

AHD Implementation in Uganda: Strengthening the M&E of AHD Systems

Dr. Arinaitwe Ivan

MoH/ACP, SPO – DSD

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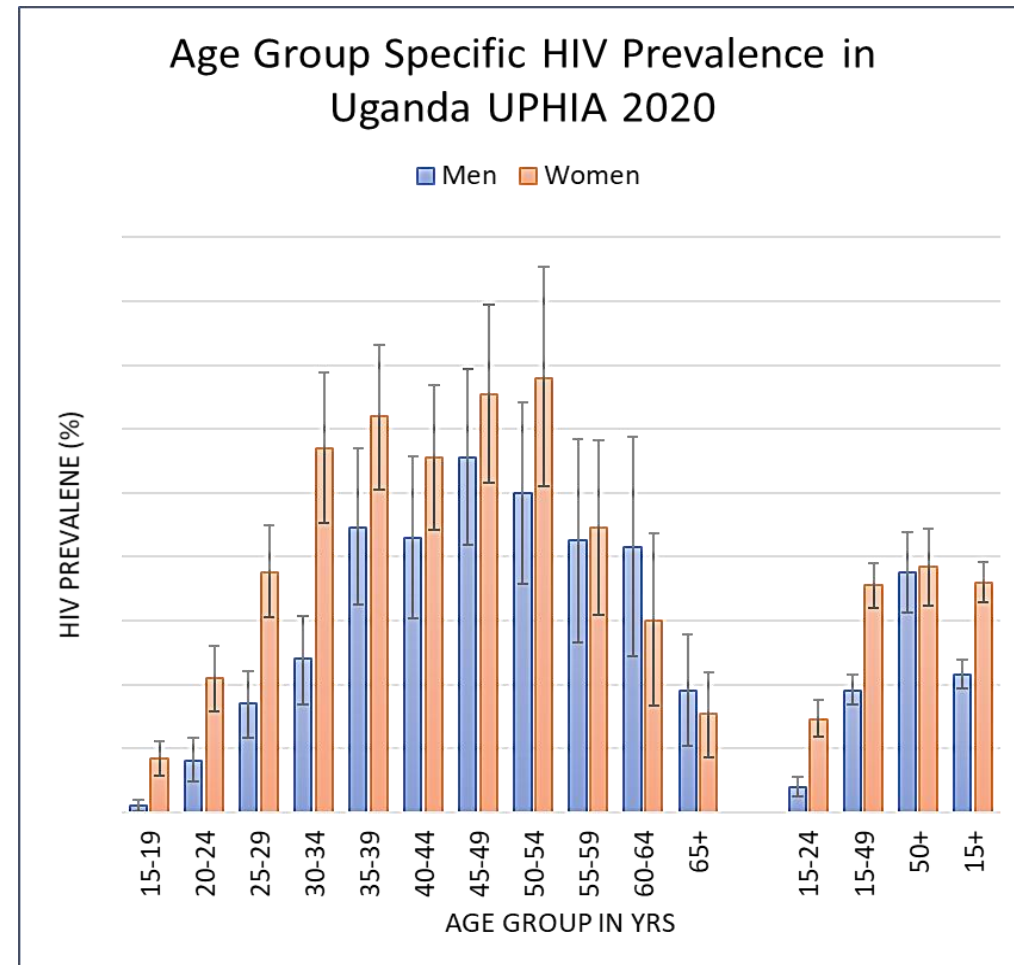
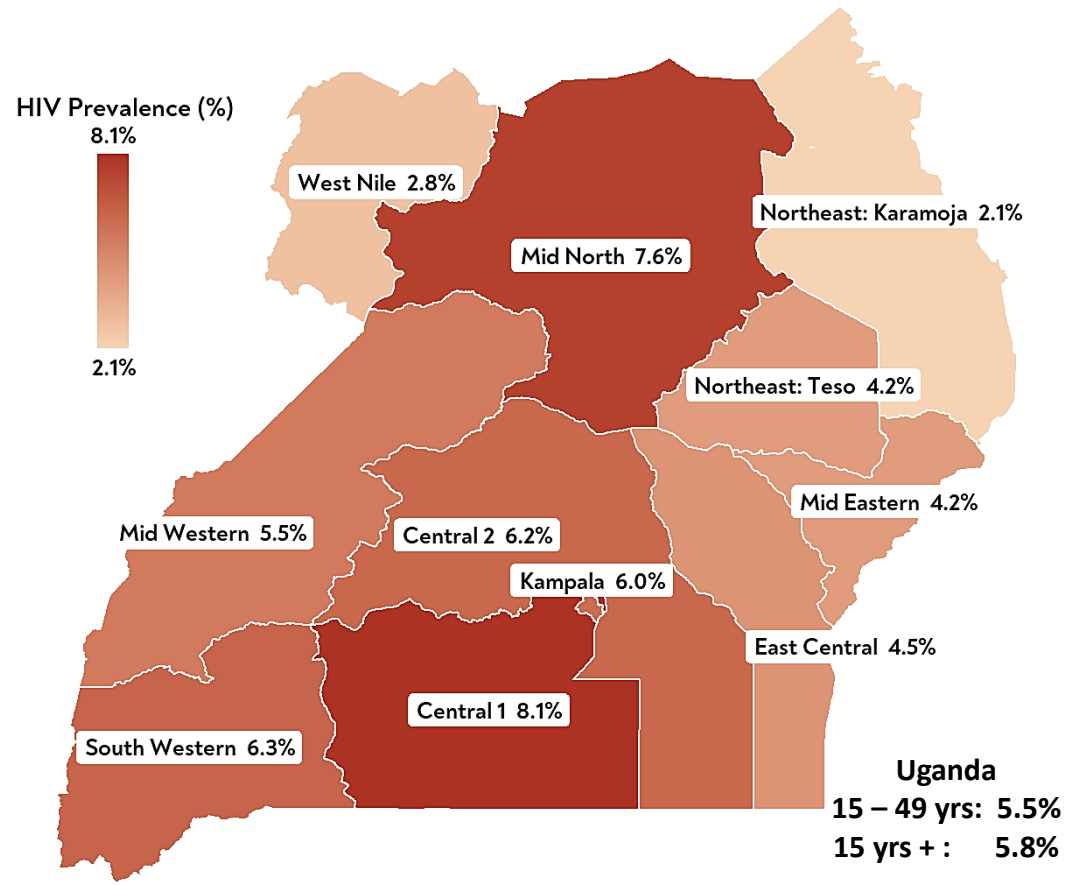


