

# **South Africa Update**

**CQUIN 5th Annual Meeting** 

Ms. Letta Seshoka

Deputy Director: Care & Treatment Directorate and Ministry of Health

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## **Outline**

## Where are we now?

- CQUIN Dashboard Results
- DART Model Mix

## How did we get here?

- Update on CQUIN Action Plan
- COVID19 specific adaptations
- Successes and Challenges

## 2022 goals and targets

## **CQUIN Dashboard Results**

- South Africa noted significant improvement between 2020 and 2021
- 12 out of 13 domains reached Dark Green staging (most mature)
- Notable improvement in 3 domains:
  - ✓ DMOC/DSD Scale Up Plan
  - ✓ M&E System
  - ✓ Quality

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

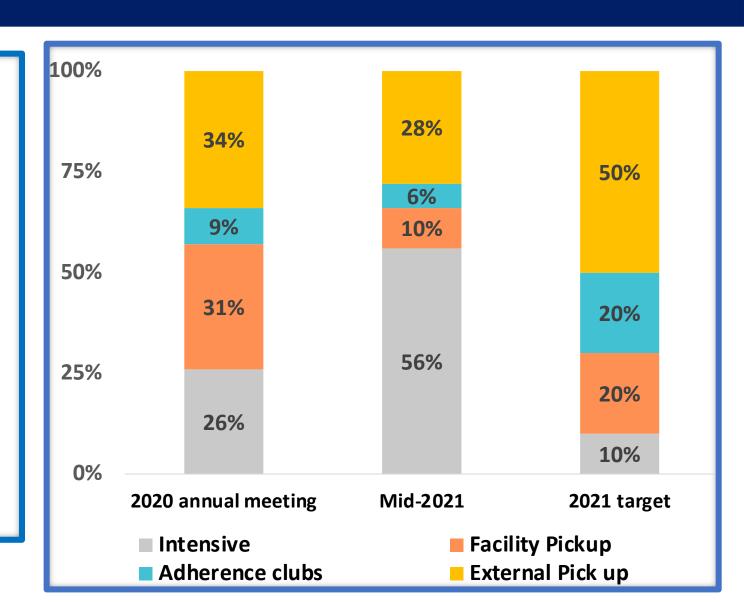
# Change in Dashboard Domains since 2020

- Scale up Plan moved from <u>Light green</u> to <u>Dark Green</u>
- M&E System moved from <u>Yellow</u> to <u>Dark Green</u>
- Quality moved from <u>Light green</u> to <u>Dark Green</u>

Change in Dashboard Domains		mains	What Contributed to the Change?					
Domain	2020	2021	What Contributed to the Change?					
DSD Scale Up Plan			<ul> <li>All 9 provinces are orientated on the revised AGL-SOPs. This includes districts and District Support Partners &amp; PEPFAR Agencies.</li> <li>Optimal implementation of DSD/DMOC</li> </ul>					
M&E System			<ul> <li>DSD/DMOC Indicator included in the Tier.Net and Central Chronic Medicine Dispensing and Distribution (CCMDD) EMR systems</li> <li>DMOC Indicator part of Business Plans process &amp; Division of Revenue Act (DORA) reporting requirement</li> <li>Ongoing technical support to optimize Tier.net use and data analytics using longitudinal systems</li> </ul>					
Quality			Initiative of Operation Phuthuma Quality Improvement Handbook for the Nerve Centres					

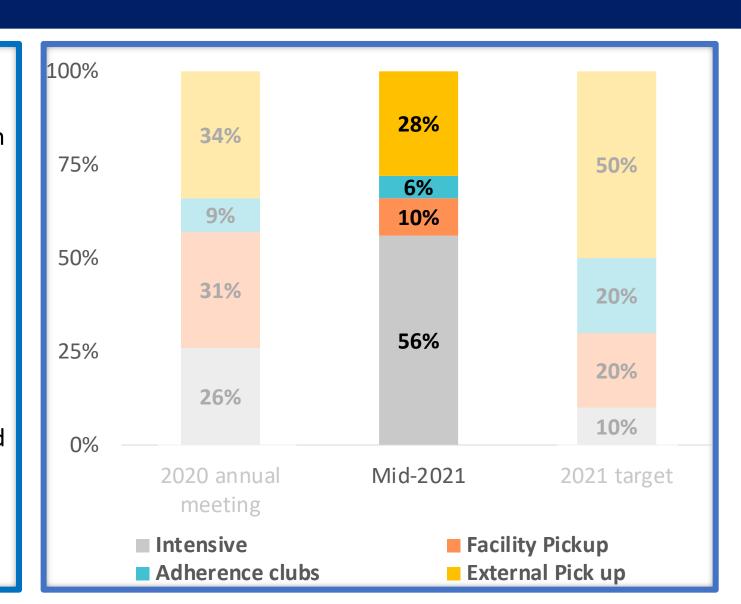
## **Differentiated Treatment Model Mix**

