



CQUIN 5th Annual Meeting

Virtual: November 16-19, 2021

Session 5c: Country Updates from Ghana and Uganda

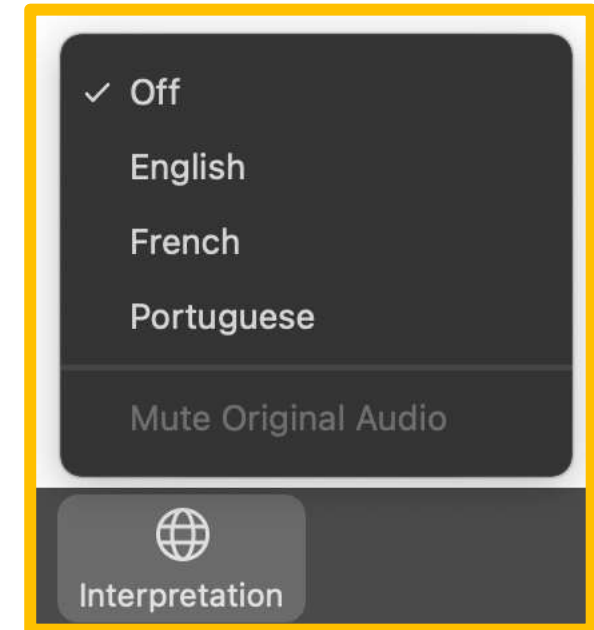
Wednesday, November 17, 2021



HIV Learning Network
The CQUIN Project for Differentiated Service Delivery

Welcome/Bienvenue/Bem-vindos

- Be sure you have selected the language of your choice using the “Interpretation” menu on the bottom of your screen.
- Assurez-vous d’avoir sélectionné la langue de votre choix à l’aide du menu <<Interprétation>> en bas de votre écran Zoom.
- Certifique-se de ter selecionado o idioma à sua escolha usando o menu de interpretação na parte inferior do seu ecrã