Outline

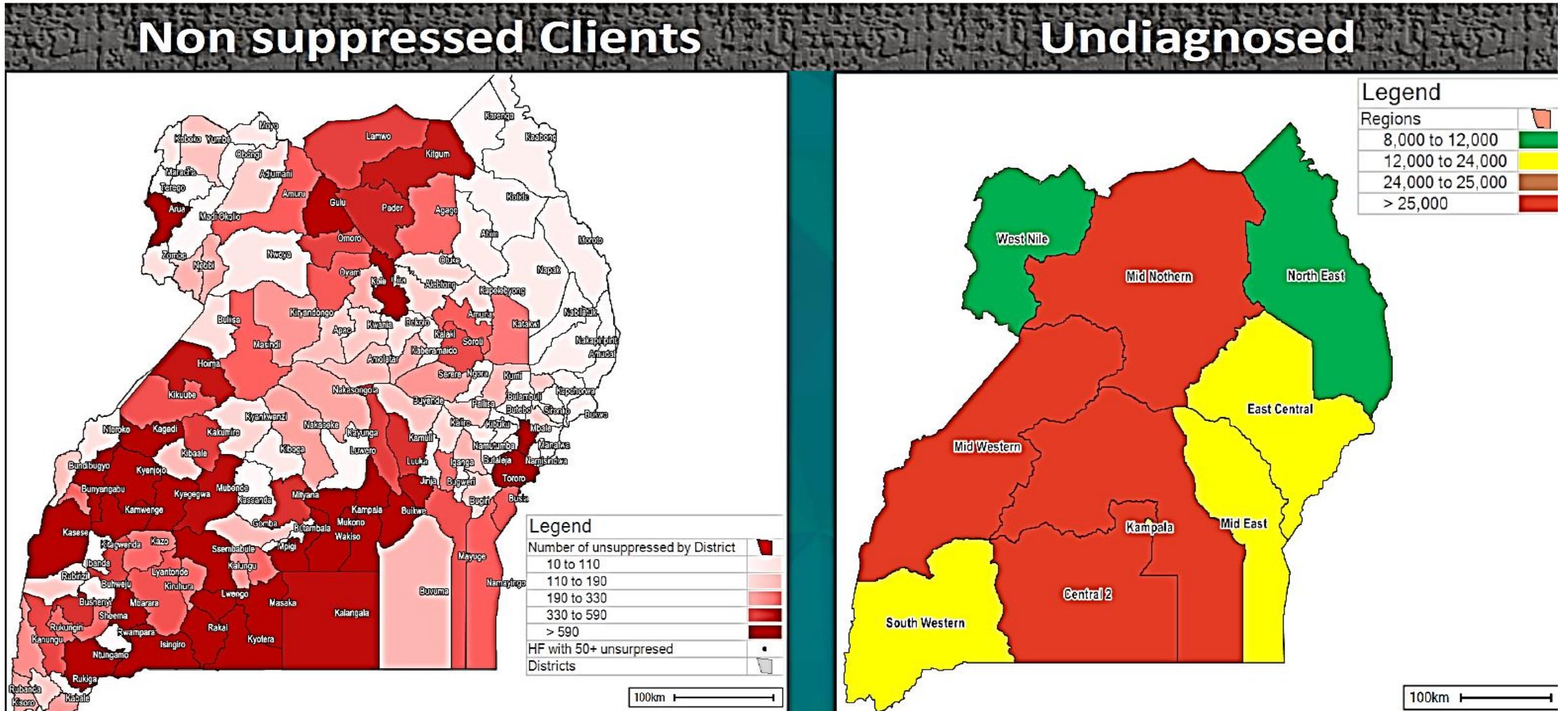
- Overview of the HIV Program
- AHD capability maturity model results 2023
- AHD M&E framework
- AHD implementation current status
- Challenges and solutions
- Proposed HMIS tools for AHD

