



# Taking Differentiated Service Delivery to Scale in Uganda: A Maturing National Program

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## BACKGROUND

Uganda has made notable progress in addressing the country's HIV epidemic with an estimated 84% people living with HIV aware of their status; 72% of people living with HIV on antiretroviral therapy (ART); and 64% viral suppression among people living with HIV (UNAIDS 2019). Recipients of care in Uganda play an active role in strategic decision-making and implementation of differentiated service delivery (DSD) with representation on the national DSD Technical Working Group, participation in teams conducting targeted supportive supervision, parallel targeted DSD supportive supervision, and provision of differentiated HIV services (*i.e.*, as group leaders in facility and community based ART groups). The satisfaction of recipients of care is a priority in Uganda's DSD efforts and is assessed through multiple modalities: targeted DSD supportive supervision; DSD-related studies (operational research); and patient satisfaction surveys.

## DSD IMPLEMENTATION

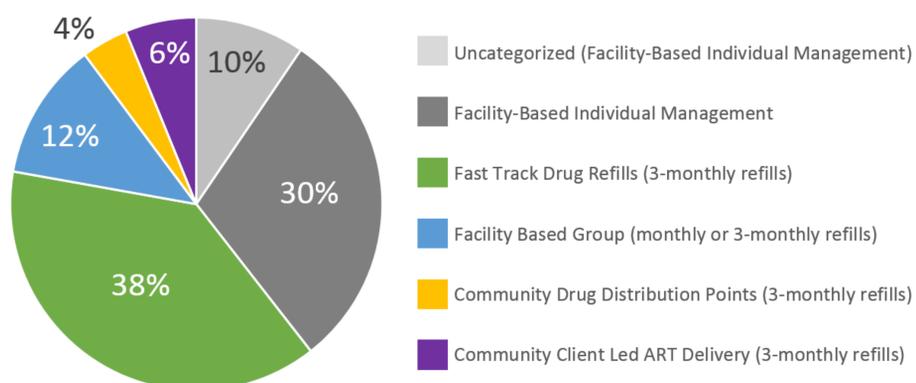
Currently, Uganda offers five models of ART services, including two facility-based individual models—**Fast Track Drug Refills (FTDR)** and **Facility Based Individual Management (FBIM)**; one facility-based group model—**Facility Based Groups (FBG)**; one community-based individual models—**Community Drug Distribution Points (CDDP)**; and one community-based group model—**Community Client Led ART Delivery (CCLAD)**. Of these models, four are less-intensive DSD models (FTDR, FBG, CDDP, and CCLAD), while the FBIM model is a more-intensive model similar to the conventional model implemented in other countries.

### Uganda's initiatives to strengthen implementation of DSD in 2019 include:

- Conducting multiple rounds of supportive supervision around DSD guidelines and challenges encountered during DSD rollout
- Establishing national quality standards for DSD and currently designing model-specific quality standards
- Creating national quality assurance tools, including guides for DSD models of TB/HIV services and a DSD reference desktop job aid
- Revising health management information system tools to include DSD data elements
- Introducing new tools for collecting DSD-specific data at the patient level, including model eligibility and readiness forms, model registers, and monitoring forms
- Working with CQUIN to convene a DSD data review meeting
- Planning to discontinue quarterly DSD data calls and implement routine reporting of DSD data via the national M&E system in December 2019

