

# Uganda's experience using the CQUIN dHTS Capability Maturity Model



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## Outline

- Background and context
- The CMM self-staging process and results
- Highlight of Uganda dHTS action plan
- Progress on Implementation of action plan items
- Challenges and lessons learned

# Background and Context: 1- HIV statistics

## HIV statistics

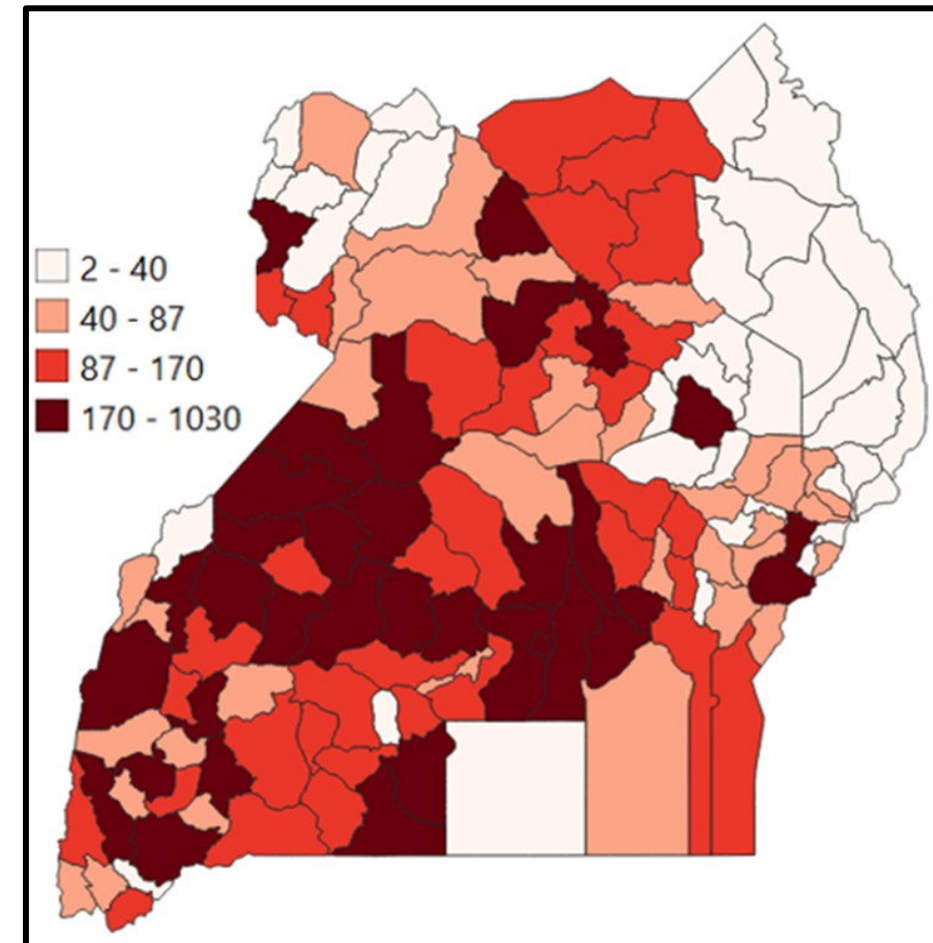
- Estimated PLHIV: **1,453,891**
- HIV prevalence: Overall **5.5%** and **6.0%** among 15-64 years (UPHIA, 2020)
  - Women: **7.1%**
- Men: **3.8%**
- Estimated HIV incidence **0.29%**
- Total undiagnosed, **202,000**
  - **80%** of undiagnosed in 6 regions
- In CoP22, we aimed to identify **170,000** individuals, actual number identified **80.6%** (**137,460**)
- Linked **95.2%** (**123,443**) to ART