Plenary Moderators



Kafui Senya
Lead for HIV/STI, Hepatitis and
Tuberculosis
WHO, Ghana



Bakashaba Baker
Regional Project Manager, Soroti
TASO, Uganda

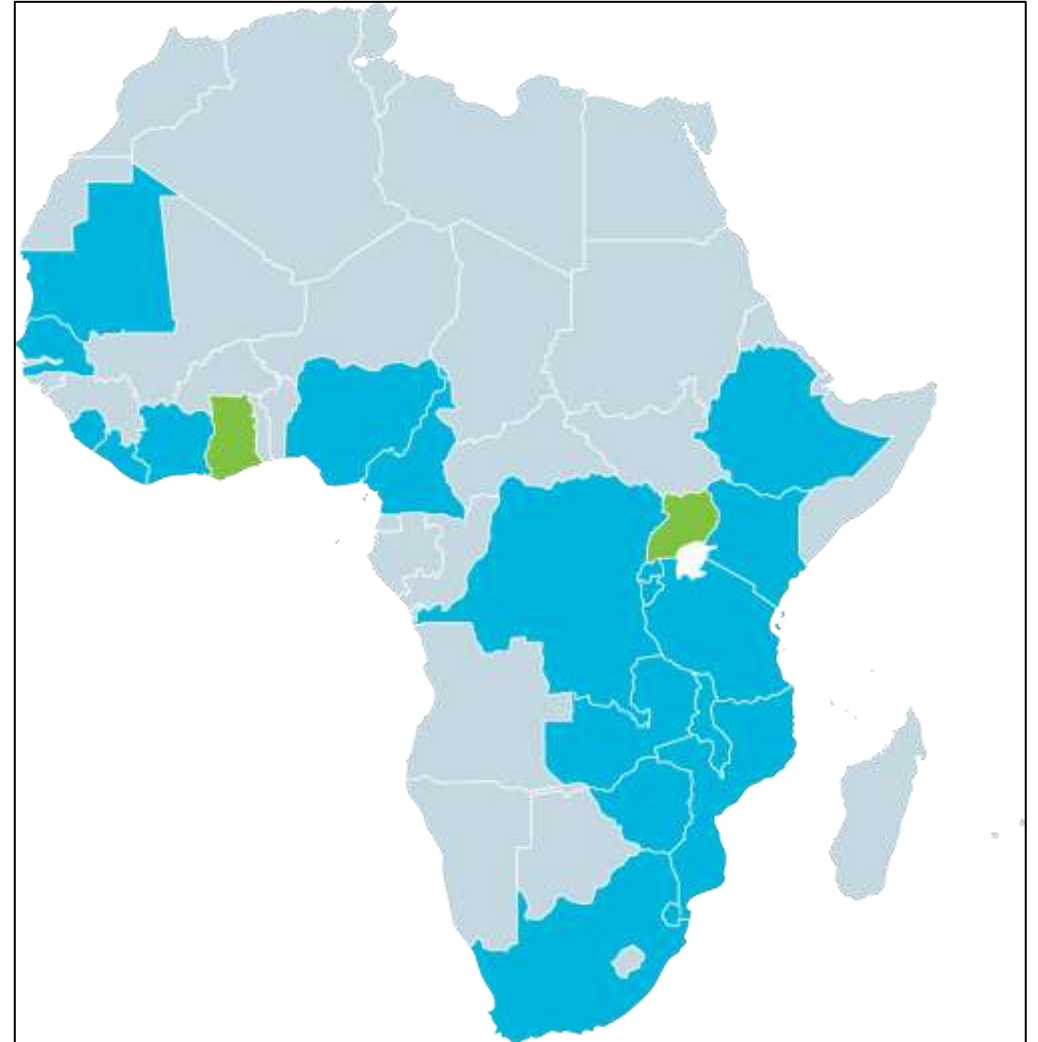
Framing Remarks



Peter Preko
CQUIN Project Director
ICAP in Eswatini

Outline

- Introduction
- Ghana
- Uganda
- Summary



Introduction

- The 5th annual meeting will highlight 20 member countries who are at different stages of DSD scale-up
- Duration of network countries in CQUIN ranges from 1yr to 5 years
- The different context, strengths, challenges, and resources of network countries provide the perfect environment for learning exchange
- The CQUIN Annual Meeting is an opportunity to share lessons learned and describe change over time
- Each year, country teams complete a standardized online questionnaire which informs our description of their “model mix” and contributes to the CQUIN dashboard

DART Model Mix

- CQUIN uses a systematic approach to describe differentiated ART (DART) models
- This enables us to compare DSD across programs and countries
- We consider everyone on ART to be in a differentiated model, including those in “conventional” and more-intensive models
- We categorize less-intensive models for people doing well on ART by location (facility vs. community) and by individual vs. group design

	Individual Models	Group Models
Facility-based	Fast Track ART Refills Appointment Spacing Multi-month Scripting Multi-month Dispensing	Facility-based clubs Facility-based teen clubs
Community-based	Community drug distribution Community ART initiation Mobile outreach Private pharmacies Pick-up points, lockers	Community ART Groups (CAGs) <ul style="list-style-type: none"> - Peer-led - HCW-led

DART Model Mix, continued

More-Intensive Models	
	Conventional Model
	Other more-intensive models
Less-Intensive Models	
FBI	Appointment Spacing (no fast track)
	Appointment Spacing + Fast Track
	Other FBI
FBG	ART Clubs
	Facility-Based Teen Clubs
	Other FBG
CBI	Outreach
	Community Drug Distribution
	Other CBI
CBG	Community ART Groups (peer-led)
	Community ART Groups (HCW-led)
	Family Model
	Community-Based Teen Clubs (HCW-led)

- CQUIN nomenclature includes the conventional model as a type of more-intensive model
- Less-intensive models sub-divided into categories
 - **Facility-Based Individual (FBI)**
 - **Facility-Based Group (FBG)**
 - **Community-Based Individual (CBI)**
 - **Community-Based Group (CBG)**
- All models can be further defined by quantity of ART provided (e.g., 3- or 6-month drug distribution) as applicable.

Introduction: DSD Program Maturity

The **CQUIN Dashboard** is another way to systematically describe a country's differentiated treatment program

- Uses a capability maturity model
- Includes 13 domains representing necessary components for implementing differentiated ART (DART) services at scale
- Uses 5 stages of maturity represented by a color scale
- Multi-stakeholder country teams stage the country program – an internal, consultative activity, not an external evaluation

The CQUIN Dashboard

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Differentiated Service Delivery Dashboard: Draft 3.0

