



# Mozambique Country Update

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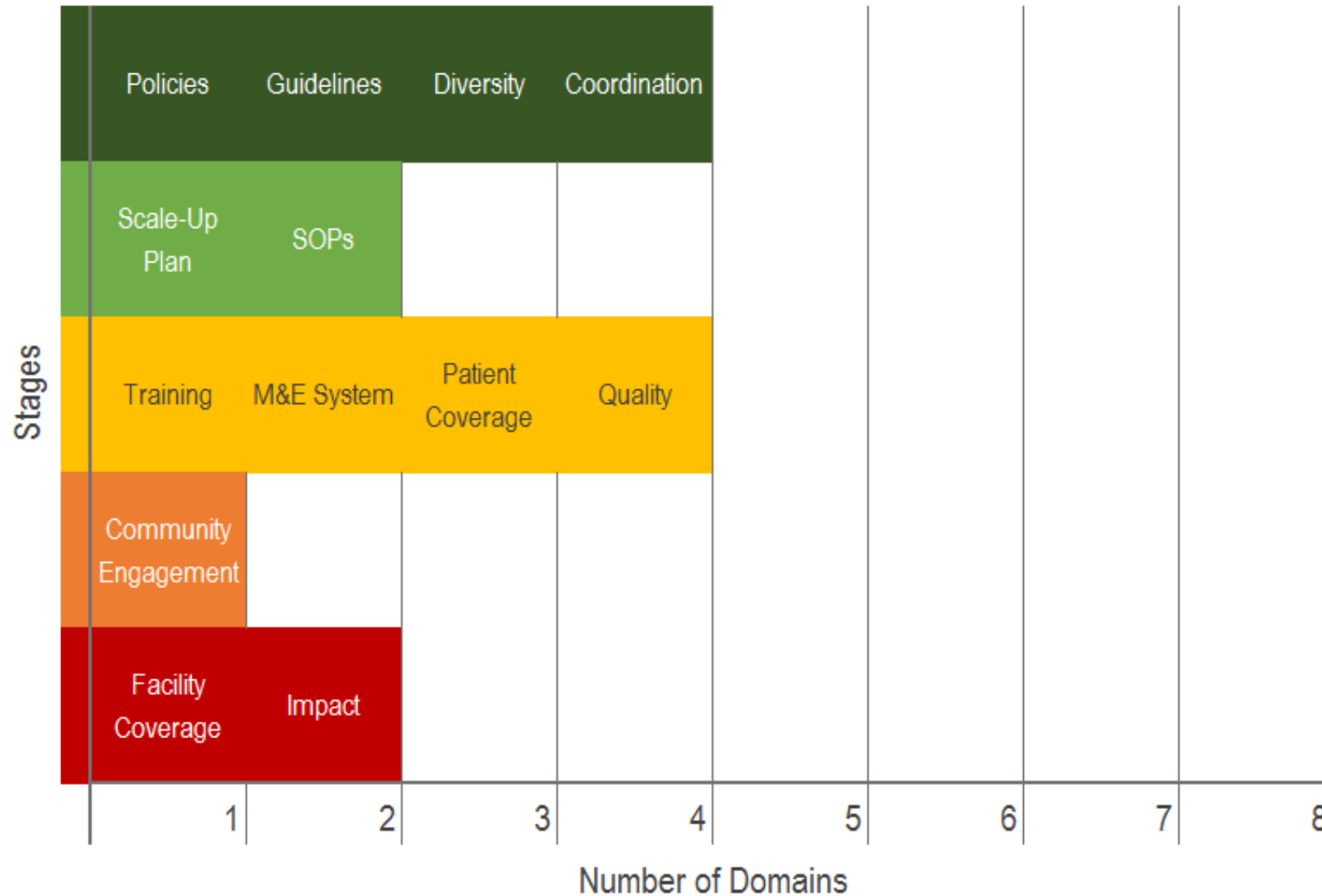


