

Differentiated HIV Service Delivery in Sierra Leone: Optimizing Person-Centered HIV Services

Leveraging Partnerships and Funding Opportunities to Catalyze Implementation

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BACKGROUND

Sierra Leone has a population of 8 million people. HIV prevalence is 1.7%, with 77,000 people living with HIV and 60,878 recipients of care on antiretroviral treatment (ART). Sierra Leone joined the CQUIN learning network in 2019 and launched DSD in 2020. DSD priorities evolved from guideline development and the revision of tools, including incorporating DSD into the national HIV strategic plan. The country is currently implementing appointment spacing without fast track. Rolling out and taking to scale all DSD models beyond the current facility-based appointment spacing model is the Sierra Leone Ministry of Health's vision. District HIV focal points have been trained on DSD quality standards, while active engagement of recipients of care is prioritized through technical working groups, M&E meetings, and the development of policy documents.

DSD IMPLEMENTATION

Figure 1: DSD Model Mix: Results vs. Projections

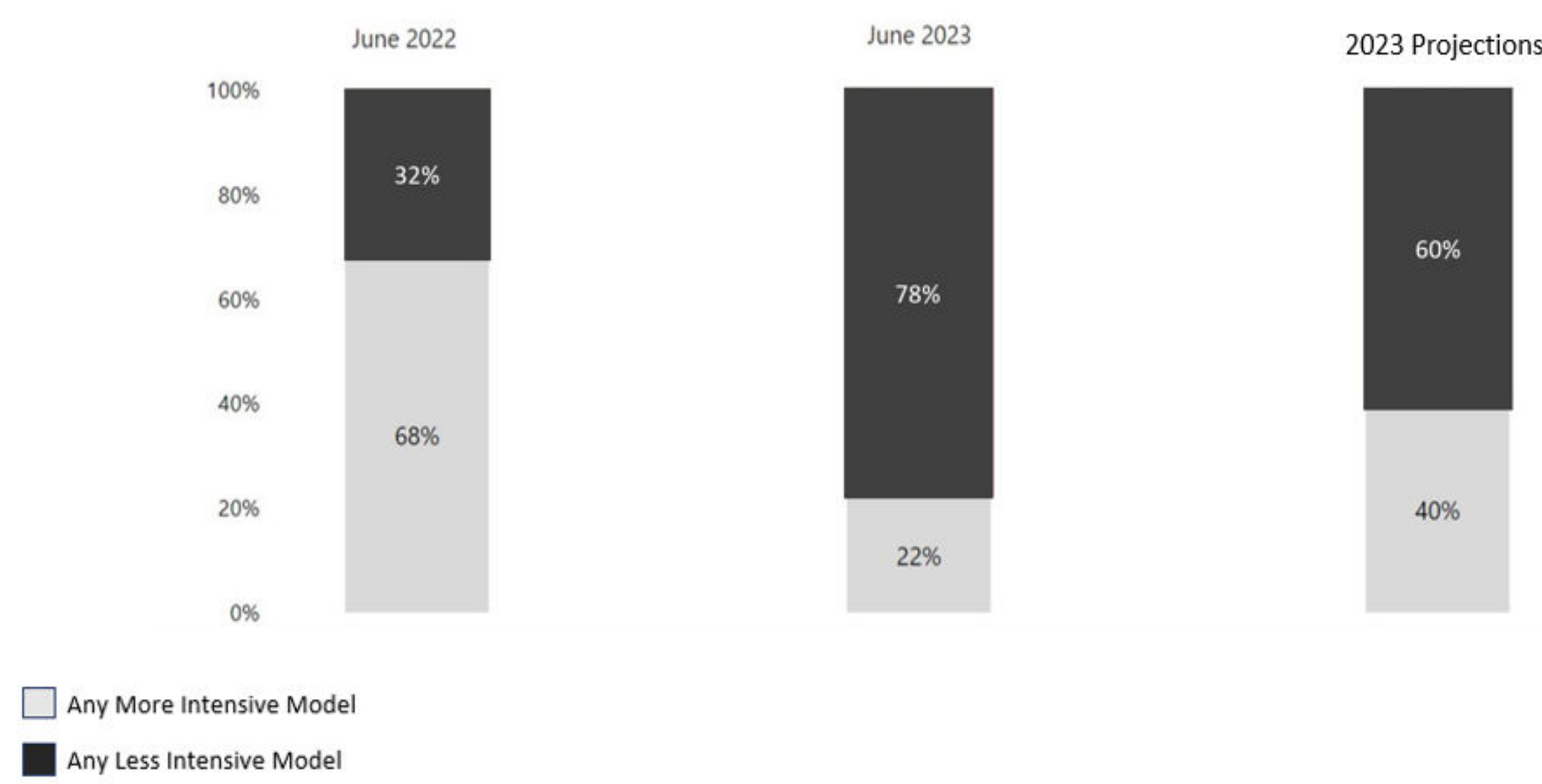
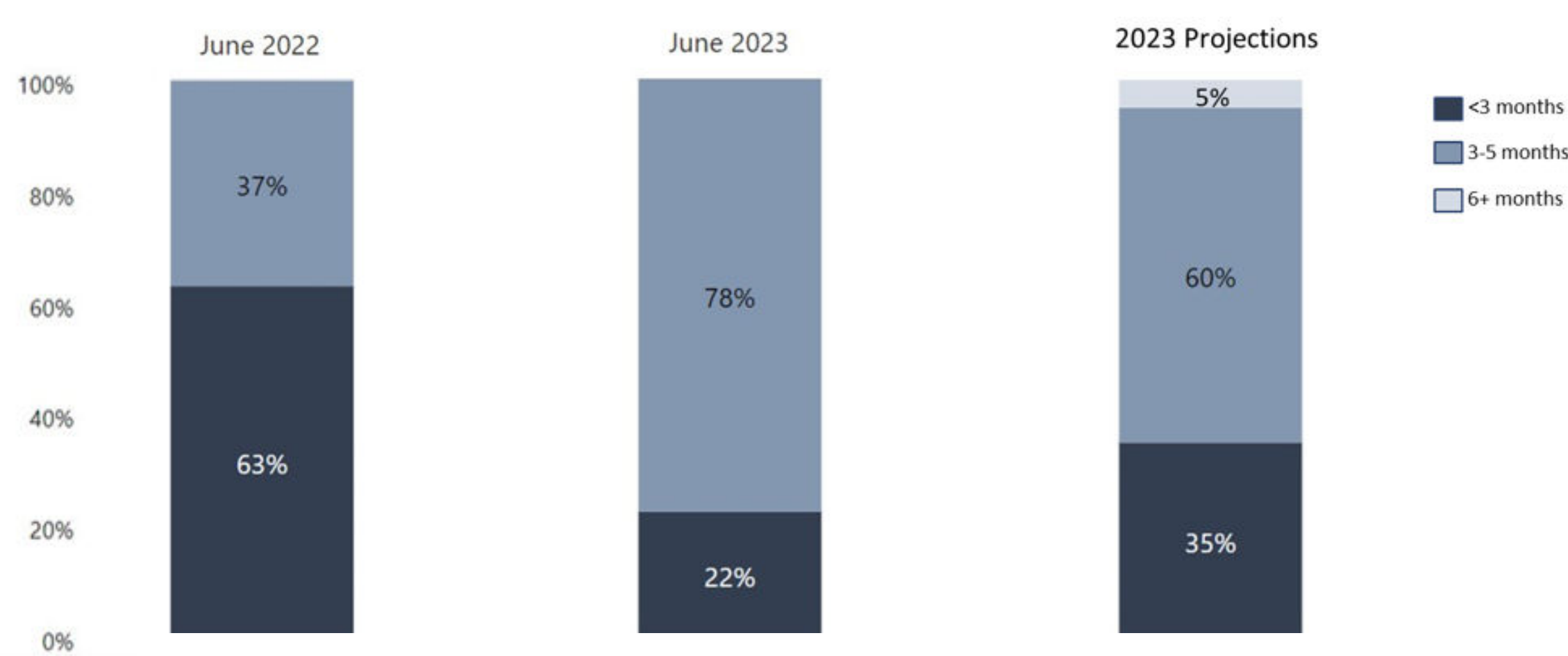