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M&E System	No elements of a national system for M&E of DSD are implemented, nor are any currently in development	Elements of a national system for M&E of DSD (e.g., registers, facility reports, guidelines, etc.) are in development but not yet finalized -or- Elements of a national system for M&E of DSD have been finalized but are not widely implemented	At least one element of a national system for M&E of DSD has been widely implemented, but elements are not comprehensive (e.g., not all DSDM are included) and/or are not fully integrated into national HMIS	All elements of an M&E system for DSD are widely implemented and integrated into one national HMIS for HIVART services; however, refinements will be needed	All elements of an M&E system for DSD are in place and are integrated into one national HMIS for HIVART services, which is highly functional and providing policy-relevant data
Guidelines	National HIV treatment guidelines do not include DSDM		National HIV treatment guidelines include DSDM but do not provide detailed and specific implementation guidance		National HIV treatment guidelines provide detailed and specific guidance on implementation of DSDM
Diversity of DSDM services	No DSDM services have been implemented	DSDM are available for stable adult patients only ¹	DSDM are available for stable adult and eligible adolescent patients only	DSDM are available for stable adult and adolescent patients and one additional patient group ² (e.g., patients with HIV and NCDs, patients at high risk of disease progression, key and priority populations, etc.)	DSDM are available for stable adult and adolescent patients and two or more additional patient groups
National DSD Scale-up Plan	No DSD scale-up plan is currently in place and development has not begun	The national DSD scale-up plan is in development, with discussions and meetings ongoing	The DSD scale-up plan is available in draft form	The DSD scale-up plan has been developed and approved by the Ministry of Health	The DSD scale-up plan is being actively implemented and monitored
Coordination	Coordination for national-level DSD activities has not been addressed	Coordination for national-level DSD activities is being planned or discussions and meetings are ongoing	DSD activities fall under the scope of existing groups; progress updates are presented in standing meetings not focused on DSDM (e.g., a care and treatment TWG)	DSD activities are coordinated by a dedicated group (e.g., a DSD-focused sub-group of the Care and Treatment Technical Working Group)	National DSD Focal Person spearheads DSD planning and coordination
Community Engagement	Representatives from the community of people living with HIV (PLHIV) and civil society organizations (CSO) are not involved in any activities related to DSD and there are currently no plans to engage these groups	PLHIV and CSO are not currently engaged in DSD activities, but engagement is planned or meetings and discussions are ongoing	PLHIV and CSO are meaningfully engaged in DSD implementation	PLHIV and CSO are meaningfully engaged in implementation and evaluation of DSDM	PLHIV and CSO are meaningfully engaged in implementation and evaluation of DSD, as well as oversight of DSD policy (e.g., through inclusion in DSD task force or other group)

← Stages

More information and dashboard variants (subnational dashboard, AHD dashboard) available on the CQUIN website:

www.cquin.icap.columbia.edu

↑ Domains

Fifth Annual Meeting (Virtual)

