

### Kenya Country Update

CQUIN 5<sup>th</sup> Annual Meeting

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16 November 2021



#### 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

# Overview - HIV Burden & Treatment Coverage, Outcomes in Kenya



4.5% HIV Prevalence

5.7% 3.1%
1.5 M PLHIV (all ages)



1,401,498
Adults living with HIV (15+ yrs)

106,807 Children living with HIV (0 - 14 yrs)

**New HIV Infections, 2019** 



41,416 All ages

34,610 Adults (15+)

6,806 Children (0-14)



Children (0 - 14 yrs)

**68, 011 (63.7% ART Coverage) 87.2% Viral Suppression** 

Adults (>15 yrs)

**1,164,753** (83.1% ART Coverage) **94.7%** Viral Suppression

#### DSD Coordination & Guiding Documents - Kenya

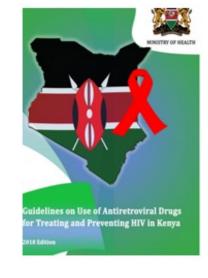
#### Coordination

National HIV Technical Working Group

Care & Rx Committee of Experts (CoE)

DSD Sub-Committee of Experts (CoE)

#### Guidance for DSD





#### Kenya CQUIN Dashboard Results - 2021

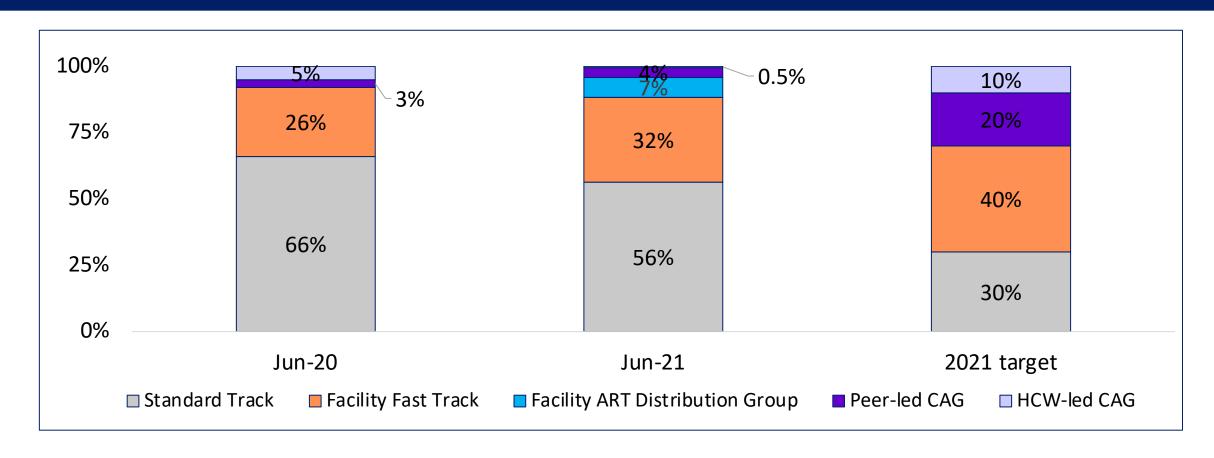
Policies				
Guidelines				
Diversity	Training			
Scale Up Plan	SOPs/Job AIDs	Patient Coverage		
Coordination	M&E System	Quality		
Community Eng.	Facility Coverage	Impact		
Dark Green	Light Green	Yellow	Orange	Red

• Indicator Performance: 6/13 (Dark Green), 4/13 (Light Green), 3/13 (Yellow)