Source: UPHIA 2020

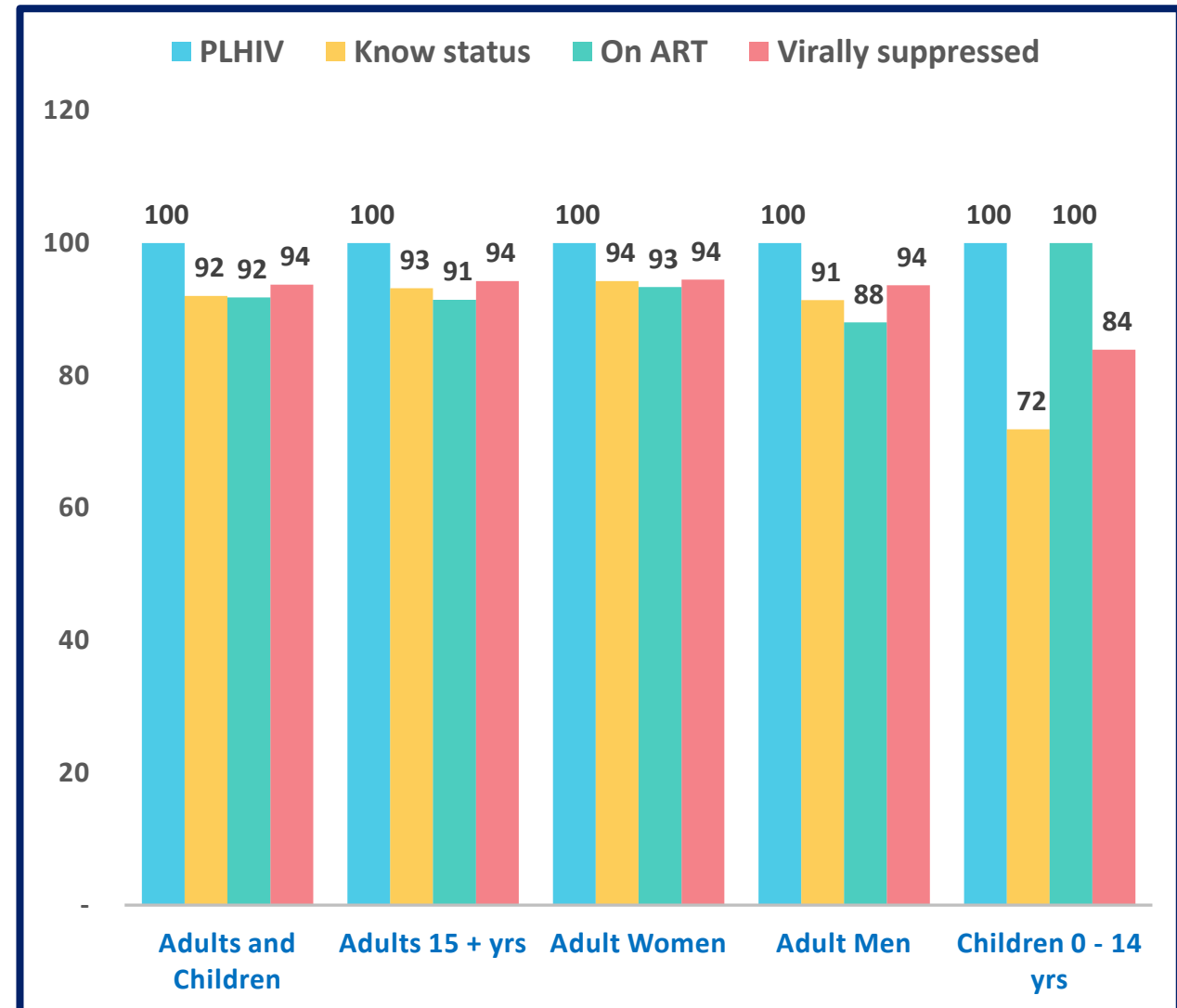