DATE: November 16 – 19, 2021

Home

Agenda

Plenary Sessions

Parallel Sessions

Country DSD Updates

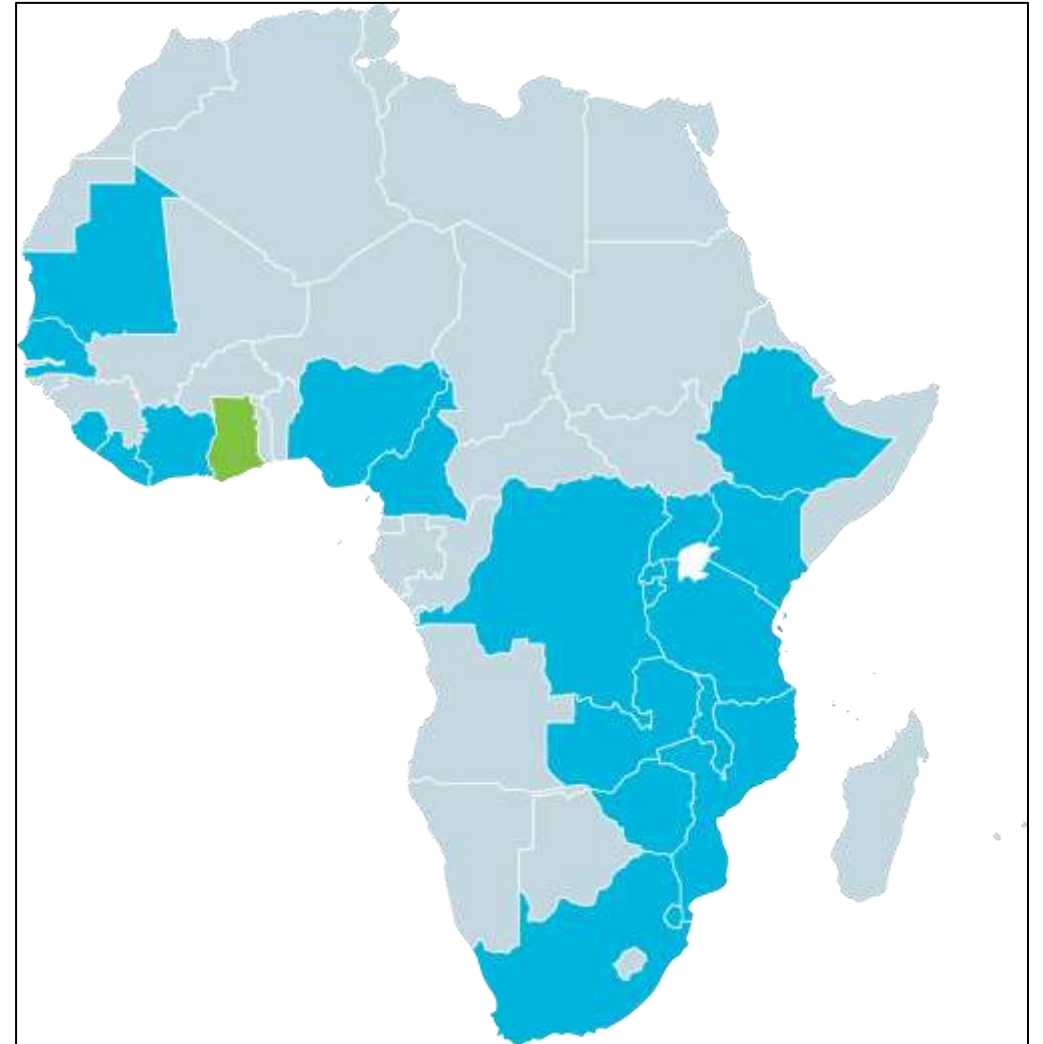
COUNTRY PROGRESS UPDATES

All country presentations are available on the CQUIN website: <https://cquin.icap.columbia.edu/>



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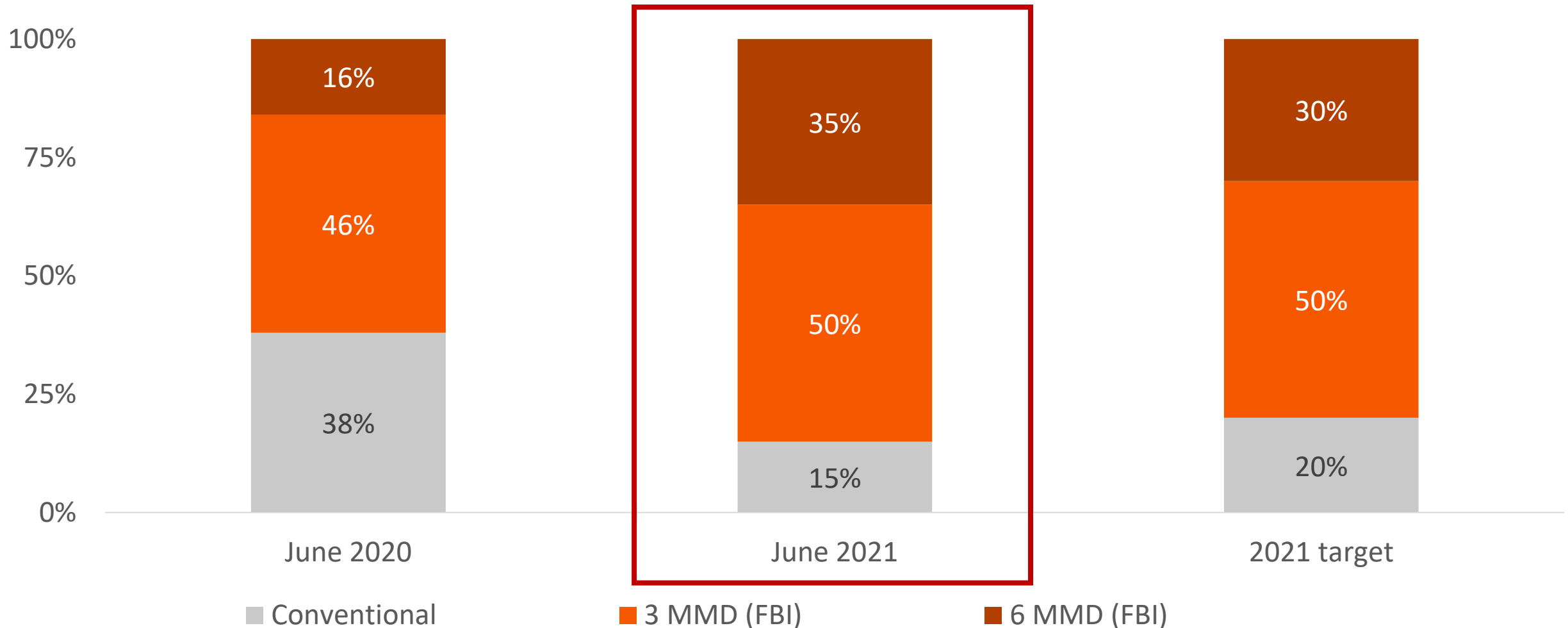