Overview of the HIV Program in Uganda

HIV Prevalence, UPHIA 2020-21

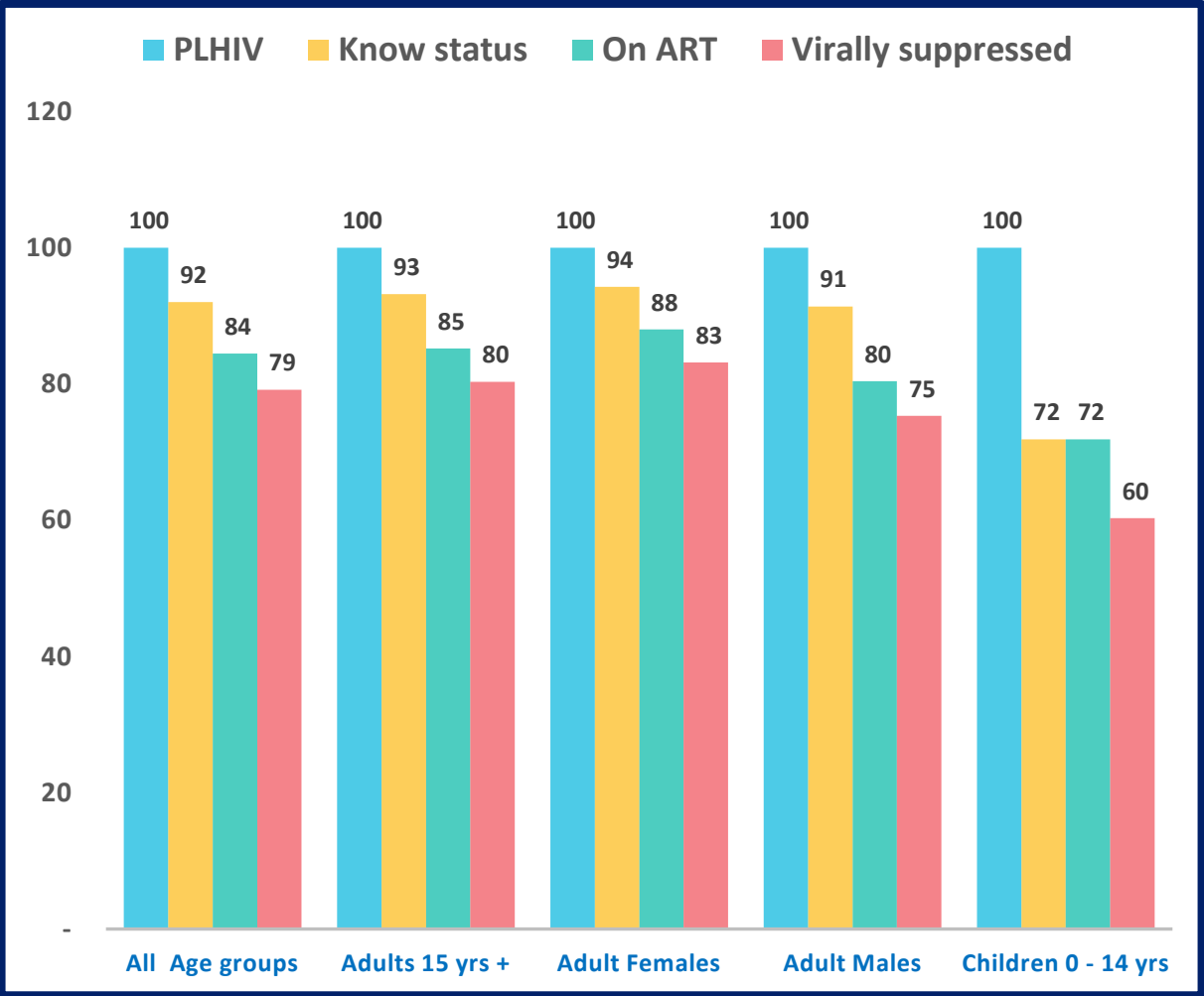


Current State of the HIV Epidemic

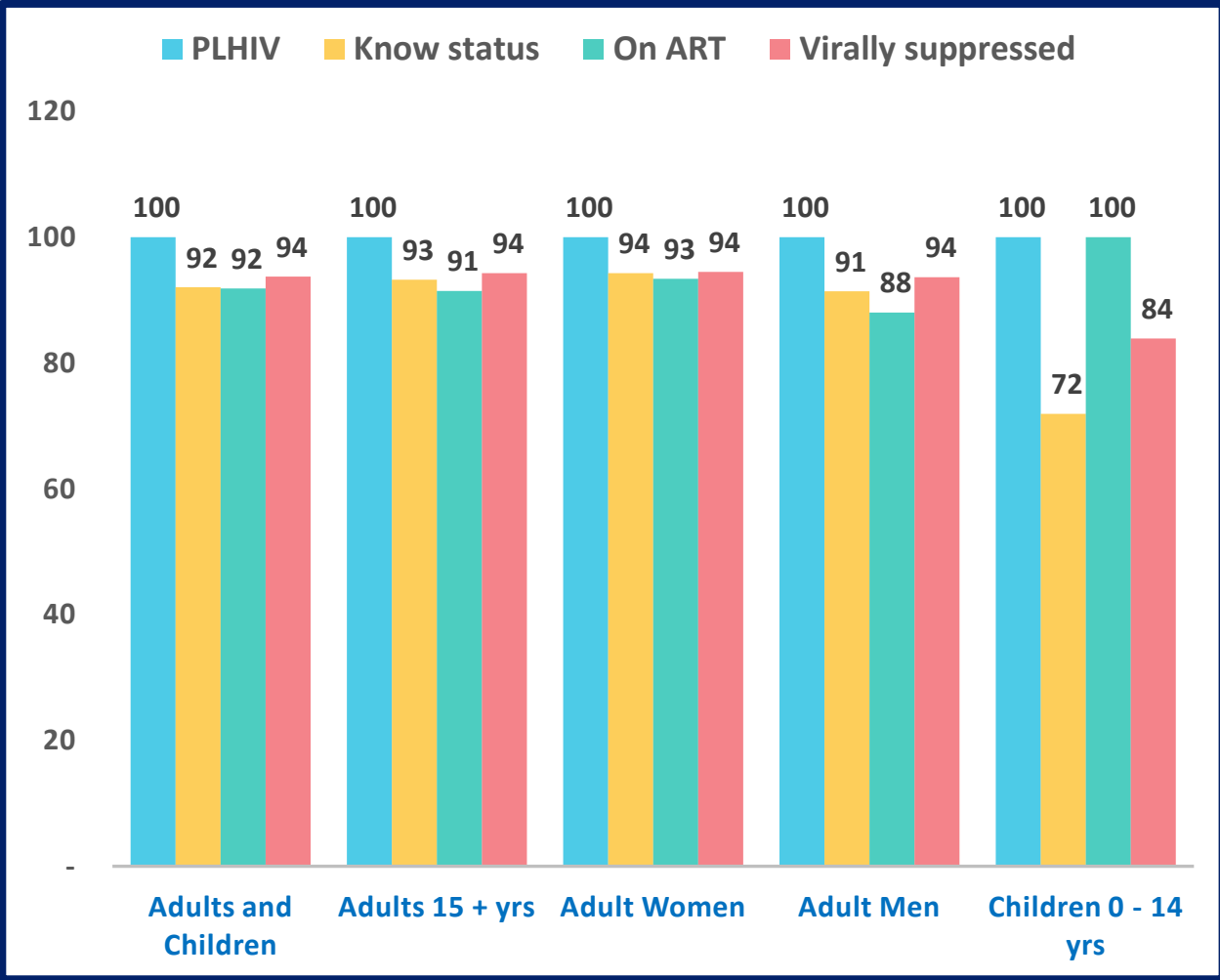


Overview of the HIV Program in Uganda - 95 95 95 Achievements

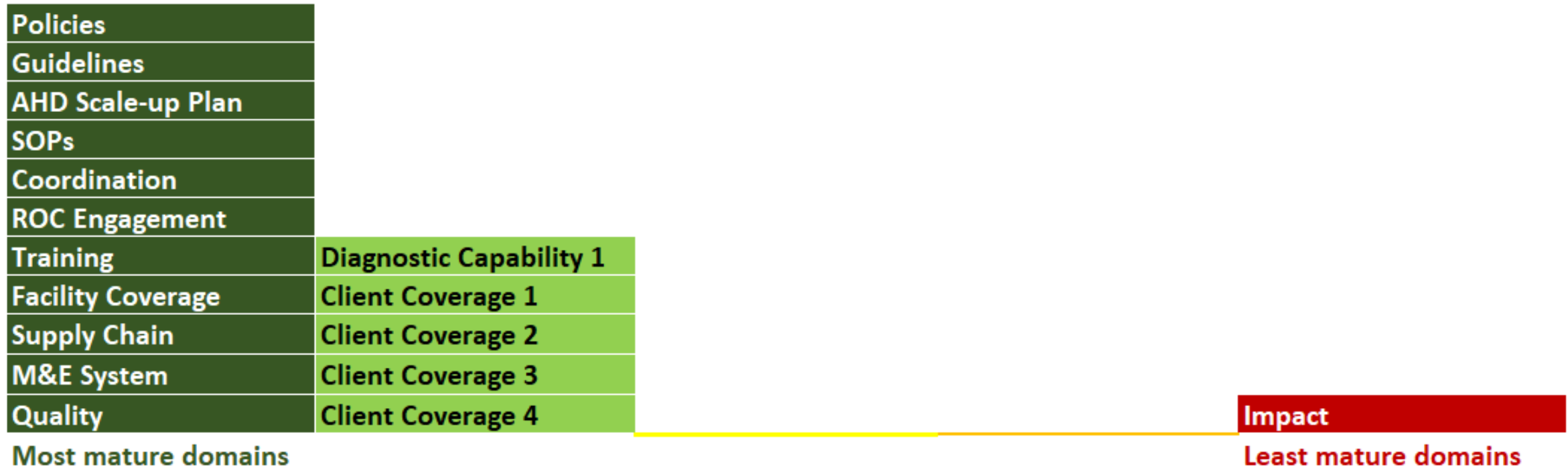
Population Cascade



Conditional Cascade



CQUIN AHD Capability Maturity Model Results, 2023



- All AHD CMM domains except Impact were staged light or dark green
- The light greens are a target for improvement as the country improves on stocks for AHD commodities