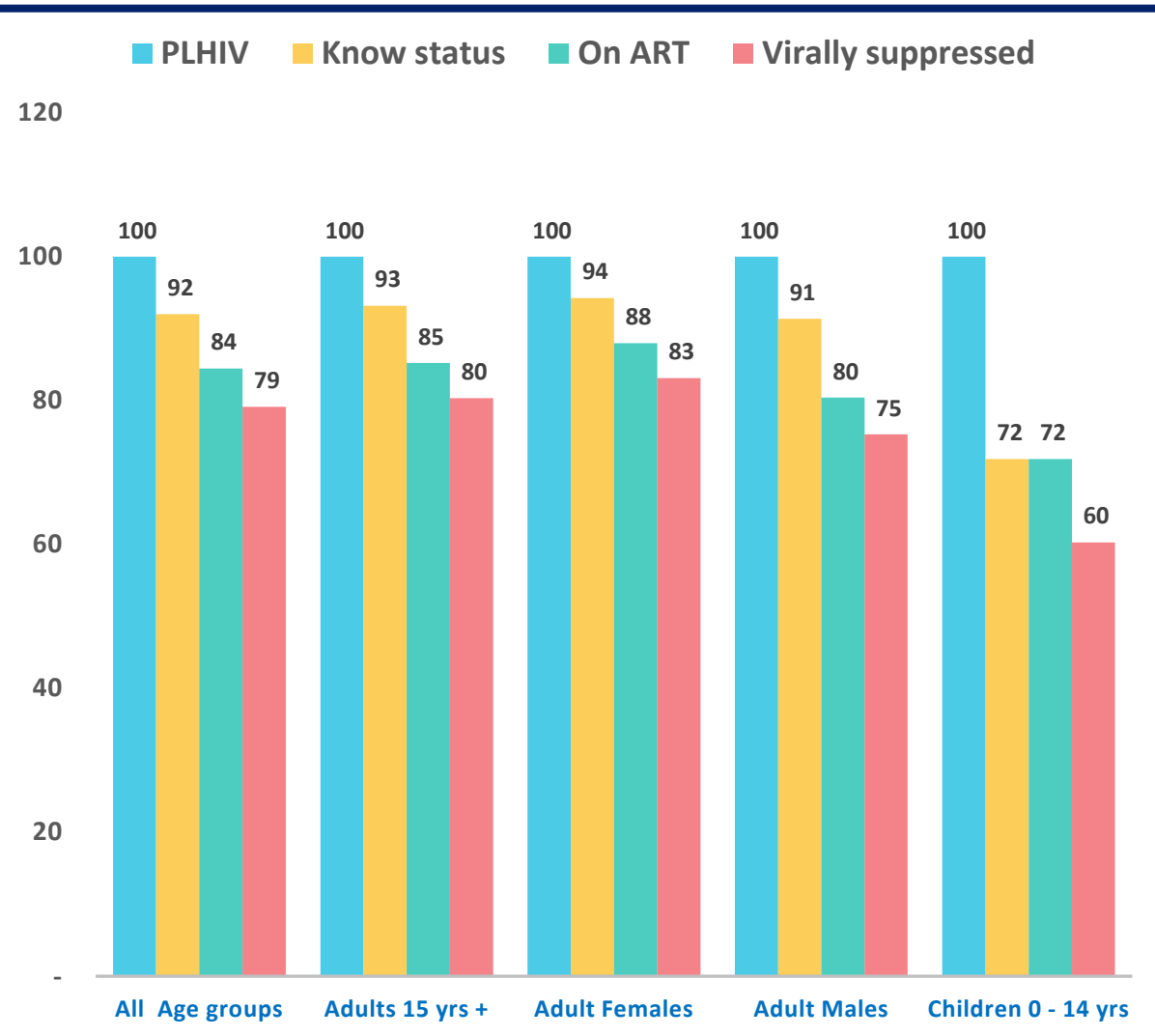
Spectrum Estimates 2022

