary care model for the Republic of Moldova, which ensures the availability and quality of medical services and leads to more effective disease prevention.

### **Project objective:**

Elaboration of recommendations for the reform of primary health care based on international practices that have proven effective, contributing to the reorganization of primary health care centers with independent legal status, development of new principles to stimulate motivation, ensure stability, self-regulation, accountability and democratic principles.

### **Activities carried out:**

1. Meetings with health system experts and lead officials in Moldova;
2. Review and analysis of a range of publicly available analyses, reviews and opinions on the transformation of PHC over the last 5 years;
3. Meetings with the management officers of the administrative areas or their representatives;
4. Analysis of the results of the systemic transformations of PHC implemented in Eastern and Central Europe and in the territory of the former USSR;
5. Review and analysis of the current PHC situation in Moldova;
6. Review and analysis of PHC models implemented or ready for implementation in Moldova;
7. Development of the PHC activity principles;
8. Review and analysis of demographic, health, financial and human resources data;
9. Review and analysis of data on the location of PHC in the area;
10. Development of a new plan for the deployment of ICMF in this administrative area, the need for financial, material and human resources;
11. Drafting of the final version of the project and submitting it to the PAS Centre.

### **Outputs:**

Practical recommendations to improve primary health care for rural population.  
<http://pas.md/en/PAS/Studies/Details/199>

## **ENSURING CORRECT INFORMATION AND COMBATING MISINFORMATION IN THE COVID-19 PANDEMIC**

**Period of implementation:** October, 2020 - January, 2022

**Budget:** USD 38,000

**Donor:** Soros Foundation-Moldova

**Goal of the Project:** to increase public awareness and understanding of the response of each individual, community and state authorities to the COVID-19 pandemic in the Republic of Moldova.

### **Project objectives:**

1. Promoting credible information sources in the Moldovan society during the COVID-19 pandemic.
2. Promoting and maintaining in the media the flow of information on COVID-19 from credible sources, based on evidence and grounded by qualified specialists.

### **Activities carried out:**

Concerning Objective 1. "Promoting credible information sources in the Moldovan society during the COVID-19 pandemic"- During the period of October - December 2020, 24 short policy notes / brief information / briefings / summaries of scientific research, scientific evidence, regulations / guidelines / protocols of the World Health Organization on the COVID-19 pandemic were drafted and published on the website of PAS Center, Ministry of Health, Labor and Social Protection, European Commission.

Concerning Objective 2. "Promoting and maintaining in the media the flow of information on COVID-19 from credible sources, based on evidence and grounded by qualified specialists" - 58 media materials were developed and posted on the news portal SănatateINFO and SanoTECA, with the purpose of informing, educating the population in order to exercise healthy behaviors, follow the recommendations of the competent authorities in preventing the spread of SARS-CoV-2, as well as increase the adherence of the population to healthy behaviors during the pandemic, including through examples of actions of institutions and authorities in the fight against COVID-19.

#### **Outputs:**

1. 24 news on the COVID-19 pandemic;
2. 58 media materials (one reportage, 4 interviews about Coronavirus, including Fake News, 15 News, opinions for information, education of the population in order to exercise healthy behaviors, compliance with the recommendations of the competent authorities in preventing the spread of SARS-CoV-2 virus, as well as for increasing the adherence of the population to healthy behaviors during the pandemic, 38 health information notes) were developed and published on the SanoTECA online portal, which should have contributed to the improvement of the health culture of the population in the fight against the Coronavirus pandemic.

## **STUDY ON THE PUBLIC HEALTH RESPONSE OF THE REPUBLIC OF MOLDOVA TO THE COVID-19 PANDEMIC**

**Period of implementation:** November, 2020 - December, 2020

**Budget:** USD 8,000

**Donor:** Soros Foundation-Moldova

**Goal of the Project:** is to assess the level of preparedness, alertness and response in the field of public health of the Republic of Moldova to identify, manage and care for new cases of COVID-19, in the light of recommendations of the World Health Organization.

#### **Project objective:**

Ensuring the coverage of the public health response of the Republic of Moldova, in the light of WHO recommendations on COVID-19.

#### **Activities carried out:**

1. The pre-pandemic preparedness measures for public health emergency preparedness were examined in accordance with WHO recommendations, namely the International Health Regulations (IHR) 2005, which is the legal and technical basis for all international and national preparedness and response efforts;
2. WHO recommendations developed in February 2020 - WHO Strategic Preparedness and Response Plan were analyzed;

3. Following the analysis of the WHO Strategic Preparedness and Response Plan and the guidelines for its operationalization, it was documented whether these recommendations were found in the Response Plan of the Republic of Moldova;
4. Also, the WHO recommendations for schools, offices and institutions for COVID-19 were analyzed and how the Republic of Moldova complied with these recommendations and included them in the decisions of the National Extraordinary Public Health Commission of the Republic of Moldova in order to reduce the degree of spread of SARS-CoV-2 infection;
5. The workplace prevention measures established by the decisions of the National Extraordinary Public Health Commission of the Republic of Moldova were analyzed in the context of whether they comply with the WHO recommendations.

### **Outputs:**

The study “Public Health Response of the Republic of Moldova to COVID-19” <https://www.pas.md/en/PAS/Studies/Details/232> . Anyone can find out how the Moldovan authorities have transposed the WHO recommendations into national public health response decisions to the COVID-19 pandemic.

## **THE OPEN MEDICAL INSTITUTE (OMI)-SALZBURG**

**Period of implementation:** May, 2007 - December, 2020

**Budget:** USD 4,000.00 per year

**Donor:** American Austrian Foundation, Austrian Federal Ministry of Education, Science, and Culture, the Open Society Foundations

**Goal of the Project:** Overall project goal is the development of human resources in the health sector.

### **Project objective:**

Systematic strengthening of human and organizational capacity across the entire spectrum of institutions (hospitals, clinics, districts' administration in health sector, medical university, medical colleges) and health problems (including infectious diseases, training of professionals in health, extension of the medical services in primary health care, and quality improvement, etc.).

### **Activities carried out:**

1. Promotion of the OMI Program as an opportunity of high-level education in medical field in Moldova through medical institutions and social media.
2. Preselection and support to qualified candidates that apply for OMI Program.
3. Maintenance of the OMI Program by consulting and supporting the application, selection and preparation processes.

### **Outputs:**

During 2020 a total number of 147 applications were received. Out of them 15 fellows attended the Salzburg seminars and OMIinars in Obstetrics and Gynecology, Medical Education, Pulmonology, Neurology, Ophthalmology, Medical Quality & Safety, Neurosurgery (Spine), Bone & Joint Surgery, Anesthesiology, Cardiology, Pathology,

Infectious Diseases, Internal Medicine, General Pediatrics, Lipid Metabolism, Surgery, Cardiac Surgery and Oncology B.