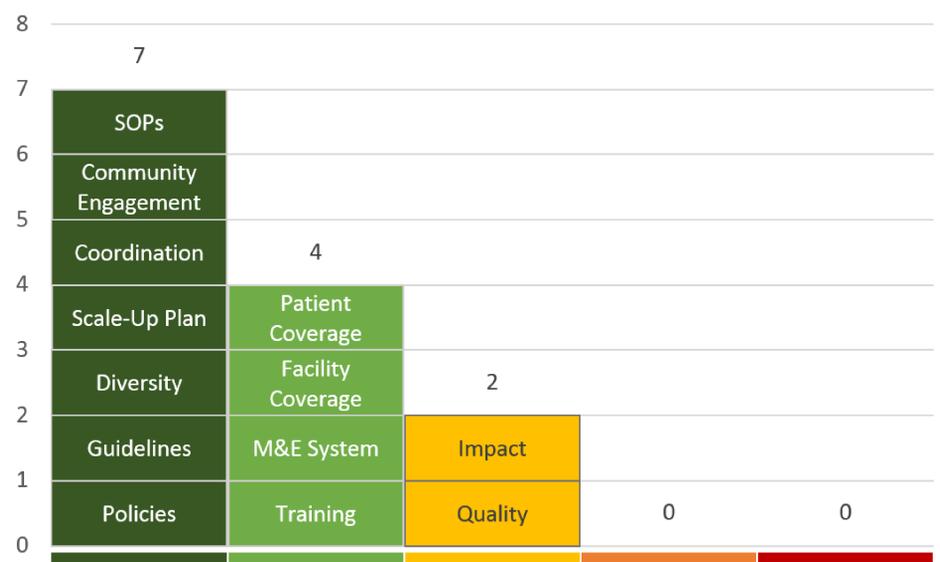
As of the CQUIN DSD Dashboard staging conducted in October 2019, there are 1,832 ART facilities in Uganda and, of those, 1254 (68%) offer at least one of the less-intensive DSD models. Based on quarterly data calls covering partners from all regions, Uganda estimates that 60% of all those on ART are enrolled in one of the less-intensive models. FTDR is the model with the highest coverage overall, with 38% of all those on ART receiving 3-monthly refills through fast-track pickups. Of those on FBIM, 30% have been assessed and are categorized in that model while the rest have not yet been categorized.

Figure 1: DSD Model Mix, June 2019



## DSD DASHBOARD

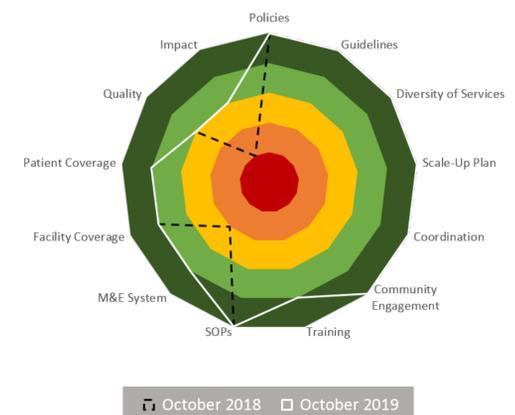
Figure 2: Dashboard Results 2019



The CQUIN DSD Dashboard assesses the maturity of national DSD programs across 13 domains. In October 2019, a multi-disciplinary team of stakeholders in the Uganda DSD program ranked seven domains—Policies, Guidelines, Diversity, Scale-Up Plan, Coordination, Community Engagement, and SOPs—at the highest level of maturity and an additional four at a high level (Figure 2). Only two domains remain in the mid-maturity stage.

Figure 3: Dashboard Results 2018 vs. 2019

Figure 3 describes the achievements of the DSD program in Uganda between October 2018 and October 2019. While the country had already achieved a high level of maturity in most domains by the 2018 dashboard staging, this chart highlights the significant progress made in M&E and Impact, with some of the efforts that contributed to this progress highlighted at left and below.



## RESEARCH AND EVALUATION

Makerere University School of Public Health and co-investigators from the ACP are conducting a two-phase study on DSD implementation. The study aims to better understand the implementation process, perceptions of providers and clients, treatment outcomes, challenges, and emerging issues. The study will inform implementation processes for better quality services and treatment outcomes. The study sample consists of ART facilities that have adopted DSDM in Uganda and were purposively selected with the goal of achieving diversity in the sample and to represent a wide range of situations and context from which lessons learned can be generated regarding HIV DSD.

## NEXT STEPS/WAY FORWARD

Uganda will continue its focus on DSD coverage and quality, including:

- Continuing a DSD-related quality improvement project designed to increase the proportion of clients enrolled in less-intensive DSD models.
- Developing DSD model-specific quality standards.
- By the end of December 2019, routine DSD data will be collected through monthly and quarterly HMIS reports, which have been revised to include DSD data elements. National and regional trainings of trainers have been conducted for DSD data collection using these reports and onsite trainings are planned for the quarter October - December 2019.
- Regional and national DSD performance review meetings, aimed at giving a deeper understanding of DSD implementation and its contribution to ART outcomes, are planned for October - December 2019.