Ghana - CQUIN Dashboard

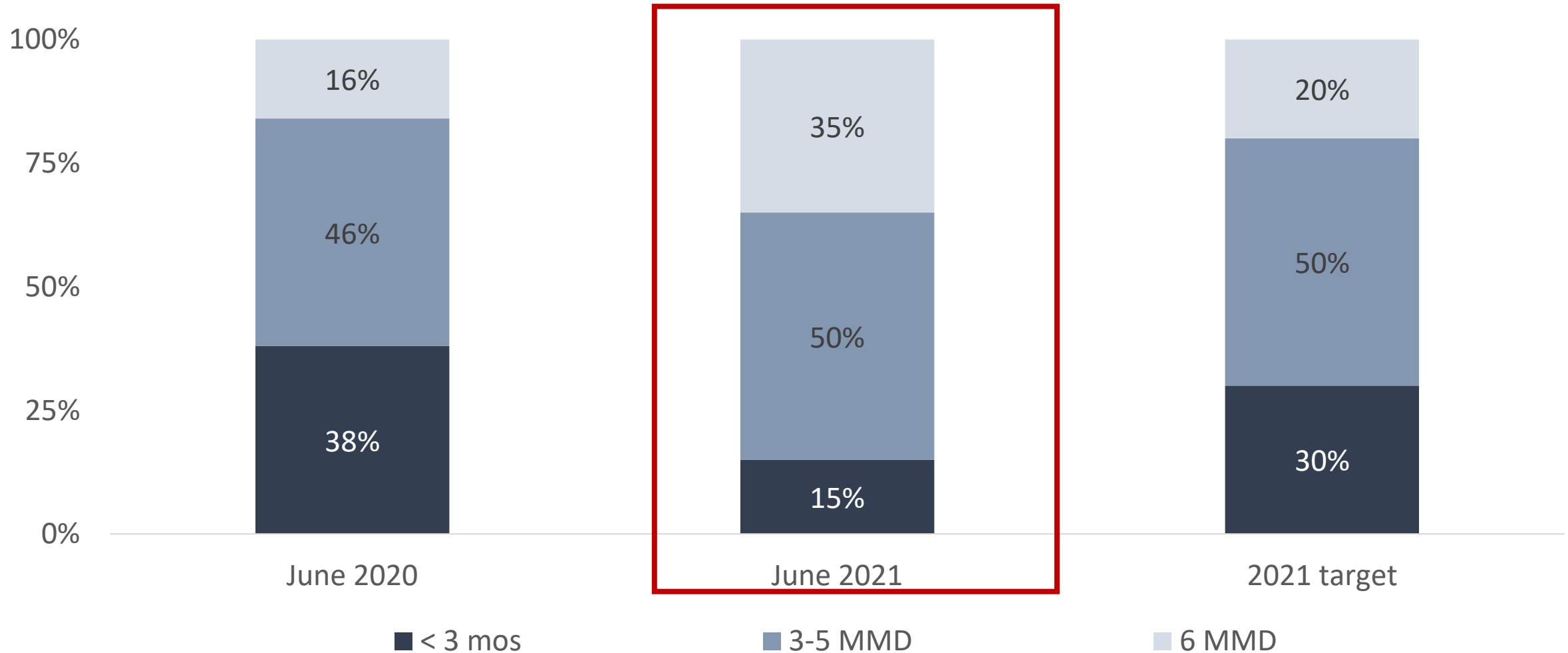
Changes: 2020 -2021

Domains	2017	2018 I	2018 II	2019	2020	2021
Policies					Green	Green
Guidelines					Green	Green
Diversity					Green	Green
Scale-Up Plan					Red	Yellow
Coordination					Green	Green
Community Engagement					Green	Green
Training					Light Green	Light Green
SOPs/Job Aids					Green	Green
M&E System					Orange	Yellow
Facility Coverage*					Red	Light Green
Patient Coverage					Red	Green
Quality					Red	Yellow
Impact					Orange	Orange

Ghana: Model mix, June 2020-21 results vs. 2021 targets



Ghana: Quantity of ART distributed - MMD



Ghana: Selected Achievements

- Through the virtual engagements, possible ARVs that would have expired was averted
- Through the virtual engagements, challenges with use of new data tools were sorted
- KP data tools updated to capture differentiated testing data at high yield entry points

