



Taking Differentiated Service Delivery to Scale in Ghana: Ghana's Journey with the CQUIN Network



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BACKGROUND

Ghana's National AIDS/STI Control Programme (NACP) adopted the 2016 WHO recommendations to treat all people living with HIV with antiretroviral therapy (ART) regardless of immune status or clinical stage. Among the recommendations adopted was Differentiated Service Delivery (DSD) to improve HIV service delivery and attain the UNAIDS 90-90-90 targets.

Subsequently, a comprehensive DSD operational manual was developed in 2017 and has since guided a phased national DSD scale-up. A DSD task team was also formed to oversee and track progress of DSD implementation. Implementation of the DSD-based acceleration plan led to major gains and progress, but the country fell short of achieving the 90-90-90 targets at the end of 2020. To increase the pace towards achieving epidemic control, the country signed up to several initiatives in 2020, one of which is CQUIN.

At the national level, DSD is coordinated by the Programme's DSD Coordinator, with support from the HIV Technical Working Group and DSD task team. At the sub-national level, DSD interventions are coordinated by Regional HIV Coordinators. Recipients of care play a significant role in DSD by being part of the DSD task team, helping with demand creation, serving as expert clients, providing adherence and psychosocial support, and tracking service quality, among other things.

DSD IMPLEMENTATION

Differentiated ART services are offered in 69% of the 684 ART sites in Ghana, and over two-thirds of clients on treatment are receiving differentiated care (Figure 1). DSD eligibility follows WHO recommendations. Currently, eligible clients mostly receive facility-based, individual care, which involves appointment spacing and fast-track refill (Figures 2 and 3). Approaches used to ensure that clients on treatment receive viral load testing services include: client education on the need for a viral load test, the use of electronic medical records, using stickers for flagging client records, and having viral load focal persons at the facility level.

Figure 1: Facility and Client Coverage for DSD



Figure 2: DSD Model Mix: Results vs. Targets

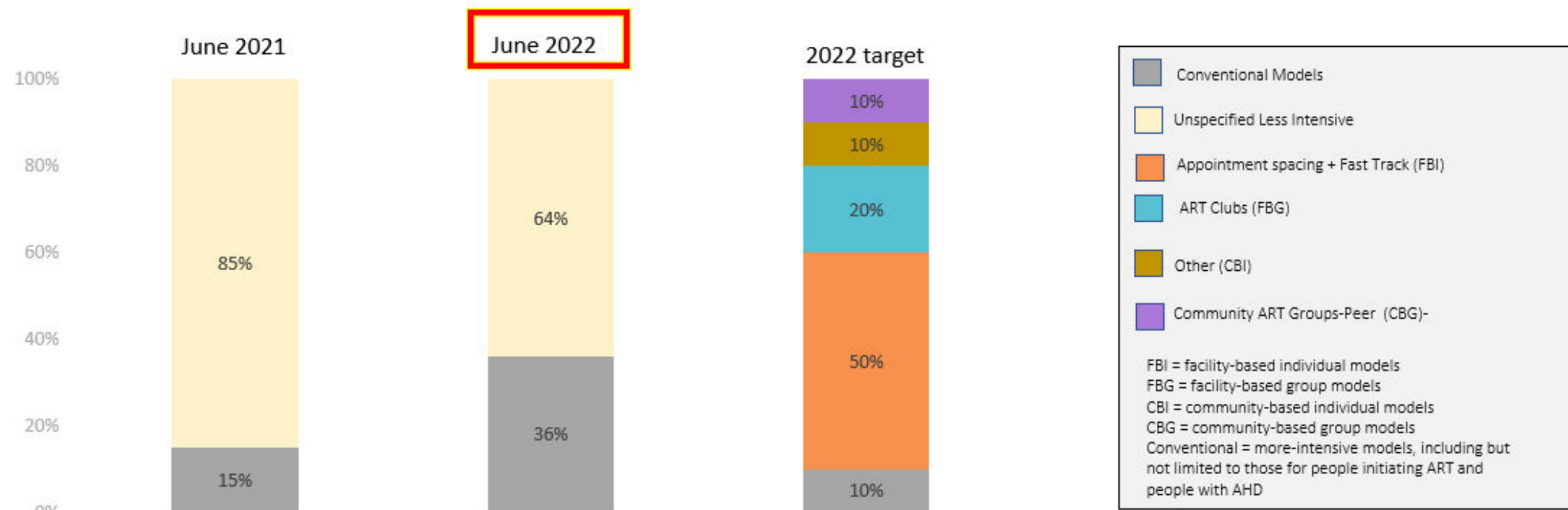
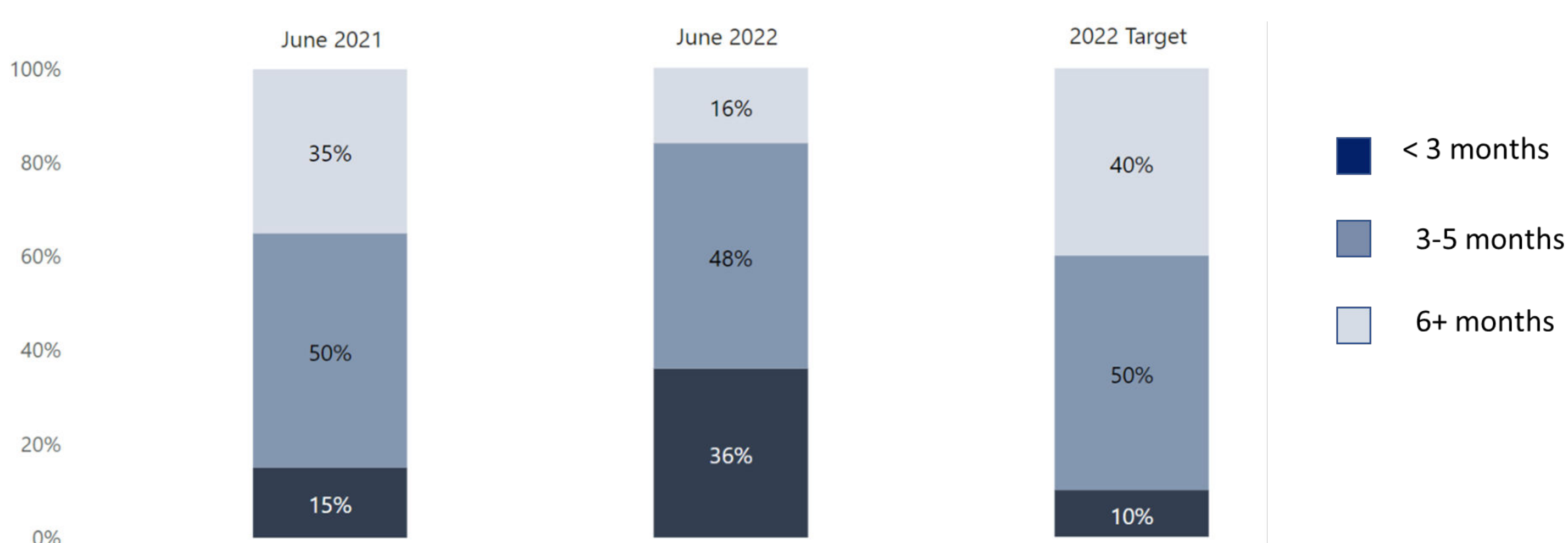