- South Africa has 3 recognized "Less Intensive Models"/ Repeat Prescription Collection Strategies (RPCS) in South Africa: External Pick-Up Point (Ext-PuP); Facility Pick Up Point (FAC-PuP) and Adherence Club (AC)
- More Intensive model known as Conventional Model (Comprised of Newly initiated on ART, High VL, Loss to Follow-up (LTFU), Deregistered from DSD/RPCS.



## **Differentiated Treatment Model Mix**

- The Covid-19 hard lockdown regulations had effect of less intensive models.
- However, during mid-year 2021 the proportion of External Pick-Up Point (Ext-PuP) was higher (28%) compared to Facility Pick Up Point (FAC-PuP) (10%) and Adherence Club (AC) (6%)
- The significant decrease of FAC-PuP and AC exacerbated by hard Covid-19 lockdown regulations discouraging social gatherings & Many clients fear.
- Meanwhile, the Conventional Model increased due to patients Newly initiated on ART, High VL, Loss to Follow-up (LTFU), Deregistered from DSD/RPCS both not eligible for Less Intensive Model



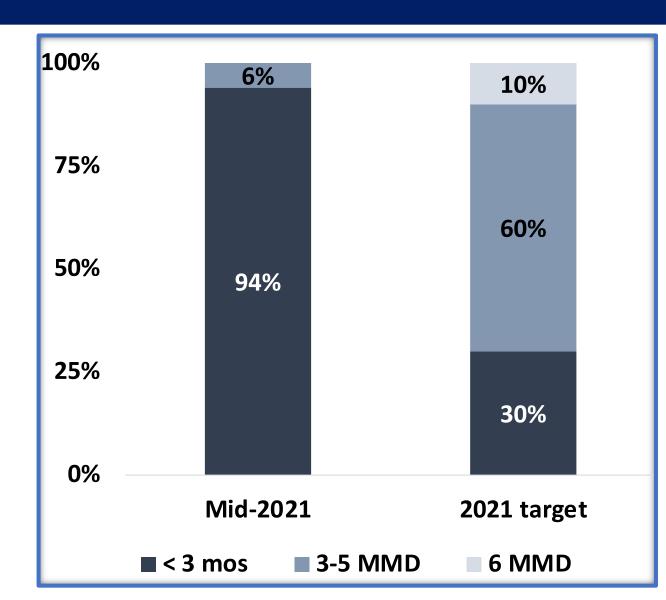
## **AHD Dashboard Results**

- Significant improvement in AHD dashboard staging results for 2021 compared to 2020.
- 14 out of 18 domains = Dark Green and only 4 domains = Light Green
- Domains needing improvement:
  - ✓ AHD Training
  - ✓ AHD M&E System
  - ✓ AHD Quality
  - ✓ and conducting evaluation studies to determine the impact of AHD services

AHD Dashboard Results						
Domain	2020	2021				
Policies						
Guidelines						
National AHD Implementation Plan						
Standard Operating Protocols (SOPs)						
Coordination						
Engagement of Recipients of Care						
Training						
Diagnostic Capacity 1						
(Advanced Immunosuppression/AHD)						
Diagnostic Capacity 2						
(Opportunistic Infections & Comorbidies: Xpert, MTB/Rif assay, TB LAM & CrAG)						
Facility Coverage*						
Patient Coverage 1 (AHD Testing)						
Patient Coverage 2 (Screening for AHD Immunosuppression)						
Patient Coverage 3 ( Prevention of Ols)						
Patient Coverage 4 (Management of Ols)						
Supply Chain Management for AHD Commodities						
M&E System						
Quality for AHD Services						
Impact for AHD Services						