Figure 2: Multi-month Dispensing (MMD): Results vs. Projections



Progress related to DSD model mix implementation:

- Facility-based, less-intensive models are prioritized due to the non-rollout of revised national tools
- Appointment spacing without fast track (MMS/MMD) scale-up resulted in the significant shift recorded in 2023 (46% improvement), exceeding the target of 60%
- NACP engaged all district pharmacists to support MMS/MMD implementation and district M&E teams were trained and integrated into the program, which enhanced reporting
- The Government of Sierra Leone implemented reforms that ensure that HIV commodities are delivered directly to the warehouse, which limited stockouts

Progress related to MMD implementation:

- Significant roll-out of MMS/MMD was recorded in 2023 (compared to 2022)
- The 6-month shift is expected to happen with procurement of 60- to 90-day pack sizes of ART, as this was factored into the GF grant cycle 7 procurement

CQUIN ENGAGEMENT AND ACHIEVEMENTS

- Sierra Leone belongs to eight communities of practice and has actively participated in those with a focus on AHD, quality, M&E, dHTS, KP, and migrant populations
- The Sierra Leone team visited Uganda for a learning exchange visit, which helped re-shape the country's DSD roll-out plan

DART CAPABILITY MATURITY MODEL TRENDS (2022-2023)

Figure 3: DART CMM Trends (2022-2023)

