

# DSD Updates from DRC, GHANA, ZAMBIA: Framing Remarks

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## Outline

- Scaling up DSD: the CQUIN approach
- Capability maturity models
- Data for decision-making
- DSD action plans
- Learning together

# Scaling up DSD: The CQUIN Approach

Key tools to promote exchange between countries include:

- ✓ Capability maturity models
- ✓ Data for decision-making
- ✓ DSD action plans
- ✓ Convening: meetings, webinars, country-to-country visits, communities of practice, WhatsApp groups and more

The Annual Meeting is an opportunity to bring all these themes together

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# Capability Maturity Models – 1

What are capability maturity models?

- ✓ A health systems strengthening approach to improving organizational/institutional performance
- ✓ A way to describe the health system domains in which high performance is needed to achieve sustainable impact
- ✓ A **common language** for the CQUIN network, enabling us to identify areas of shared challenge and potential joint learning

# Capability Maturity Models – 2

CQUIN now has three capability maturity models:

- ✓ Differentiated treatment – expanded in 2022 to include new domains
- ✓ Advanced HIV disease
- ✓ Differentiated testing and linkage – piloted in 2022 and will be scaled up to all countries in 2023

# Capability Maturity Models – 3

- Identify **core functions/domains** in which capability is required to achieve organizational goals
- Describe **sequential stages of maturity** within each domain
  - Can use qualitative or quantitative measurement
  - Step-wise progression (recognizing the limitations of assuming linear progress)
  - Progress from one stage to the next reflects a meaningful improvement in a key function
- **Set a clear path** towards achieving maturational goals
- Are **used repeatedly over time** to track change

# Capability Maturity Models – 4

## Illustrative capability maturity model scale (does not have to have 5 stages, but this is common)

Least mature



RED	ORANGE	YELLOW	LIGHT GREEN	DARK GREEN
Early or preliminary stages of planning and development; Useful in identifying next steps to take in the scale-up process	Work has begun and the initial efforts are ongoing; Highlights areas that can be prioritized for improvement	Efforts have resulted in measurable progress, such as a draft for review or achievement of more than 25% progress to a target	Considerable progress has been made, resulting in over 50% progress to a target or working systems only in need of finalization	Achievement of a highly-evolved implementation of the domain; Further improvements and refinements can be made as needed

Most mature





# How does CQUIN use CMM Results?

- ✓ Annual systematic self-assessment of national DSD program maturity by multidisciplinary country teams, including recipients of care
- ✓ Used by countries to internally identify priority gaps and to plan remedial actions
- ✓ Compared year-to-year to track scale-up and maturity of DSD programs over time
- ✓ Enable countries within the network to use the same terms and indicators – helps to identify areas of shared interest and challenges
- ✓ Promotes friendly competition and diffusion of innovation
- ✓ Results are used to prioritize network activities
- ✓ In CQUIN's most recent external assessment, respondents ranked the use of CMM self-staging as one of the highest impact elements of the network

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# Data for Decision-Making

The country update presentations will highlight some of the data that CQUIN network members rely on to guide DSD policies, guidelines and implementation:

- ✓ Monitoring & evaluation of DSD
- ✓ DSD “model mix” data
- ✓ Data on multi-month dispensing
- ✓ Data from CQUIN DSD Performance Reviews
- ✓ DSD quality management data

# Data for Decision-Making: Monitoring & Evaluation of DSD

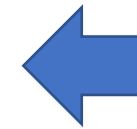
- Countries are increasingly able to monitor the scale-up of DSD using routine M&E data, but progress has been slow
- To achieve the most mature (dark green) stage in CQUIN's treatment capability maturity model, national M&E systems must:
  - ✓ Disaggregate ART enrollment by frequency of multi-month dispensing
  - ✓ Disaggregate ART enrollment by model type
  - ✓ Report rates of retention and VL suppression disaggregated by MMD and model type
  - ✓ Report mean and median numbers of (a) clinic visits and (b) ART pickups per year disaggregated by less-intensive vs. more-intensive model types

2022 CMM self-staging results for the M&E domain:



# Data for Decision-Making: Model Mix – 1

- There is no one “correct” answer to how many treatment models a country should implement or how many people should be in each model – these are strategic choices based on context, resources, and recipient of care preferences.
- But understanding who / how many people are in each model is critical for recipient of care management, planning, and evaluation
- **Challenge:** Countries do not use standardized model names
  - Community ART Groups (CAGs) in Mozambique
  - Community ART Refill Groups (CARGs) in Zimbabwe
  - Community Client-Led ART Delivery (CCLADs) in Uganda
  - Community Adherence Groups (CAGs) in Eswatini
  - Community Adherence Groups (CAGs) in Lesotho