Trends in the CQUIN AHD Capability Maturity Model Results

	2021	2023
Policy	Light Green	Dark Green
Guidelines	Yellow	Dark Green
National AHD Implementation Plan	Light Green	Dark Green
Standard Operating Protocols	Dark Green	Dark Green
Coordination	Dark Green	Dark Green
Engagement of Recipients of Care	Dark Green	Dark Green
Training	Dark Green	Dark Green
Diagnostic Capability 1 (Identifying AHD)	Yellow	Light Green
Diagnostic Capability 2 (Identifying OI)	Yellow	Dark Green
Facility Coverage	Yellow	Dark Green
Client Coverage 1 (Testing for AHD)	Orange	Light Green
Client Coverage 2 (OI screening)	Light Green	Light Green
Client Coverage 3 (OI prophylaxis)	Light Green	Light Green
Client Coverage 4 (OI management)	Dark Green	Light Green
Supply Chain Management for AHD Commodities	Yellow	Dark Green
M&E system	Light Green	Dark Green
Quality of AHD Services	Yellow	Dark Green
Impact of AHD Services	Red	Red



Gaps identified and addressed:

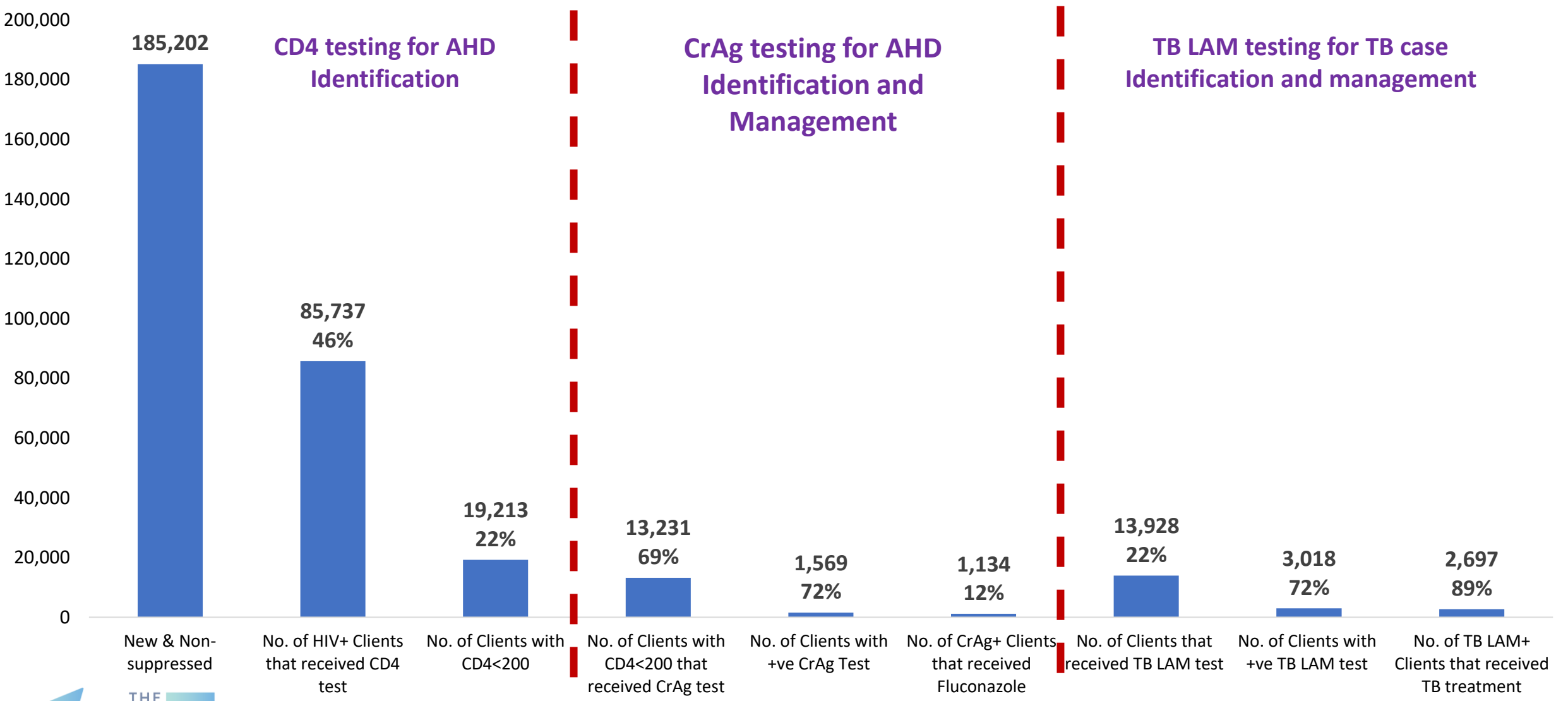
- CD4 testing challenges
- Low facility coverage of diagnostics
- Inadequate stocks of AHD commodities
- Comprehensive M&E systems to monitor AHD service delivery

