



## Terms of Reference for Focal Point for Hospital Linkage

### A. Description:

From 1996-2000, CRS Cambodia assisted in the introduction of facility-based Directly Observed Treatment Short course (DOTS) in Battambang Province, including expansion to Health Centers (HCs) in previously-inaccessible Khmer Rouge areas. In 2005, CRS Cambodia collaborated with Japan International Cooperation Agency (JICA) and the National Tuberculosis Control Program (NTP)/National Center for Tuberculosis and Leprosy Control (CENAT) to implement one of the first Community-DOTS (C-DOTS) pilot projects in Cambodia, resulting in an increase in TB case detection from 99 in 2004 to 124 (rate/100,000) in 2005 in eight HCs in Thmor Korl OD, Battambang province. Over the same period, there was also a 10% increase in the number of suspected TB case referrals from the community to health facilities. Adherence to treatment improved through C-DOTS watcher activity, while HC staff workloads related to TB follow-up was reduced, providing the necessary evidence that C-DOTS is an effective TB control measure in Cambodia.

Consequently, CRS Cambodia's C-DOTS pilot model was adopted by the NTP and expanded nationwide. Under a USAID/Cambodia grant from 2006-2008, CRS Cambodia further expanded C-DOTS and strengthened the capacity of public health providers in the detection and management of HIV-TB co-infection. Considerable strides were made with respect to cross-screening for TB/HIV with 90% of TB patients screened for HIV, and 100% of HIV patients screened for TB in project areas; these are high levels for Cambodia.

To Implement the full set of the TB C-DOTS Plus Package which includes implementation of Community TB Screening (CTB-S) and hospital linkage activities together with the corresponding health centre and referral hospital staff and will include the following activities: 1) Community awareness of TB, 2) Provision of support to presumptive TB patients during the diagnostic process (from screening to diagnosis), 3) Provision of support for preventive and curative treatment for TB patients, 4) Contact investigation for all bacteriologically confirmed pulmonary TB patients, 5) Coordination and facilitation of the hospital linkage activities in selected referral hospital (RH) within the CRS zone, 6) Human Resource capacity (knowledge and skills) of CRS, respective partners staff and will conduct, 7) routine monitoring and supervision according to the agreed upon M&E framework.

Focal Point for Hospital Linkage (Seconded Staff) will be recruited by CRS in close collaboration with Battambang PHD and CENAT and the seconded staff will be based in Battambang and Mong Reusey Referral Hospitals. S/he operates under the supervision of the CRS TB Community System Strengthening (CSS) Coordinators who are his/her supervisors and report to CENAT/CRS. The Focal Point for Hospital Linkage has specific and general responsibilities as following:

### SPECIFIC RESPONSIBILITIES

1. Coordination among the different departments within the hospital to improve TB activities in hospital
  - Facilitate to ensure successful referrals and feedback mechanism within the hospital for TB screening and diagnosis.
  - Assist / coordinate the triage the flow of the patients and ensure the TB infection control measures will be in place to minimize the transmission.
  - Coordinate to get information about clients with TB screening, diagnosis and treatment among deferent departments within hospital.
  - Facilitate to ensure external network and referral feedback mechanism between the hospital, HCs and communities to assure completion of treatment and not being lost in the process.
  - Coordinate the referral of presumptive TB patients from health centers (HC), community for further evaluation at hospital.
  - Assist CSSC to collect relevant data from the field as assigned and needed by CSSC

2. Provide support on payment and logistic arrangement
  - Prepare and reimburse the transportation fee for the poor includes children who referred from supported HCs and community.
  - Assist in preparing the meeting materials and paying allowance to participants
  - Facilitate on payment/liquidation related to referral TB specimens/symptomatic from HC/community to do TB diagnosis/CXR at RH.
3. Recording/reporting
  - Ensure the completeness and up to date of record of presumptive TB patient book (TB sputum collection & sending book), patient file, IPD registration and OPD registration.
  - Prepare monthly activity report to Hospital Director and focal person at CRS
  - Verify CXR performance list of presumptive TB patients from poor family referred from respective HCs and communities under supported areas for hospital user fee on a monthly basis.
4. Others
  - Prepare activities request and prepare supporting documents for Hospital Director to submit to CRS
  - Assist Hospital Director in arranging and organizing coordination and feedback quarterly meeting at hospital

#### **GENERAL RESPONSIBILITIES**

1. To work with due diligence in carrying out the tasks of the position
2. To ensure regular, punctual and full-time attendance to duties during official working hours
3. To strive all times to assist OPD/TB, ward/DM clinic/TB, lab and other wards to attain the highest levels of accuracy and honesty in all its activities.
4. To draw the attention of OPD chief, TB ward chief, DM clinic chief, TB lab chief and other wards chief immediately to any irregularity or other matter of significance affecting the efficient and honest functioning of OPD/TB ward/DM clinic/TB lab/other wards.
5. To undertake any other duties assigned by RH Director, OPD chief, TB ward chief, DM clinic chief, TB lab chief and other wards chief.

#### **Education Background, Experience & Requirements**

1. University degree, preferably health related degree
2. Experience in working in TB or health related field.
3. Experience in participatory action planning and hospital linkage is desired.
4. Experience using MS Windows and MS Office packages (Excel, Word, PowerPoint).
5. Proficiency in written and spoken English

#### **B. Contract:**

The seconded staff has annual contract with CRS. The contract extension or termination based on his/her performance and project budget availability. CRS representative signs contract with focal point for hospital engagement. The seconded staff works from Monday to Friday (7:30AM-12 NOON and 1:30-5:00PM) and follow CRS Public holiday list.

#### **C. Benefits**

Focal point for hospital engagement entitles to only the following benefits:

- Monthly salary is ..... through transfer to individual bank account/e-account as gross salary. CRS follows national requirement to deduct required amount for taxation from this amount.
- She/he get leaves benefit as other CRS's staff.
- Capacity building through training, supervision, coaching/mentoring from National, Sub-national level, and CRS.