

National Tuberculosis Indicators Project (NTIP) Frequently Asked Questions

How will NTIP be integrated into the cooperative agreement reporting process?

The national TB program objectives established in 2006 will be included as guidance in the 2010 cooperative agreement. Using the data that are submitted to CDC, NTIP will provide program areas with reports of their performance on achieving these objectives. Program areas will use these reports to complete their interim and annual progress reports to CDC, as well as in their applications for continued funding.

How do the national TB program objectives compare to the 7 performance objectives in the 2005 cooperative agreement announcement on which programs are currently expected to report?

Most national TB program objectives are similar to the 7 performance objectives in the 2005 cooperative agreement. However, the national TB program objectives include a set of standardized indicators and calculations for measuring performance and progress. The national TB program objectives also include new objectives and measures (e.g., TB case rates [U.S.-born persons, foreign-born persons, and children younger than 5 years of age], treatment initiation, data reporting, sputum culture conversion, recommended initial therapy, universal genotyping, and sputum culture reporting) that are important to TB control. Data for these objectives are already being collected; monitoring progress on these objectives will enhance the programs' abilities to improve program outcomes.

When will NTIP be available for TB programs (state/county)?

NTIP reports will be available to all TB programs funded through the cooperative agreement in the winter of 2008. Programs are strongly encouraged to pilot NTIP in 2009 for progress reporting to CDC, and provide feedback on the process before the formal NTIP implementation in 2010. Additionally, Division of Tuberculosis Elimination will be providing NTIP reports for some counties with high TB incidence. The date for this rollout has not been determined.

How will TB programs be expected to use NTIP reports?

NTIP is a service for TB programs. In addition to using NTIP reports for completing cooperative agreement reporting and prioritizing efforts for program improvements, programs are encouraged to use the information provided to assist with their program planning, education, and outreach. These reports can be used to facilitate discussion and encourage problem solving among staff and with community partners. DTBE consultants will be using NTIP reports to work with programs and to provide appropriate technical assistance.

Do programs have to provide progress report on all national TB program objectives? Or can they pick and choose which objectives to report?

NTIP will provide quantitative progress reports on all objectives. Programs should provide context and comment on the performance described in NTIP. The focus of progress reporting should remain on communicating pertinent issues, concerns, and challenges faced by the program on objectives on which they are not doing well. Most importantly, the program should elaborate on its plan to better understand the barriers and improve the performance. Programs are encouraged to identify other objectives that are important to monitor for their specific programs, and share progress and updates with CDC.

How does NTIP change the progress reporting for programs?

Reporting progress on objectives has been a standard operating procedure for TB programs. NTIP reports are being provided as a service to programs, thus reducing burden on program staff from having to calculate indicators and generate reports. In addition, NTIP provides standard definitions, indicators, and calculations such that all TB programs in the United States are using data consistently to assess progress toward achieving the national objectives and performance targets.

Will programs be able to set their own performance targets?

Yes. The national performance targets are provided as guidance. Achieving the national performance targets will not be feasible for all the programs. TB programs will continue to work with their program consultants to set performance targets based on what is feasible to them.

How will DTBE use NTIP?

DTBE will use NTIP data to assess national progress toward achieving objectives and established performance targets. Program consultants will use NTIP data to monitor program performance, assess needs for education and technical assistance, and work jointly with programs to plan program improvement efforts.

Will NTIP be used to determine funding/resource allocations?

No. Cooperative agreement funding for the recipients will continue to be based on the formula established by the CDC/NTCA work group. However, programs are encouraged to use NTIP reports to inform their planning process and allocation of resources within their programs, or to advocate for additional needed resources.

What kind of support or assistance can we expect from DTBE?

Training on NTIP will be provided at the regional meetings and the CDC Program Managers' Course, and via webinars. All requests for assistance in using and interpreting NTIP reports should be directed to your program consultant. As necessary, other DTBE staff will be consulted to provide additional assistance.

How is NTIP different from the evaluation that we are doing?

NTIP is a monitoring system using standardized indicators and calculations to track progress toward national objectives. Program evaluation is the systematic examination of the processes that are done to better understand the factors that contribute to program outcomes. NTIP reports will be useful to programs in assisting them to identify areas in need of improvement, thus helping to focus program evaluation activities.

Will NTIP replace the current evaluation requirement?

No. NTIP can be used to help programs identify areas in need of improvement; however, understanding why the program is doing well or poorly requires a more in-depth examination of the process. Evaluation planning assists the program in thinking through the evaluation process before investing resources in the activity.

If we know where we are falling behind, will evaluation be necessary before we can implement changes?

Program evaluation should be conducted to gain the understanding of why program objectives are not being met and to inform changes. When sufficient information is available to make informed decisions regarding program improvements, evaluation activities should be focused on another area where information for decision-making is needed.

Will programs be expected to write an evaluation plan for every objective for which they didn't meet the target?

No. Programs will continue to be expected to address one priority objective through evaluation. The program consultant should be actively engaged in the selection of the objective to be addressed.

Will an evaluation plan be required before any evaluation can be done?

Yes. Program evaluation requires program resources. As with any activity requiring resources, a plan should be developed to anticipate issues and problems, and thus ensure that resources are used effectively.

How often will the evaluation be required? Will CDC establish timelines?

To be useful and feasible, program evaluations must be tailored to the program's needs. While programs will continue to be expected to routinely conduct program evaluations, the specifics and timelines of the evaluations will be established in consultation with the program consultants.

Additional Information

CDC. The National Tuberculosis Indicators Project
www.cdc.gov/tb/pubs/tbfactsheets/NTIP.htm