M & E Framework

Indicators	Source	Frequency
Short Term Indicators		
No. of HIV+ patients enrolled at the facility	DHIS II	Quarterly
No. of patients presenting with advanced HIV disease	DHIS II	Quarterly
No. of patients with advanced disease tested with TB LAM	DHIS II	Quarterly
No. of LF-LAM positive patients	DHIS II	Quarterly
No. of LF-LAM positive patients started on TB treatment	DHIS II	Quarterly
No. of patients with advanced disease tested with CrAg	DHIS II	Quarterly
No. of CrAg positive patients	DHIS II	Quarterly
No. of CrAg positive patients started on CCM treatment	DHIS II	Quarterly
No. of HIV+ on TPT	DHIS II	Quarterly
No. of patients being referred to a higher facility	DHIS II	Quarterly
Long Term Indicators		
Mortality from AHD		Quarterly
Mortality from TB among TBHIV co-infected patients	DHIS II	Semi-annually
Treatment Success Rates among TBHIV co-infected patients	DHIS II	Semi-annually
Mortality from CCM among HIV+ patients		Semi-annually
Treatment Success Rates among HIV-CCM co-infected patients		Semi-annually

- ❑ Developed during the development of the AHD implementation guidelines in **2019**.
- ❑ Stakeholders involved included:- Ministry Of Health, Donor Partners, District Health Teams, Implementing Partners, Health workers and Civil society organizations
- ❑ The purpose was to support the stakeholders and service providers at all levels to plan & implement the multi-layered proposed interventions in line with the consolidated HIV guidelines with the aim of reducing HIV related morbidity and mortality in Uganda as a result of Advanced HIV Disease
- ❑ **The Expected Outcomes included;**
 - Increase in number of facilities with test kits and treatment commodities
 - Increase in proportion of patients screened for AHD
 - Increase in proportion of patients successfully treated for AHD (CD4 count <200)

FY2022 AHD identification and treatment among TX_NEW and non suppressed clients



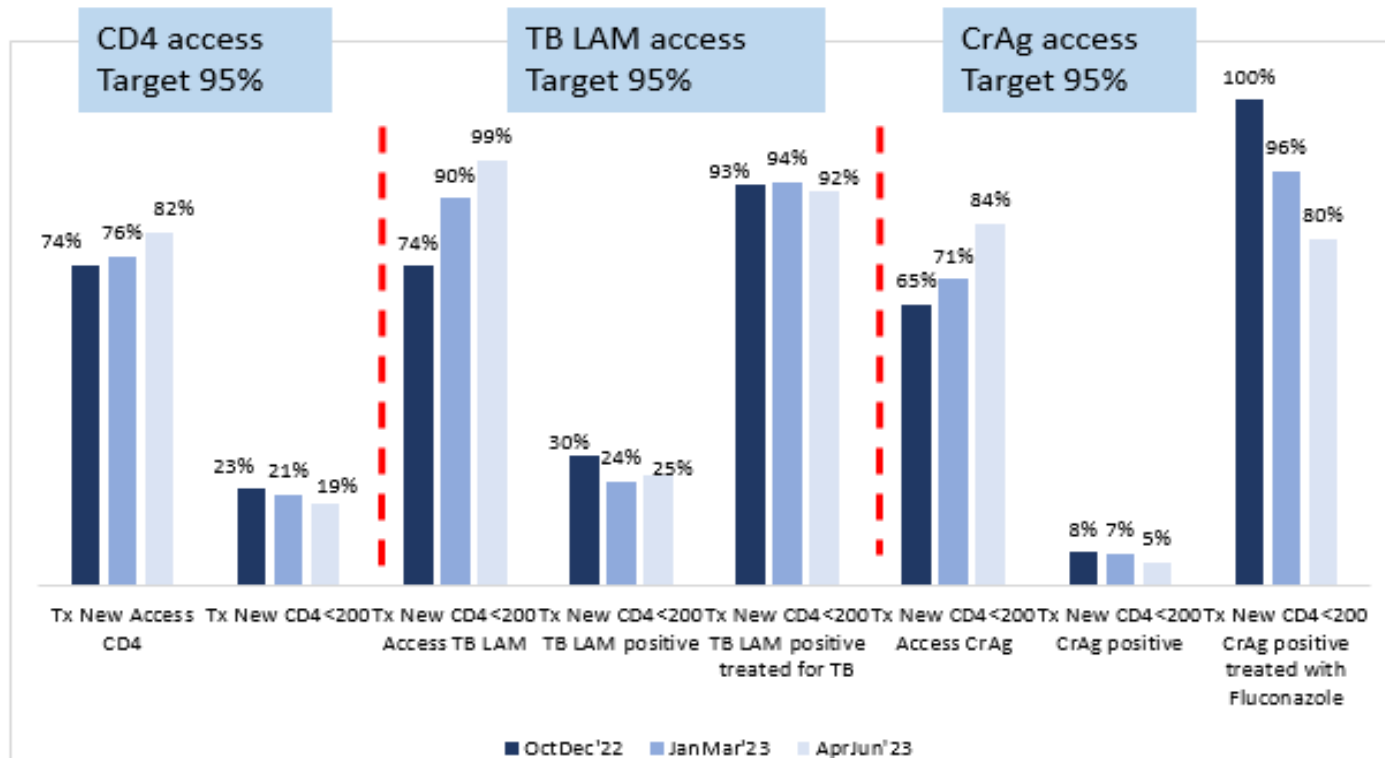
Decentralized Testing Services - Advanced HIV Disease/Oppportunistic Infections FY23