### Kenya - CQUIN Dashboard Changes: 2017-2021

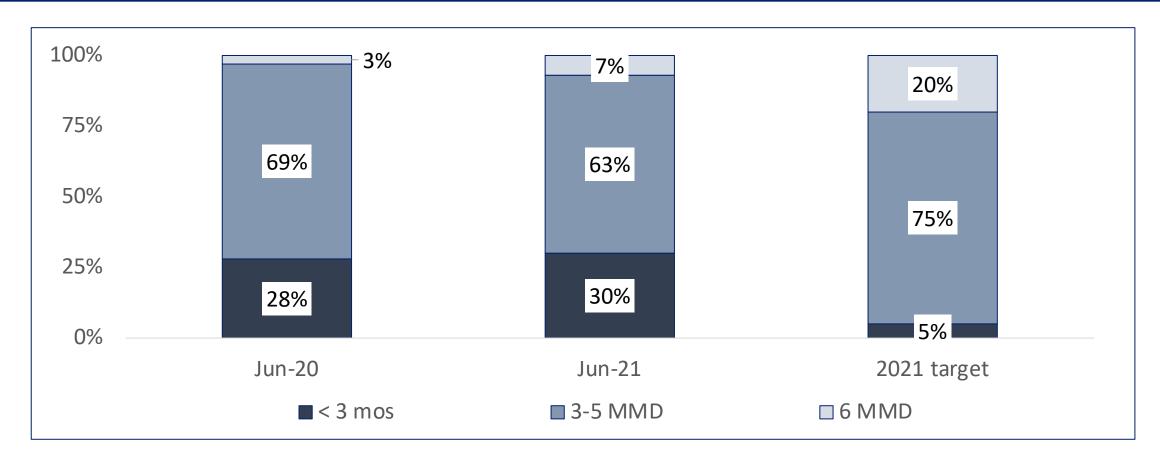
Domain	2017	2018 I	2018 II	2019	2020	2021
Policies						
Guidelines						
Diversity						
Scale-Up Plan						
Coordination						
Community Engagement						
Training						
SOPs/Job Aids						
M&E System						
Facility Coverage						
Patient Coverage*						
Quality						
Impact						

#### Kenya - Model Mix June 2020 - 21 Results vs 2021 Targets



• Slight increase in facility fast track model, accounts for majority of clients on less intense models DSDM

## Kenya - Quantity of ART Distributed June 2020-21 Results *vs* 2021 Targets



• Slow scale up achieve targets due to ART commodity supply chain challenges experienced in the year

#### Kenya - AHD Dashboard Results

Domain	May - Results	July - Re-staging
Policies		
Guidelines		
Implementation plan		
SOPs		
Coordination		
Engagement of RoC		
Training		
Diagnostic Capability 1 (Identifying AHD)		
Diagnostic Capability 2 (Identifying OI)		
Facility Coverage		
Patient Coverage 1 (Testing for AHD)		
Patient Coverage 2 (OI Screening)		
Patient Coverage 3 (OI Prophylaxis)		
Patient Coverage 4 (OI Management)		
Supply Chain Management		
M&E System		
Quality		
Impact		

- 1st pilot conducted in May 2021
- Re-staging done in July 2021 using updated AHD dashboard
- Some of the domains staging regressed between May and July due to improved accuracy of staging, data availability
- Pilot has helped Country to identify gaps that need to be addressed to improve the quality of AHD services

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#### Update on CQUIN Action Plan

#### Activities that have been successfully completed:

- Streamlined M/E data reporting for DSD: DSD reporting indicators included in documentation and reporting tools in recent national M&E tools revision. Dashboards available in the National Datawarehouse (NDWH) – undergoing further updating, improvement
- Activation of DSD Sub-Committee of Experts
- Adoption of Scale up plan for DSD

#### One or two activities that were dropped or is still underway:

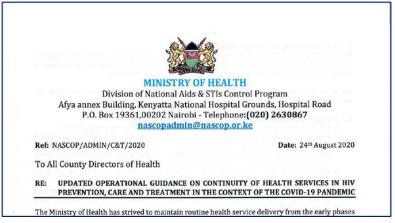
- National ART Guidelines and DSD Operational Manual revised to align with recent WHO recommendations. ART guidelines and DSD Operational manual currently under review
- DSD Performance Review underway. Data collection in 10 selected Counties; Dissemination meeting planned end of November 2021
- o Finalization of IEC materials for engagement of ROC to be done in Q2 (Jan-Mar 2022) with support from GF funding for IEC materials after finalization / launch of guidelines

### Activities Added to the Action Plan Mid-year

- Additional Action Plans Post Differentiated MNCH meeting in May 2021
  - Engagement with Division of Reproductive Health (DRH) to streamline policy / programming with PMTCT
  - Integration of FP into community DSD model
- After the Differentiated KP services meeting in August 2021
  - Address data quality / streamline reporting for KP cascade in KHIS and the National Datawarehouse
  - Stigma and Violence prevention and response programs sensitization programs
  - Scale up community led interventions / monitoring
  - Strengthen TWGs at County level (coordination of KP services) continuous support

### **COVID-specific Adaptations**





#### **Policy Changes**

- Three Multi Month Dispensing (3-MMD) for all clients regardless of age or previous viral load
- Scale up of ART distribution through Community ART Groups (CAGs), home ART distribution by CHVs / peer educators
- Prioritized viral load testing for new patients, PMTCT and those with suspected treatment failure
- Scale up of mobile based appointment and adherence platforms like *Ushauri*