Figure 3: Multi-month Dispensing (MMD): Results vs. Targets



85% of clients were provided multi-month dispensing in 2021 because of the directive to minimize clinical visits for people on ART during the COVID pandemic. Following a return to the initial protocols and eligibility criteria, we noticed a decrease in that proportion to 64%.

DART CAPABILITY MATURITY MODEL STAGING RESULT

Figure 4: DART Capability Maturity Model Self-Staging Results 2022

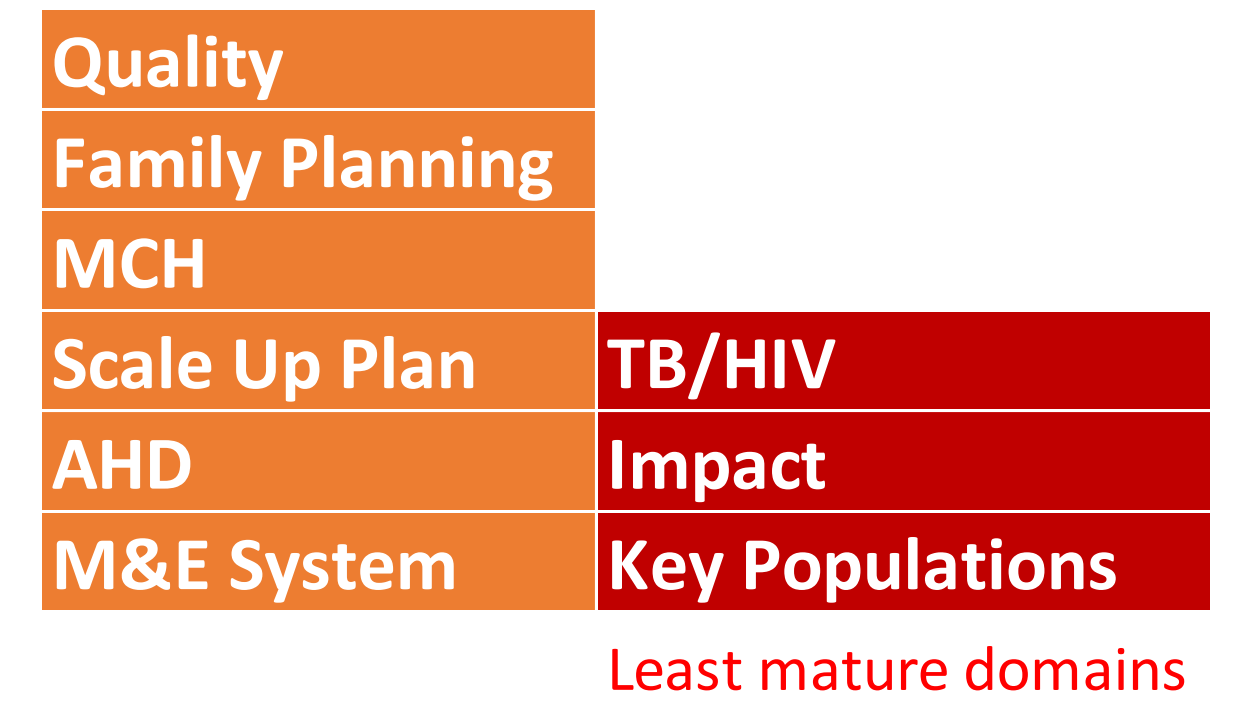
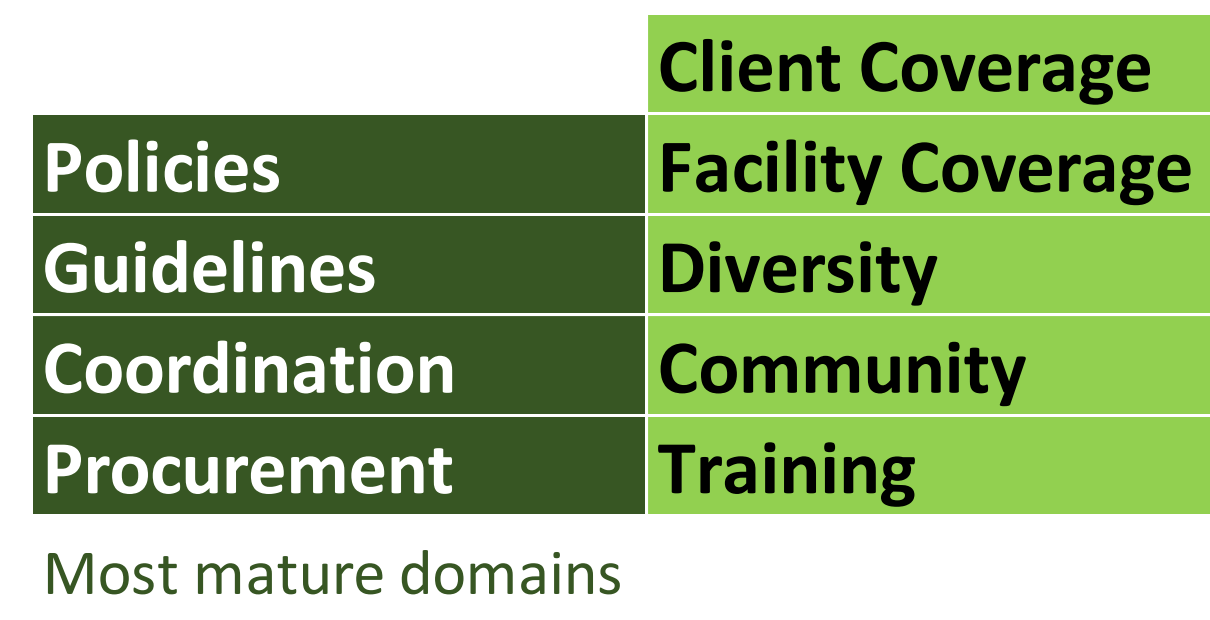
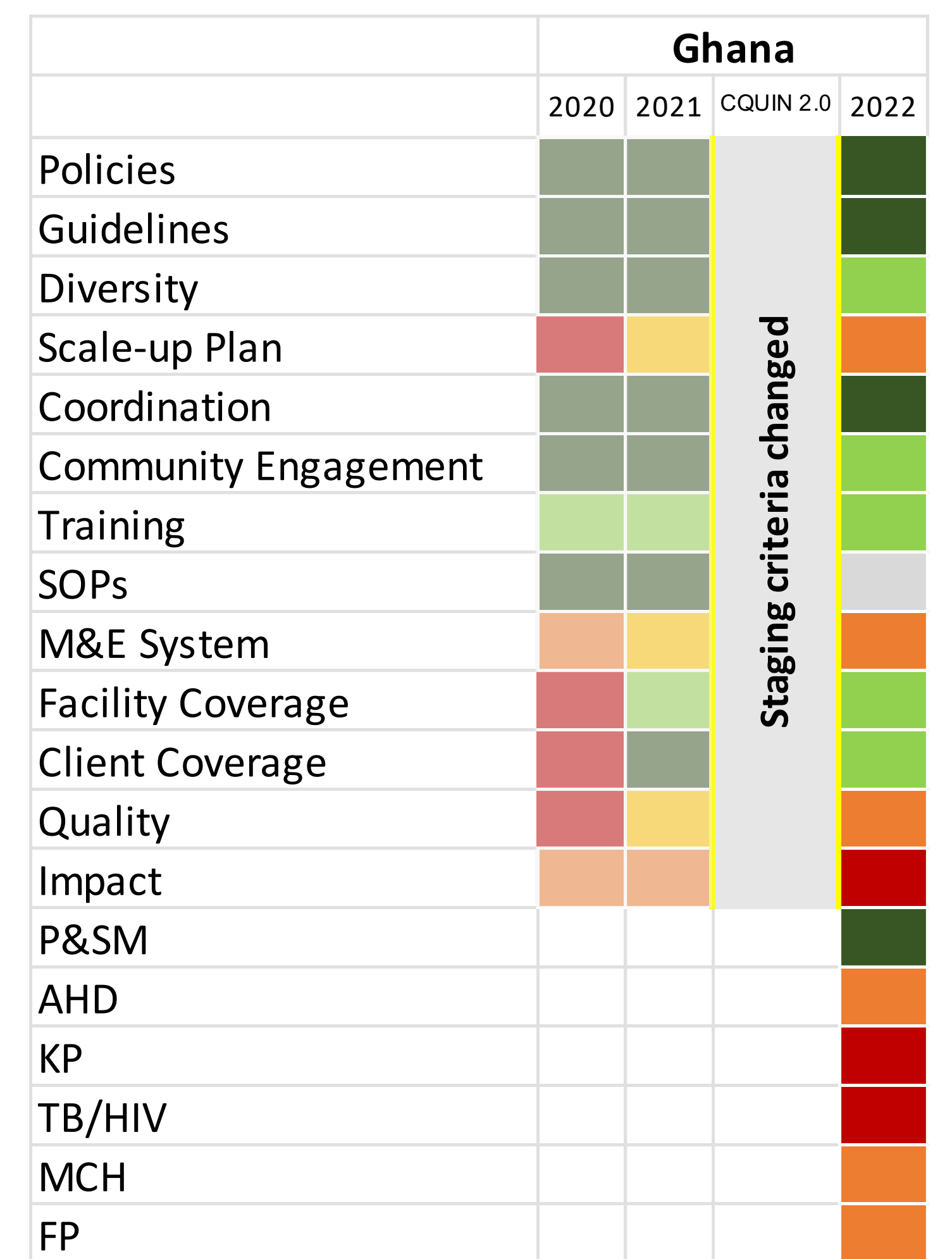