Key Highlights for new ART clients

Although the performance is still below the 95% target, there has been significant improvement in CD4 access for the newly identified clients (82%)

This has enabled early screening for TB and Cryptococcal meningitis.

Quarterly AHD performance among the New PLHIV



Increasing proportions of CD4 tests done among TX New patients

Tx New TB LAM Access
<70%
70% - 95%
>95%

Health Region	Q2	Q3	% (Q2-Q1)	Δ
Acholi	68%	61%	-7%	▼
Ankole	49%	63%	14%	▲
Bugisu	53%	62%	9%	▲
Bukedi	69%	66%	-3%	▼
Bunyoro	89%	93%	4%	▲
Busoga	71%	77%	6%	▲
Kampala	88%	93%	5%	▲
Karamoja	78%	86%	8%	▲
Kigezi	82%	83%	1%	▲
Lango	80%	81%	1%	▲
North Buganda	77%	86%	9%	▲
South Buganda	80%	89%	9%	▲
Teso	89%	76%	-13%	▼
Tooro	92%	91%	-1%	▼
West Nile	88%	94%	6%	▲
National	76%	82%	6%	▲

Decentralized Testing Services- Advanced HIV Disease/Oppportunistic Infections FY23

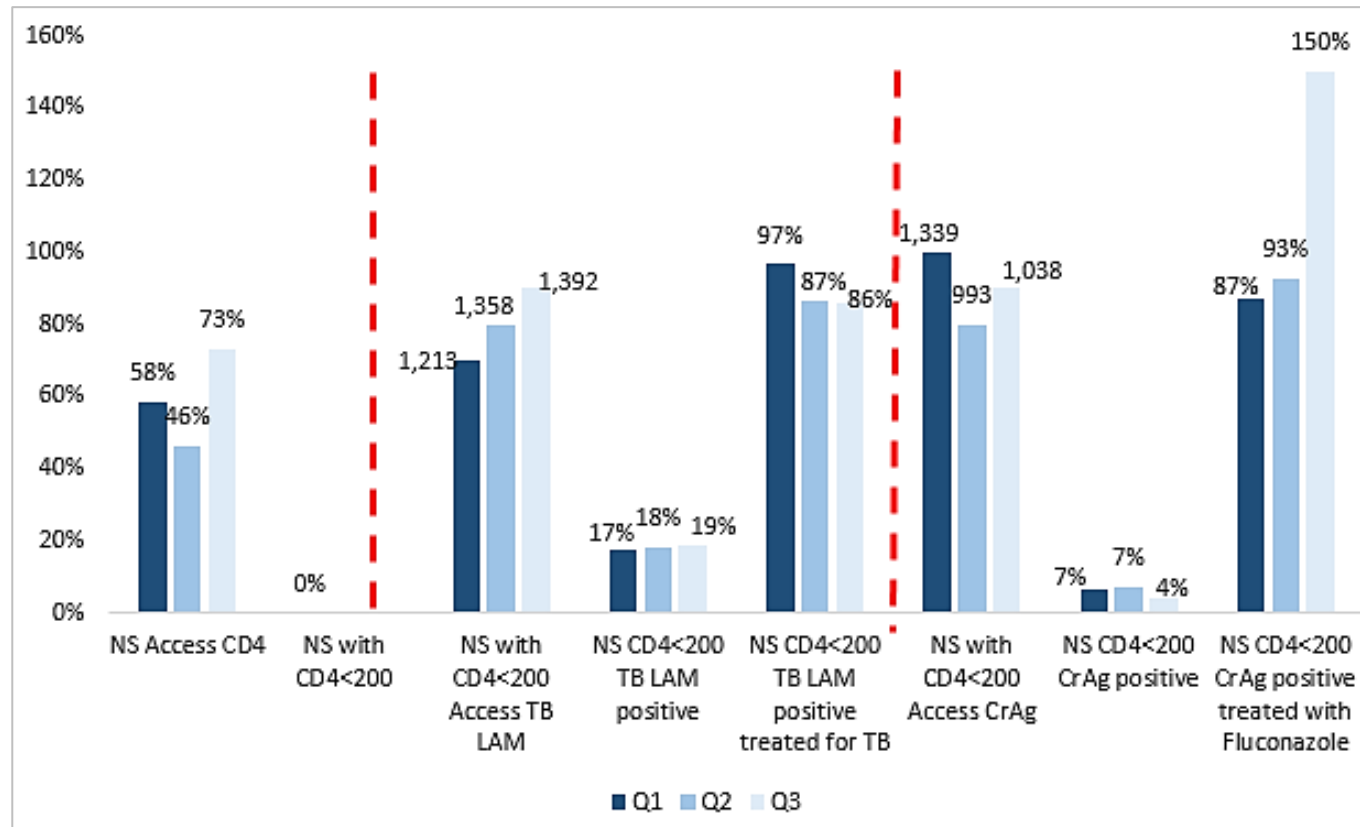
Key Highlights- Non-suppressed clients at high level viraemia