#### Post-COVID-19

 Expansion of MMD in revised guidances – post COVID-19

#### Successes

- National guidance/policy shift issued during COVID-19 ensured continuity of service for RoC
- Worked with multi-stakeholders in country to adopt the new WHO guidance for DSD into the draft revised national ART guidelines and DSD operational manual
- DSD M&E indicators have been included in the revised national M&E tools
- Inclusion of funding requests in GF funding for HCW training for DSD.
- Support from PEPFAR for DSD performance review activities
- Successful virtual south-to-south exchange with Eswatini on NCD integration

### Challenges

- Recent national stock level challenges for availability of key ART commodities e.g., TLD affected scale up of MMD
- Erratic supply chain for Viral Load Reagents impaired assessment of RoC for stability and transition to less intensive DSD models

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### 2022 Goals and Targets

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

- o 70% of people on ART will be in less-intensive DSD treatment models
- Plans for model mix e.g.
  - Inclusion of decentralized ART distribution for ART through a pharmacy model
  - Expansion of 3-6 MMD; inclusion in policy, pre-requisite national buffer
  - Scale up of models for children (family model) and AYP (facility AYP clubs)
- Plans to integrate TB/HIV services into less-intensive models?
  - o Screening for TB already included in less-intensive models
- Plans to integrate NCDs services into less-intensive models?
  - Inclusion of BP screening in less-intensive DSD models couple of pilots already ongoing
- Plans to integrate family planning into less-intensive models?
  - Capacity building of HCWs, integration of oral FP into less-intensive DSD models

### 2022 Goals and Targets - (2)

- Plans for AHD services:
  - o Review, address availability of data for diagnostics and patient coverage
  - Capacity building of HCWs management of AHD (spec. CM)
- Plans for differentiated MNCH services
  - Scale up of DSD models specifically for AGYW
  - Streamline policy/planning between NASCOP/DRH
- Plans for differentiated KP services
  - Scale up community led monitoring, harm and stigma reduction interventions
  - Streamline KP data reporting in national M&E systems
- Plans for differentiated HIV services for mobile, migrant and/or displaced people;
  - Scale up models esp for migrant populations in Arid and Semi Arid Location Counties ART outreach model
- Nation wide DSD performance review in all the 47 Counties

### 2022 Goals and Targets - (3)

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

 Increase of less-intensive DSD model patient coverage



Home

Reporting Rates

**HIV Testing & Prevention** 

**HIV Treatment** 

Resources

Home / HIV Treatment

NEWLY STARTED ON ART CURRENT ON ART ART OPTIMIZATION

ADVERSE EVENTS - AE DSD

VL MONITORING

TREATMENT OUTCOMES

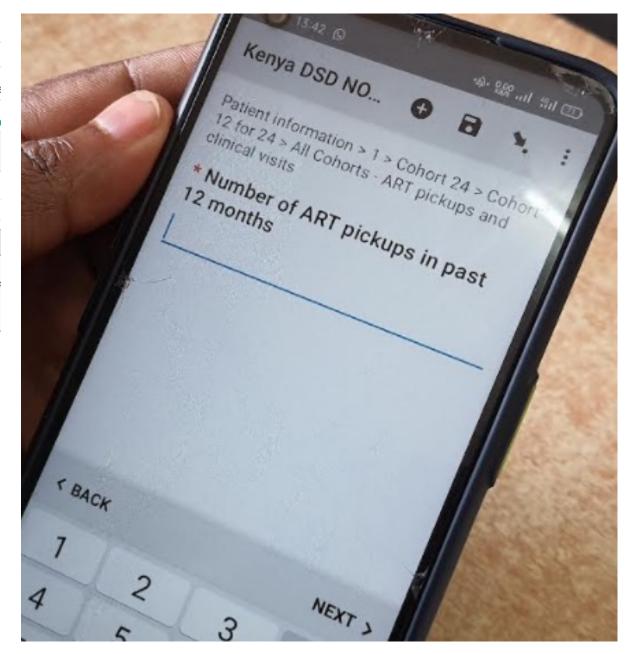
#### DIFFERENTIATED SERVICE DELIVERY County Sub-County Facility

#### Indicator Definitions

- MMD = Multi Month Dispensing. The duration between clinic visit date and next clinic appointment of 90 or more days.
- . In computing the patients current on ART, those with a visit date but do not have a next appointment date have 30 days added to their visit date to imp
- . Stable patients is based on documented stability status on the EMR
- \*\* In this Dashboard the Number of Stable Patients excludes 0-19Yrs







### Acknowledgements

- Kenya MOH
- CQUIN
- County Governments
- PEPFAR
- Global Fund
- Networks of PLHIV in Kenya