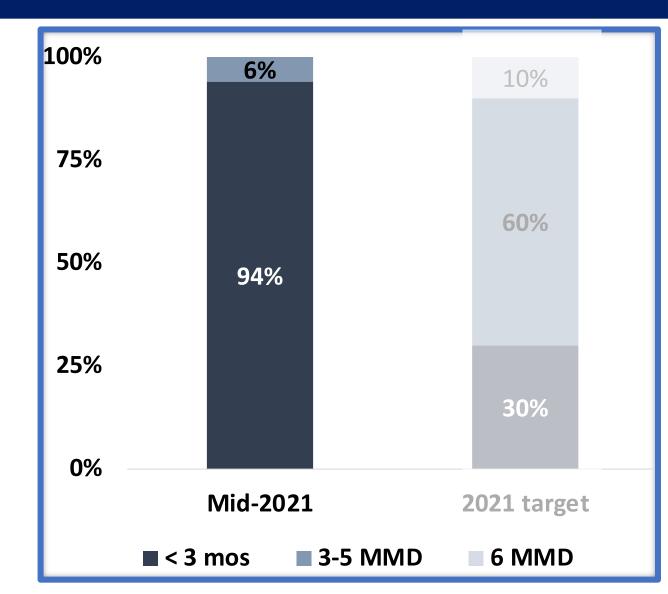
# **Multi-Month Dispensing**

- ART clinical guidelines, made provision for MMD 1 to 2 months.
- Policy adaptation due to Covid-19 in April 2020 recommended for 3MMD scale up.
- 6MMD demonstration process in two provinces begun with further discussion to assume HIV & NCDs approach underway at Steering Committee level.



# **Multi-Month Dispensing**

- MMD scale up plateaued during 2021 mid-year reporting period.
- The Flatline was affected by drug stock instability and shortages, exacerbated by effects of Covid-19 lockdown regulations that disrupted the supply chain mechanisms.
- Therefore, high proportion (94%) of patients still receives 1 2 months dispensing. Meanwhile only 6% receive MMD3 as informed by policy adaptation due to Covid-19.



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## **Update on CQUIN Action Plan – 1**

### Activities that have been successfully completed include:

- Goal #1: To Improve implementation of National DSD Scale-up Plan from light green to dark green by end-2021 (ACHIEVED)
- Convened DMOC/DSD Technical working Group meetings/ DSD performance reviews to improve coordination and scale up of DSD plans (FAC-PUP, Ex-PUP, AC)
- Optimized SI Operation Phuthuma platform to review and track the DSD/DMOC scale up plans
- Goal#2: To Improve M&E System from yellow to dark green by end-2021 (ACHIEVED)
- DSD/DMOC Indicator included in the Tier.Net and CCMDD EMR systems
- DMOC Indicator part of Business Plans process & DORA reporting requirement
- Ongoing technical support to optimize Tier.net use and data analytics using longitudinal systems
- Goal #3: To improve Quality domain score from light green to dark green by end-2021 (ACHIEVED)
- Engagements with Operation Phuthuma for inclusion of DMOC/DSD domains in the OP Handbook for Quality Improvement
- Plans to operationalize DMOC in the OP nerve center handbook underway

## **Update on CQUIN Action Plan – 2**

### One or two activities that were dropped or are still underway include:

- DSD register pilot to be finalized in the two provinces (KZN and NW) in November 2021
- DSD/ DMOC Performance Reviews continues in the Provinces ( Starting in KZN in November)

## Were any items added to the action plan midyear?

### After the Differentiated MNCH meeting in May 2021?

- Evaluation of the implementation of the National policies and guidelines (PMTCT, SRH, MCH including genetics) Youth and Adolescent, Infant and Young child and HIV guidelines
- Maternal Child and Women's Health (MCWH) reviews in all provinces, between September November
   2021

### After the Differentiated KP services meeting in August 2021?

- Finalizing the Key Population Sector plan
- Expanding Key Population friendly services
- Developed the KP logic framework
- Updated the STI screening tool to included KPs
- Plans to visit Free State Province to learn best practices as they have a good model for KP

### DMOC/ DSD

• DSD performance Reviews to be conducted in all the provinces, however, plans to start with KZN and NW where the DSD register pilot are underway

# **COVID-specific adaptations**

### Three to four policies adapted in response to COVID19

- Adherence Guideline (AGL) Standard Operating Procedures. Minimum Package of Interventions to Support Linkage to Care, Adherence and Retention in Care
- National consolidated guidelines for the management of HIV in adults, adolescents, children and infants and prevention of mother to child transmission.
- Response to reduce risk among HIV and TB patients within the context of the COVID-19 pandemic: The South African response to COVID-19
- Community ART SOP
- Managing Maternal, Neonatal and Child Health During the COVID-19 Pandemic in South Africa: A Clinical Guide for Health Workers and Managers

### Which of these will be sustained beyond COVID19?

All the above

# M&E adaptations made in response to COVID19 and new DSD policies adapted to enhance data reporting

Developed DSD/ DMOC indicator for programme reporting

DSD/DMOC Indicator included in the Tier.Net and CCMDD EMR systems.