HIV LEARNING NETWORK  
The CQUIN Project for Differentiated Service Delivery

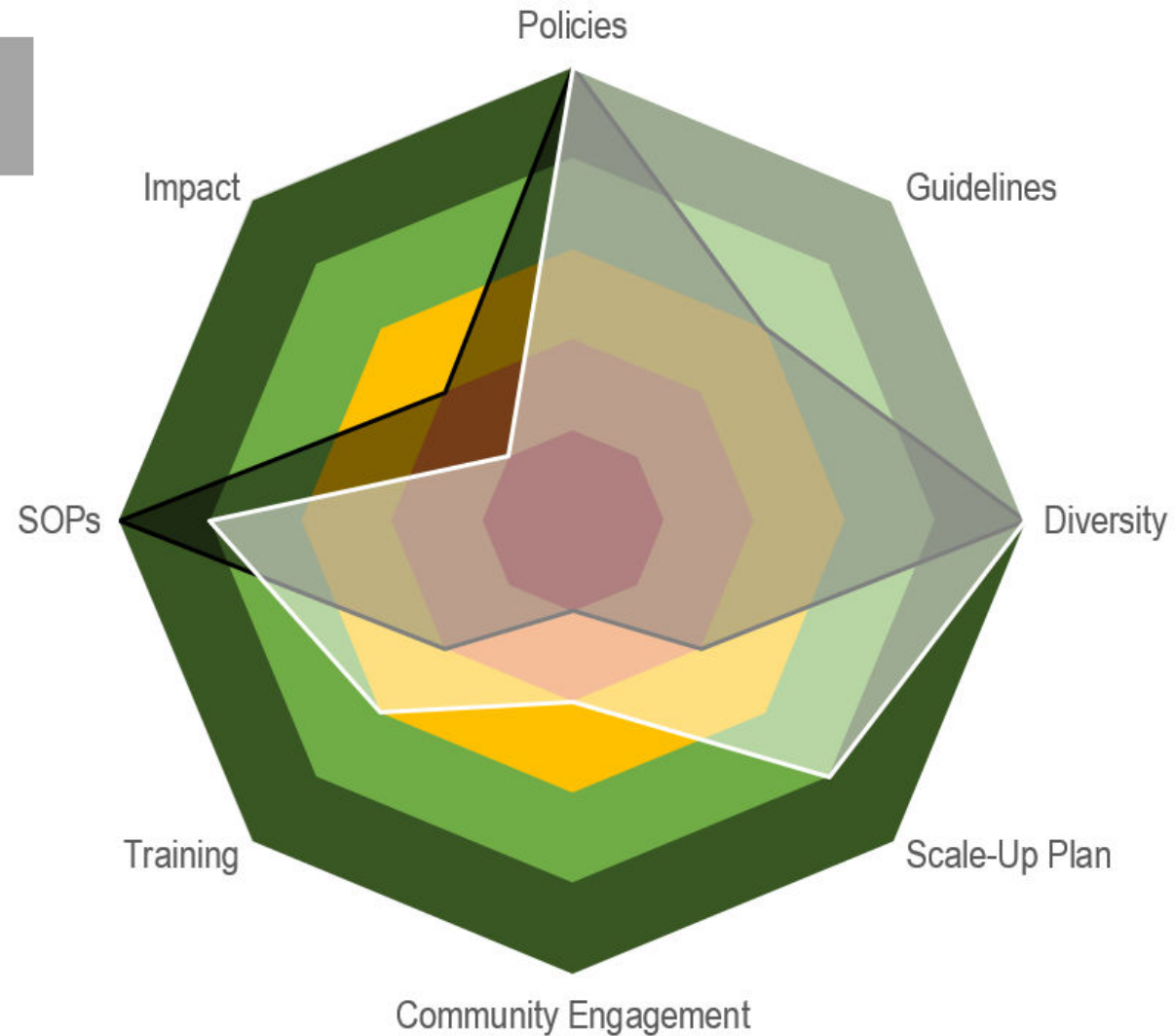
# Outline

- CQUIN Dashboard results
- Successes and challenges
- Targets and monitoring
- Next steps