Ghana: Selected Challenges

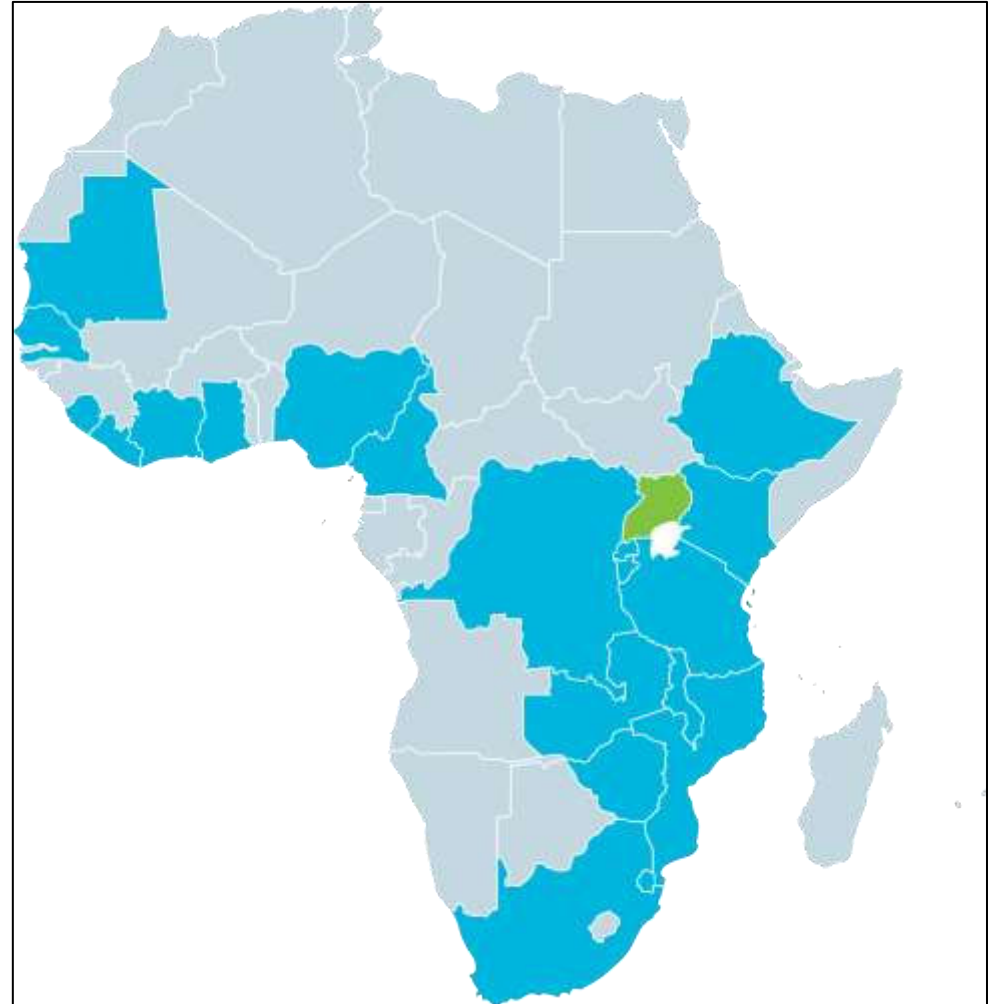
- People log on to the virtual meetings but are distracted and do not pay attention
- Internet coverage bad in certain locations
- Funding for activities
 - Training more facilities to provide DSD for HIV care
 - Sustained funding for monthly facility meetings
 - Expanding HIVST at the national level

Ghana: Goals and Targets for 2022

- 90% of people on ART will be in less-intensive DSD treatment models
- Plans for model mix:
 - Scale-up of Teen clubs and Mentor mother clubs
 - Community ART delivery - CHAG
- Strengthen one stop services for NCD/HIV at facilities with skilled HCWs
- KP service providers aim to create more safe spaces for KP service delivery
- DSD for AHD being clearly outlined in updated DSD operational manual