	Sierra Leone	
	2022	2023
Policies	Dark Green	Dark Green
Guidelines	Yellow	Dark Green
Diversity	Red	Dark Green
Scale-up Plan	Orange	Dark Green
Coordination	Green	Dark Green
Community Engagement	Orange	Yellow
Training	Red	Dark Green
M&E System	Red	Orange
Facility Coverage	Red	Orange
Client Coverage	Red	Dark Green
Quality	Red	Orange
Impact	Red	Orange
P&SM	Orange	Dark Green
AHD	Orange	Orange
KP	Red	Orange
TB/HIV	Orange	Yellow
MCH	Red	Orange
FP	Red	Orange
HTN	Orange	Yellow

Figure 3 shows the results of the country team's self-assessment using the CQUIN DART capability maturity model in 2022 and 2023. In 2023, Sierra Leone achieved the most mature staging (dark and light green) in **eight domains**, while **one domain** remained in the least mature (red) stage. Findings show a gradual increase in maturity across domains. Sierra Leone recorded improvement in 77% of the domains (14/18, excluding HTN), while three of the domains remained static (excluding Policies, which had sustained maturity). P&SM, training, diversity, and client coverage showed rapid progress, which can be attributed to strong partnership and collaboration with GF and PEPFAR, continuous supportive supervision, engagement of district M&E teams and district pharmacists to support MMD/MMS, community advocacy, and the Government's procurement policy change to support last-mile delivery of HIV commodities.

AHD CAPABILITY MATURITY MODEL SELF-STAGING

Figure 4: AHD CMM Results, 2023

Policies	AHD Scale-up Plan	Coordination
Client Coverage 3	Diagnostic Capability 1	Diagnostic Capability 2
Client Coverage 4	Facility Coverage	Client Coverage 2
Guidelines	SOPs	Quality
ROC Engagement	Training	Impact
Supply Chain	M&E System	

Most mature domains: Policies, Client Coverage 3, Client Coverage 4, ROC Engagement, Supply Chain, M&E System, Training, SOPs, Quality, Impact

Least mature domains: AHD Scale-up Plan, Diagnostic Capability 1, Diagnostic Capability 2, Facility Coverage, Client Coverage 1, Client Coverage 2

Figure 4 shows the AHD capability maturity model self-staging results. Sierra Leone recognizes the role of AHD care in achieving epidemic control. It should be noted:

- Progress includes revised and validated national treatment guidelines to cover AHD, including standard AHD package of care
- AHD reflected in the revised national HIV strategic plan; scale-up plans have no clear targets
- Client coverage is limited by a short supply of commodities and delayed roll-out of the revised M&E system
- Capacity to implement is limited to PEPFAR-supported health facilities and one national tertiary referral center
- The current DSD TWG will be expanded to include coordination of AHD interventions
- Sierra Leone will develop standard operating procedures to guide health facility-appropriate AHD level of care and scale-up training

dHTS CAPABILITY MATURITY MODEL SELF-STAGING

Figure 5: dHTS CMM results, 2023

Policy: Optimizing HIV Testing	Implementation and Scale-Up Plan	Financing and Resource Allocation
Policy: Linkage	Coordination	Private Sector Engagement/Oversight
Meaningful CE	dHTS Training	Procurement & Supply Chain Management
Population Coverage	M&E	Linkage Tx: Confirm/Verification Testing
Policy: Strategic Model Mix	Linkage to Tx: Timely Linkage	Clinical Services
Impact: Linkage to Treatment	Linkage to Prevention and Other Services	Impact: Knowledge of HIV Status
SOPs	Proficiency Testing	Impact: Linkage to Prevention
Proficiency Testing	EQA/IQC	

Most mature domains: Policy: Optimizing HIV Testing, Policy: Linkage, Meaningful CE, Population Coverage, Policy: Strategic Model Mix, Impact: Linkage to Treatment, SOPs, Proficiency Testing, EQA/IQC

Least mature domains: Implementation and Scale-Up Plan, Financing and Resource Allocation, Coordination, Private Sector Engagement/Oversight, Procurement & Supply Chain Management, Linkage Tx: Confirm/Verification Testing, Clinical Services, Impact: Knowledge of HIV Status, Impact: Linkage to Prevention

Figure 5 shows the dHTS capability maturity model self-staging results. Sierra Leone has made significant progress since the last self-staging exercise in March 2023. Of note:

- The revised national consolidated ART guidelines addressed most gaps, including verification testing, private sector engagement, financing, and linkage to prevention
- dHTS is coordinated by the DSD technical working group.
- The scale-up plan includes evidence-guided training of health care workers across the districts
- Implementation of HTS is differentiated by epidemic, population, and HIV prevalence

NEXT STEPS / WAY FORWARD

- Roll out revised M&E tools across the country
- Expand DSD TWG to include and strengthen service integration
- Activate all DSD models
- Complete comprehensive report on DSD using revised national tools
- Take AHD to scale; complete AHD-specific standard operating procedures
- Conduct DSD quality and impact assessment
- Scale up linkage to prevention services