# Mozambique Dashboard Results



# Mozambique Dashboard Results – 2

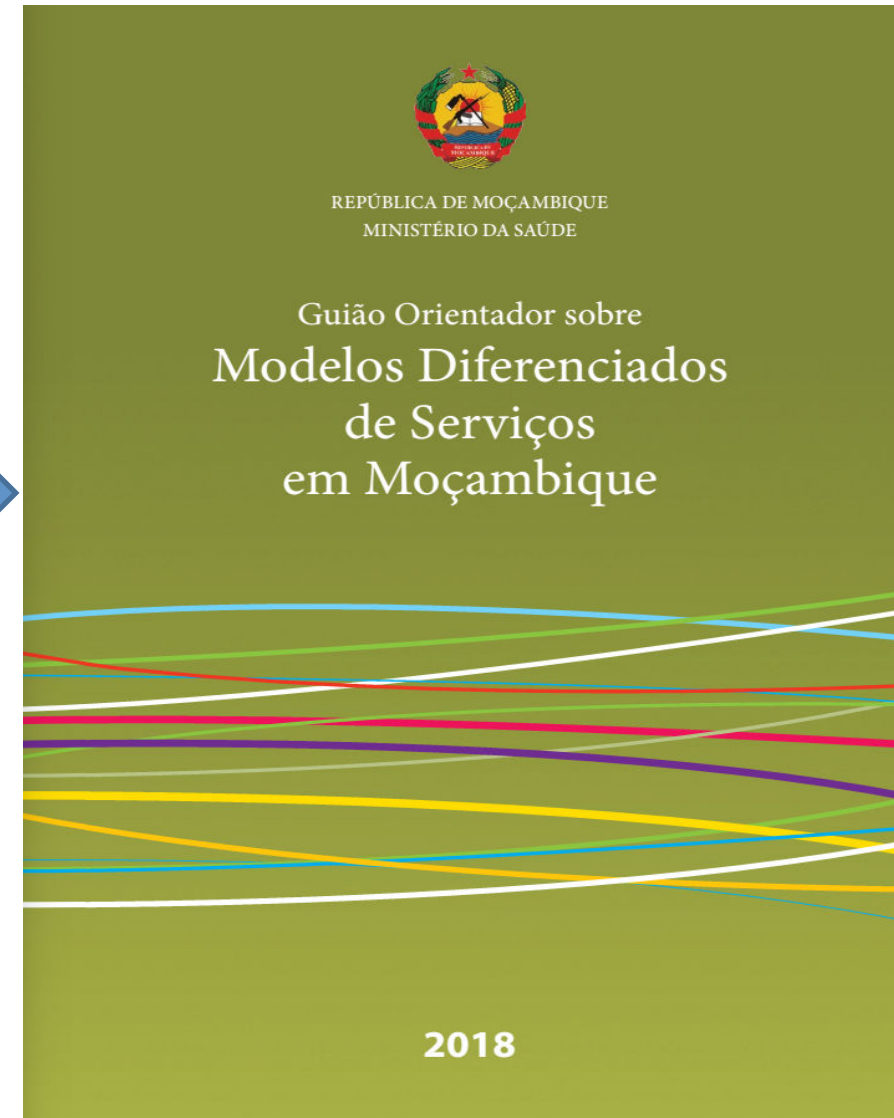
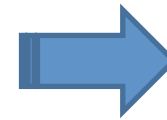


# Outline

- CQUIN Dashboard results
- **Successes and challenges**
- Targets and monitoring
- Next steps

# DSD Scale-up Success:

- DSD guidelines finalized and launched
  - Covers DSD for testing, prevention (key populations), care and treatment
  - Approved models include CASG, fast track, multi-month prescription, one stop models
  - Expansion of pilots, like family approach and adherence clubs
- Training of trainers completed  
October 2018



# DSD Scale-up Challenges:

- Financial constraints for training of providers
  - Need to train staff at 1,447 health facilities
  - Negotiations ongoing with PEPFAR to support trainings
- **Financial challenge to adopt Early Morning Refills after it was piloted**
- Monitoring and Evaluation (Mozambique still uses paper-based system):
  - *negotiations in place to report all DSDM through electronic systems by partners*



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- Successes and challenges
- **Targets and monitoring**
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# DSD Targets and Monitoring

- No targets have been set at the national level for appointment spacing, multi-month drug distribution and CASG
- *How is performance monitored?*

- 3 month drug distribution
- Appointment Spacing/Fast track
- CASG
- Family Approach

- Adherence Clubs
- Community Dispensing of ARVs
- One stop shop: MCH, TB, Youth

Monitored currently by partners through electronic system using actual tools

DSD that can be monitored through electronic systems only after the introduction of new tools in March 2019

# DSD Targets and Monitoring - 2

## *How is performance monitored?*

- At national level, CASG are reported routinely using paper-based system and aggregated data is entered in the monthly information system (MIS)
- Multi-month drug distribution and appointment spacing are being reported through partners on a monthly basis from only 63 sites that have electronic M&E system
- Family approach is reported in different ways by partners in monthly basis
- Adherence clubs are implemented at MSF sites who provide monthly and quarterly reports

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# Next Steps

- Complete training of health facilities
- Consolidate DSD expansion – 3 months national campaign to put patients on DSD
  - Target is to reach 30 % of those eligible during the first phase of rapid scale up (Dec 2018 to March 2019)
- **Scale up community outreach refill model, observed during south-to-south visits to Eswatini and Malawi**
- Set up targets and indicators for DSD:
  - **Coverage** : % of HF with DSD ; % of new enrollments at DSD; % of patients active on DSD
  - **Impact** : % of patient at DSD with viral suppression ; % of patients at DSD retain in care at 12 , 24 and 36 months
- Integrate reporting of DSD models into electronic systems (partners) and in the long term, into DHIS II ( MIS)