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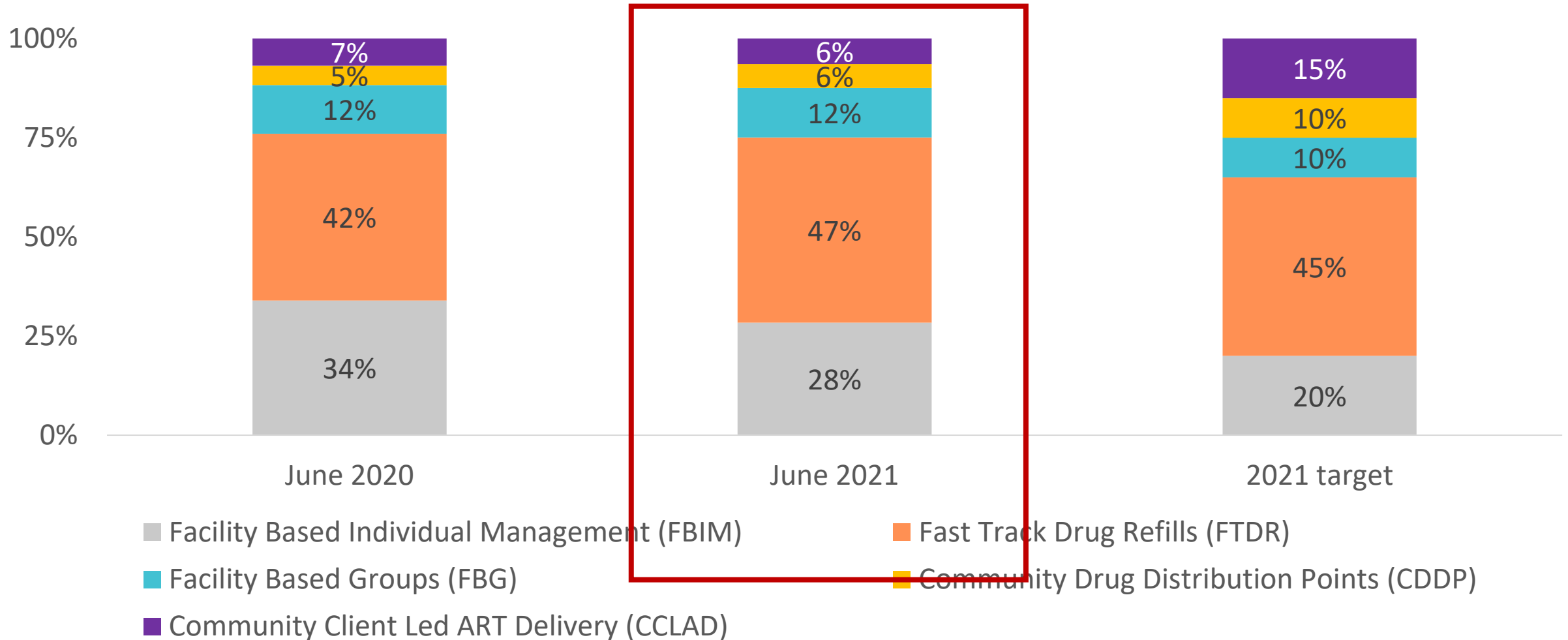




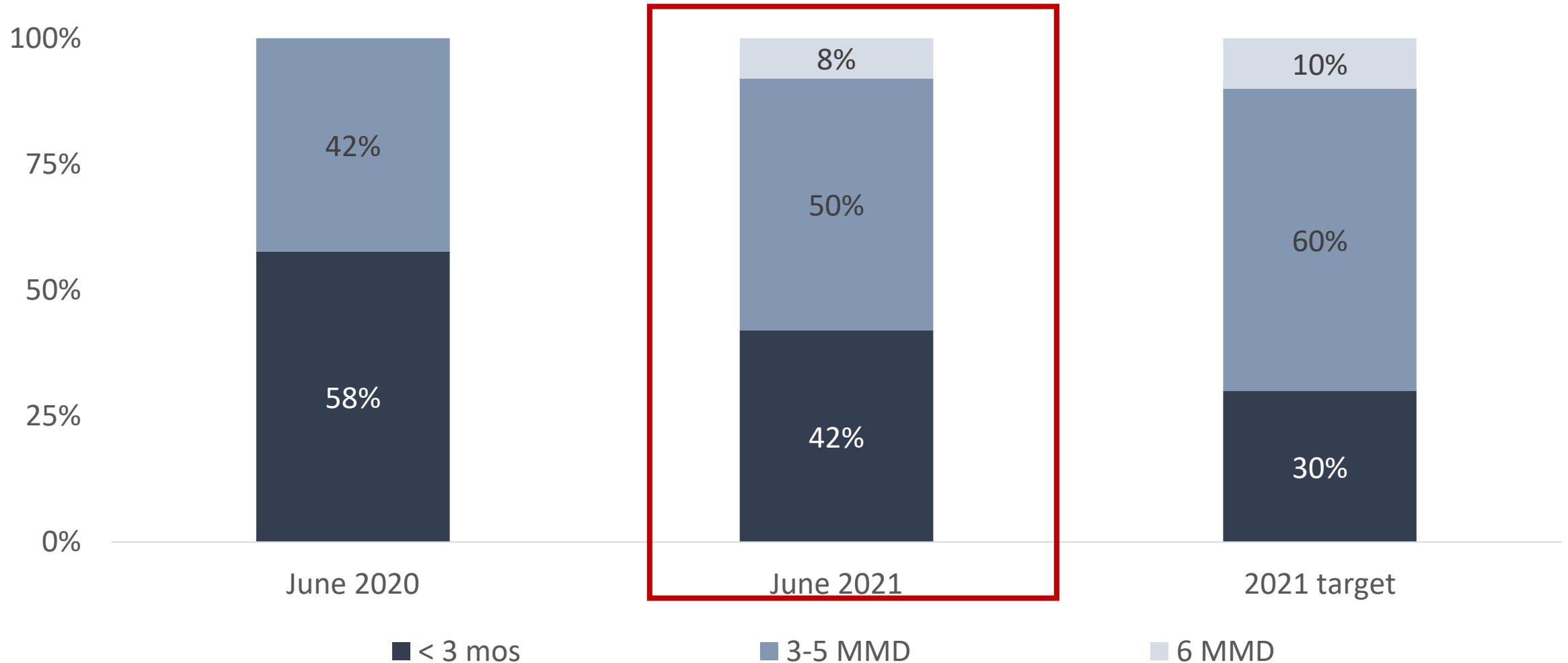
Uganda - CQUIN Dashboard Changes: 2017-2021