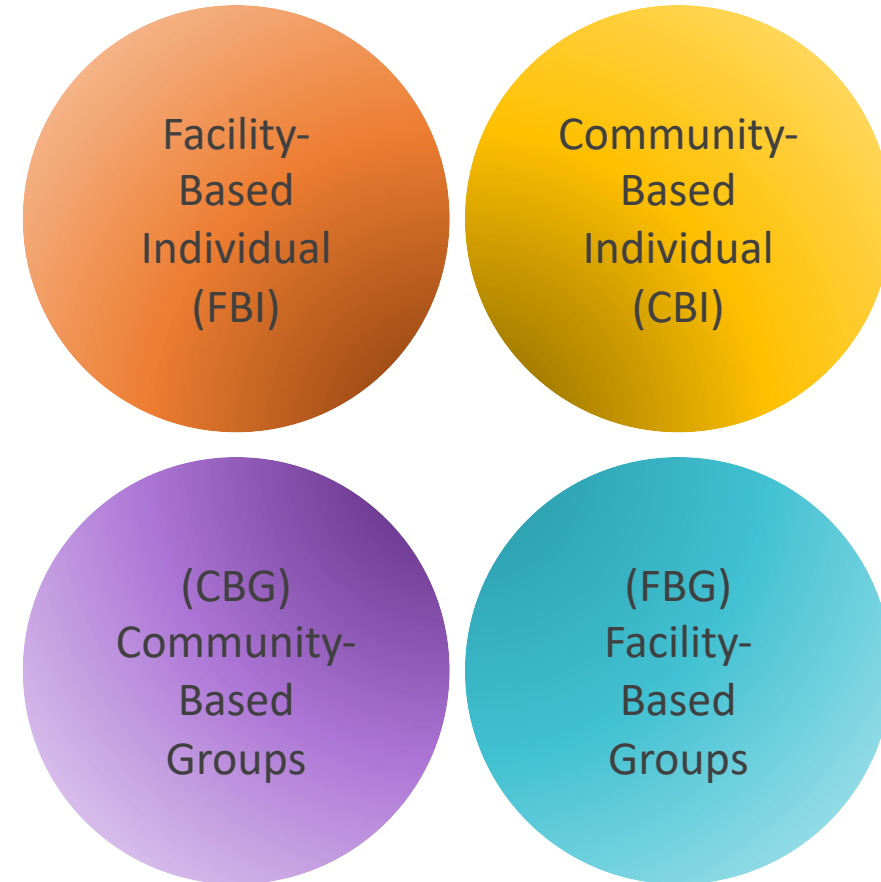
These are not all the same model

# CQUIN Differentiated Treatment Model Nomenclature

## More-Intensive Models



## Less-Intensive Models For people established on treatment

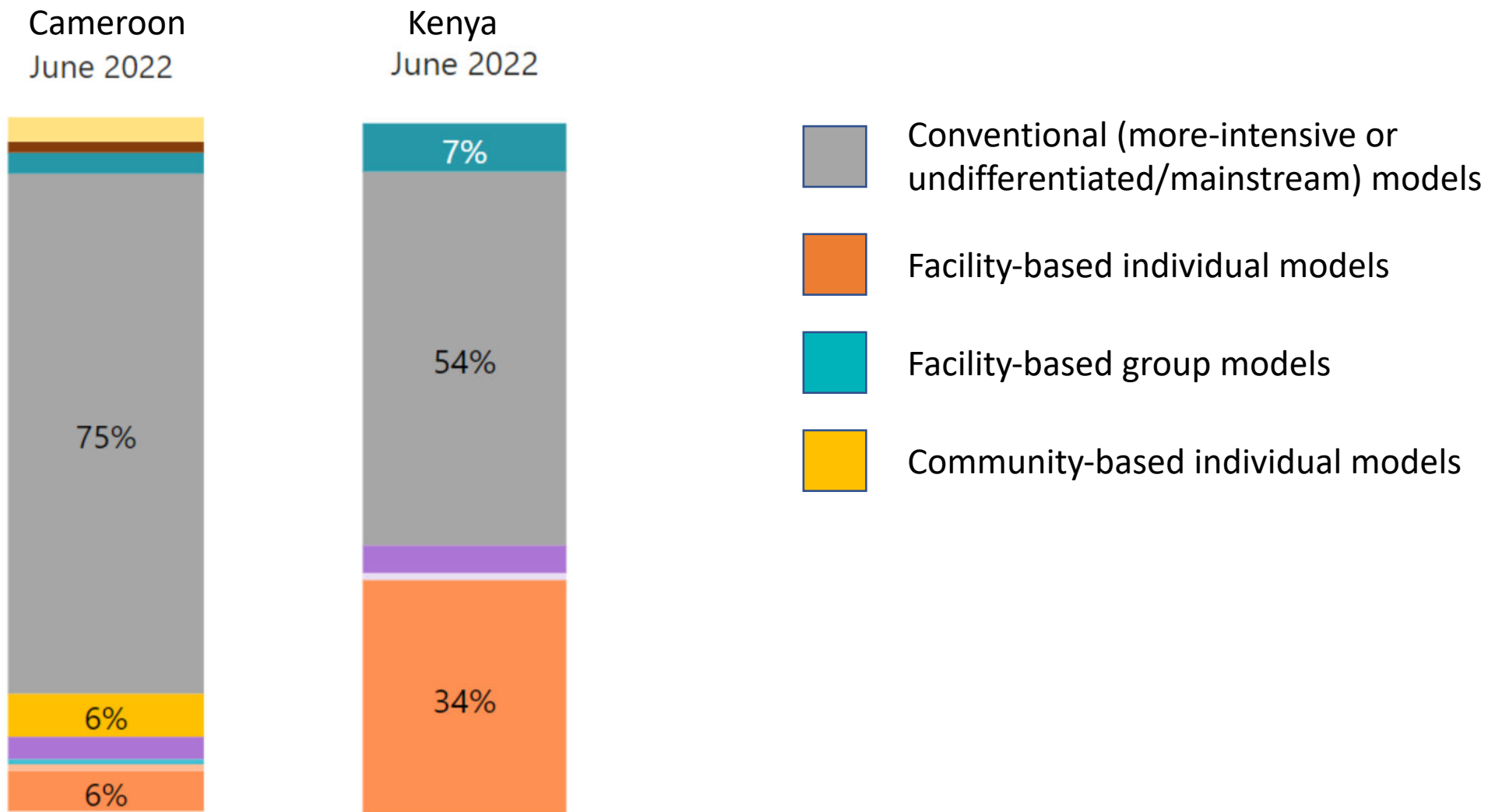


# Color-coding by model type in CQUIN presentations

	Conventional Model	STD model
	AHD	AHD
<b>Less-Intensive Models</b>		
FBI	3-month Multi-Month Scripting FBI	
	6-month Multi-Month Scripting FBI	
		Extended hour
		MCH
		KP
	Appointment Spacing without Fast Track	Appointment spacing
	Appointment Spacing + Fast Track	Appointment spacing
FBG	ART Clubs	Support Group
	Facility-Based Teen Clubs	Teens clubs
CBI	Outreach	Outreach
	Community Drug Distribution	PODI
	Other CBI	Community ART Dist
CBG	Community ART Groups (peer-led)	CAG
	Community ART Groups (HCW-led)	Community Adherer
	Family Model	Family model
	Community-Based Teen Clubs (HCW-led)	

- Countries share their full list of treatment models
- These are categorized systematically and color-coded by model type
- Each country uses its own names for models
- The standardized color-coding helps to compare across countries

# Model Mix Data: Comparisons Across Countries





# Data for Decision-Making: Multi-month dispensing (MMD)

- CQUIN views MMD as an *enabler* of differentiated treatment, not a model itself
  - A model is described by location (facility, community) and by individual vs. group design
  - Depending on the country and context, someone receiving 3MMD could be in a facility-based individual model (e.g., Fast Track) a facility-based group model (e.g., a Teen Club), a community-based individual model (e.g., outreach or PODI), or a community-based group model (e.g., CAG)
- But MMD data are a useful proxy for determining whether someone is in a less-intensive vs. more intensive model
  - If you are receiving 6MMD, you are likely to be established on treatment and in a less-intensive model
- And MMD data are more accessible than model mix data in some countries, given their inclusion in PEPFAR MER indicators
- For these reasons, CQUIN asks countries to report both model mix and MMD information

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# DSD Action Plans

- CQUIN country teams develop DSD action plans at CQUIN meetings
  - They often include ideas/innovations shared by other countries
  - They may focus on gaps identified in their CMM dashboard results
  - May also include requests for country-to-country visits and/or technical assistance
- These are synthesized into a single annual action plan at the Annual Meeting
  - Teams report back on activities completed, ongoing, and/or dropped or deprioritized
- Action plans reflect country priorities - they are national plans, not “CQUIN plans”
- Timing of annual meeting enables practical discussions about priorities and funding
  - PEPFAR FY24 country operational plans
  - Global Fund NFM4 funding round

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# Learning Together

Annual country updates provide a rich source of information and knowledge exchange:

- Longer versions of the presentations are on the meeting website
- Country update posters were presented yesterday

Thank you!