Although the performance is still below the 95% target, there has been significant improvement in CD4 access for the Non suppressing (73%)

Plan to implore Laboratory Community interventions and optimization of patient flows will to improve this cascade

Revised HMIS tools to include non suppressing clients with CD4 below 200

Quarterly AHD performance in the New PLHIV



Low CD4 access consequently affected CrAg and TB LAM Access and as well

Challenges and Mitigation mechanisms

SN	Challenge	Mitigation mechanism
1	Logistics for test kits – CD4, CrAg	<ul style="list-style-type: none"> • Bi-weekly implementing partner performance review meetings which assist in monitoring stocks in the regions • Redistribution of test kits across districts / regions • Hub & Spoke model • Screening for AHD decentralized to level of health centre 3
2	Missed opportunities among the non-suppressed	<ul style="list-style-type: none"> • Bi-weekly performance review meetings with accountability for both non-suppressed and new RoC • Continuous mentorships and coaching

M&E of AHD in Uganda – Pictorial Digest

Revised AHD Screening tests in the HIV Care Card

CA14					
Tests and Investigations					
CD4/ CD4% CrAg, RPR	TB LAM	LFTs	Date/ Comorbidity Test		
	TB LAMP	RFTs			
	GeneXpert/ Truenat	Viral Load			
	Miscroscopy Xray	HIV Drug Resistance			
	Others	Resistance			
CD4/CD4%	TB LAM:	LFTs Done YES/NO	RFTs Done YES/NO	DD/MM YYYY	HEP B
CrAg:	TB LAMP	VL date	VL result	DD/MM YYYY	HEP C
RPR	GeneXpert/Truenat	VL status	dd/mm/yyyy	DD/MM YYYY	RFTs
	Microscopy	DR result		DD/MM YYYY	LFTs
	X-Ray:	DR status		DD/MM YYYY	RBS/FBS
Others:___	Others:___			DD/MM YYYY	CBC
				DD/MM YYYY	Others

Revised Quarterly reporting indicators – HMIS 106a

At ART Initiation

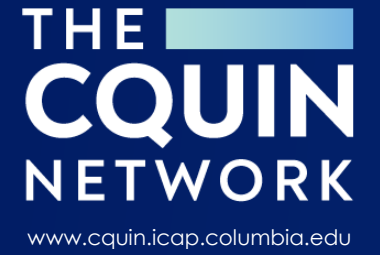
HC10	No. of new clients started on ART with baseline CD4		
HC11	No. of new clients started on ART with baseline CD4 <200		
HC12	No. of new clients with a baseline CD4 <200 that	Tested for TB LAM	
		Positive for TB LAM	
		TB LAM Positive treated for TB	
		Tested for CRAG	
		CRAG Positive	Total
			Diagnosed with CCM
	CRAG Positive treated with pre-emptive fluconazole		
	Treated for Cryptococcal meningitis		

Non-Suppressed Clients

HC41	Number of non-suppressed clients that received CD4 test	Total	
		CD4 < 200	
HC42	Number of Non-Suppressed Clients with CD4 < 200 that;	Tested for TB LAM	
		Positive for TB LAM	
		Positive for TB LAM treated for TB	
HC43	Number of non-suppressed Clients with CD4 <200	Tested for CRAG	
		CRAG Positive	Total
			Diagnosed CCM
		CRAG Positive treated with pre-emptive fluconazole	
	Treated for Cryptococcal meningitis		

Acknowledgements

- **MINISTRY OF HEALTH UGANDA**
- **PEPFAR**
- **WHO**
- **UNICEF**
- **UNAIDS**
- **CHAI**
- **EGPAF**
- **GLOBAL FUND**
- **ICAP-CQUIN**



Thank you!