Figure 4 shows the results of the Ghana country team's recent self-assessment using the CQUIN DART capability maturity model. In 2022, Ghana achieved the most mature stage (dark green) in four domains, while three domains were in the least mature (red) stage.

Figure 5 describes DART dashboard progress over time and results of the revised and expanded DART capability maturity model used in 2022.

Figure 5: DART CMM 2020 – 2022



CQUIN ENGAGEMENT AND ACHIEVEMENTS

Ghana took part in several CQUIN activities over the past year, as captured in Table 1.

Table 1: Ghana's engagement in the CQUIN network

CQUIN INTERVENTION	OUTPUT	LESSONS LEARNED/ EFFECT ON DSD IMPLEMENTATION
Communities of Practice	M&E Quality/QI AHD TB/HIV MCH HIV/NCD KP HTS Mobile, migrant and displaced pops	➢ DSD-friendly data collection tools ➢ Plans to review and revise policies
Country-to-country visits	Community ART learning session in Uganda	Pilot of Community ART delivery started in 30 facilities
DSD performance review	Implemented	
DSD Service Quality Assessment (ART)	Assessment conducted in 156 facilities	Need for continuous mentorship and SOPs following DSD orientation
Network resources	1. Intervention pack for integrating family planning into HIV care 2. Ivory Coast Client care Register 3. DTG 10 roll-out pack (Rwanda)	➢ Piloted with UNICEF support ➢ Revised Ghana's client care register
Other CQUIN-supported activities	Treatment dashboard pilot/ staging	➢ Need to work on key domains ➢ Gaps being used for resource mobilization

NEXT STEPS/WAY FORWARD

- Seek Global Fund resources for DSD implementation
- Improve supportive supervision for DSD using the Service Quality Assessment tool
- Play an active role as a CQUIN Member Country and contribute to the growth of the network

ACKNOWLEDGEMENTS