Domain	2017	2018 I	2018 II	2019	2020	2021
Policies		Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Guidelines		Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Diversity		Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Scale-Up Plan		Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Coordination		Light Green	Dark Green	Dark Green	Dark Green	Dark Green
Community Engagement		Yellow	Dark Green	Dark Green	Dark Green	Dark Green
Training		Light Green	Light Green	Light Green	Light Green	Dark Green
SOPs/Job Aids		Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
M&E System		Orange	Orange	Light Green	Light Green	Dark Green
Facility Coverage*		Yellow	Light Green	Light Green	Dark Green	Dark Green
Patient Coverage		Grey	Light Green	Light Green	Dark Green	Dark Green
Quality		Yellow	Yellow	Yellow	Yellow	Yellow
Impact		Yellow	Red	Yellow	Yellow	Light Green

Uganda: Differentiated Treatment Model Mix



Uganda: Quantity of ART distributed - MMD



Uganda: Selected Achievements

- Improved DSD data visualization and utilization
 - Developed a DSD dashboard for visualization of DSD data elements in the Uganda HMIS
 - DPR and DSD learning sessions
- Improved DSD model mix
 - More ROCs on more less intensive models (LIM) than fewer in more intensive models (MIM)
- Developed implementation guidelines and started rollout of Alternative Drug Distribution Points (ADDPs)
 - Decongesting facilities
 - More ROC centered care

Uganda: Selected Challenges

- Limited funding for DSD capacity building activities
 - DPR, DSD learning sessions
 - Support supervision and mentorships
- Limited integration of DSD M&E components in the national HMIS systems
- Lack of a comprehensive DSD demand generation package

Uganda: Selected Goals and Targets for 2022

- 80% of people on ART will be in less-intensive DSD treatment models
 - 25% of PLHIV active on ART enrolled into community based DSD treatment models
 - Model mix
 - FBIM – 10%; FBG – 10%; FTDR – 55%; CDDP – 10%; and CCLAD – 15%
 - Plan to conduct a comprehensive impact assessment
 - Finalize guidelines to integrate NCDs services into less-intensive models

In Summary...

Shared achievements:

Shared challenges:

Shared 2022 Goals:

Panelists/Panélistes/Painelistas



Akosua Baddoo
Head of Clinical Care
MOH Ghana



Elsie Aye
National President
National Network of Positives
Ghana



Nii Akwei Addo
Executive Director
EQUIP Health
Ghana



Josen Kiggundu
Senior Program Officer
Ministry of Health
Uganda



Stella Kentutsi
Executive Director
NOFOPHANU, Uganda



Joseph Kabanda
PHS - Care and Support
CDC, Uganda



CQUIN 5th Annual Meeting

Virtual: November 16-19, 2021

Session 6 starts at 10:00am EST/3:00pm West
Africa/4:00pm Geneva/5:00pm Pretoria/6:00pm Nairobi



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