DSD/DMOC Indicator part of Business Plans process & DORA reporting

Conducted individual provincial engagements on the reporting of DSD/DMOC indicators DORA reporting requirement

Developed the Operation
Phuthuma Quality
Improvement Handbook
(DMOC/DSD Indicator
Stepwise Summary Charts &
Key Drivers for Improvement

Ongoing technical support to optimize Tier.net use and data analytics using longitudinal systems

## Successes

Significant improvement & Maintenance of DSD dashboard staging domains (12 out of 13 domains reached Dark Green staging)

Significant improvement on AHD dashboard staging (14 out of 18 domains currently on Dark Green)

Adoption of DSD for HIV & NCD integration; DSD for TB/HIV; DSD for MCWH; DSD for Key Population; DSD for AHD; DSD quality

To have provinces reporting on the DSD indicators as new indicators through the DORA framework

Continuous engagements with the national CCMDD programme on DSD scale-up and monitoring

Inclusion of Civil Society forum in the DSD TWG meetings, and have them presenting their work

Virtual Provincial engagements on catch-up plans progress

## Challenges (other than COVID-19)

## Case finding (Mainly Men & Children under 15 years)

• Sub-optimal scale-up of Index testing and HIV Self Screening.

## **Poor linkage to care**

• Men predominately not willing to be linked to facilities ( Attributing to Health Seeking Behavior)

### Gaps in treatment initiation and retention in care

- Started on ART currently at 72%, below the required target to close treatment gap
- Slow implementation of Community ART initiation SOP to close the treatment gap
- Slow TROA growth
- Slow scale up of MMD-3

### High loss to follow-up

- Exacerbated by poor data capturing/ backlog leading to increasing LTFU
- Low uptake of VL testing in some provinces

### **Provincial Engagement**

• Face to face provincial engagements has been a challenge

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# 2022 Goals and Targets – 1

By CQUIN's next annual meeting (end-2022):

90% of people on ART will be in less-intensive DSD treatment models

#### Plans for model mix:

- External Pick-Up Points (60%),
- Facility Pick Up Points (20%),
- Adherence Clubs (10%),
- Conventional/Standard Care Model (10%);

Moving to scale-up of 3-MMD

Demonstration of 6-MMD to inform the scale up

Plans to integrate TB/HIV services into less-intensive models

Plans to integrate NCDs services into less-intensive models

Plans to integrate family planning into less-intensive models

# 2022 Goals and Targets – 2

### Plans for AHD services:

- Scale coverage of AHD training
- Optimize National AHD Implementation Plan

### **Plans for differentiated MCWH services:**

- Complete the National MCWH evaluations & Disseminate findings
- Strengthen the mother and baby pair when followed up to ensure adherence and retention

### Plans for differentiated KP services:

- Accelerate effective efficient implementation of targeted key population interventions to close gaps on service access, meaningful involvement of KPs groups, sensitizations and full decriminalization.
- Optimize Surveillance Systems & Population size estimation and mapping platforms to assist South Africa to identify the numbers of key Populations groups for effective programming.

### Plans for impact assessment:

• Conduct the comprehensive review of AGL Policy - to optimize DSD for HIV & NCD integration; DSD for TB/HIV; DSD for MCH; DSD for Key Population; DSD for Men; DSD for AHD; DSD quality

# 2022 Goals and Targets – 3

What is the one most important **DSD-related** goal or target in your country's plans for 2022?

To conduct the DSD Performance reviews in all the provinces

# Acknowledgements

- Dr. Zukiswa Pinini (Chief Director HIV/AIDS Cluster MOH)
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- Ms. Romy Fritz (Operation Phuthuma Lead MOH)
- Ms. Lauren De Kock (Operation Phuthuma Ql Lead Aurum)
- Ms. Regina Maithufi (Deputy Director KP programme MOH)
- CCMT Technical Working Group (key Stakeholders)

























Thank You!!!