Surge dashboard

## Prevalence of HIV by region (UPHIA 2020)



# Background and Context 2: Population and conditional HIV cascades by Dec 2022



# CMM self-staging process



- Uganda was among the 7 countries that piloted the ICAP CQUIN dHTS CMM in 2022
- We leveraged experience from the pilot staging meeting, and TA from CQUIN and CHAI to conduct the self-staging meeting in February 2023
- The staging meeting was “composite” and “interactive”
  - Participants included DPs, IPs, MOH, CSOs
- Staging meeting lasted for approximately 8 hours, including action planning, which commenced during the staging meeting
- Action plan was developed at the dHTS March meeting and validated by the HTS TWG in April 2023

# The Uganda CMM self-staging results

Uganda achieved the most mature stage (dark green) in 10 domains, while 2 domains remained in the least mature (red) stage.

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

# Uganda's priority dHTS action plan (2023)

<b>Private sector engagement/oversight</b>
<ul style="list-style-type: none"> <li>• Include Private For-Profit facilities on list for technical Support supervision quarterly</li> <li>• TWG representation</li> </ul>
<b>Differentiated mobilization</b>
<ul style="list-style-type: none"> <li>• Launch the HCD demand creation with digital platforms to all regions in the country</li> <li>• Pilot additional digital platforms that have been developed</li> </ul>
<b>Testing for re-engagement (Re-diagnosis)</b>
<ul style="list-style-type: none"> <li>• Benchmark with Malawi on testing for re-engagement</li> <li>• Develop guidance, SOPS, and tools for testing for re-engagement</li> </ul>
<b>Linkage to combination prevention and other services</b>
<ul style="list-style-type: none"> <li>• Engage national prevention stakeholders to build consensus on prevention services</li> <li>• Revising tools to capture data and report linkage to prevention routinely</li> </ul>
<b>Differentiated Testing</b>
<ul style="list-style-type: none"> <li>• Scale up the HIVST Campaign to all Universities</li> </ul>
<b>Policies Strategic model mix and decentralization</b>
<ul style="list-style-type: none"> <li>• Revise the algorithm to adapt the test algorithm as recommended by WHO</li> </ul>
<b>Implementation and scale up plan</b>
<ul style="list-style-type: none"> <li>• Revise dHTS optimization plan and targets to include targets for linkage to prevention</li> </ul>
<b>Other</b>
<ul style="list-style-type: none"> <li>• Engage national prevention stakeholders to build consensus on prevention services</li> </ul>
<b>Monitoring and Evaluation</b>
<ul style="list-style-type: none"> <li>• Revising tools to capture data and report linkage to prevention routinely</li> </ul>

**Action plans were aligned to CMM gaps identified during the staging meeting**

# Key accomplishments-1 -Progress on implementing action point items

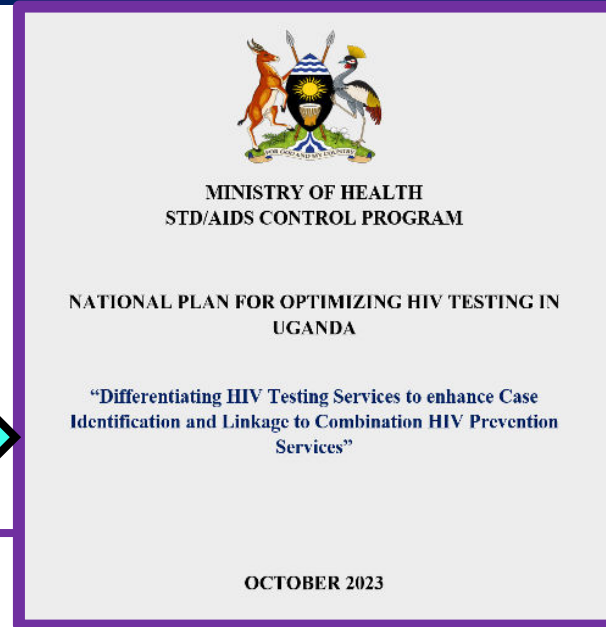
Domain	Baseline Score	Implementation status (Sept 23)	Action taken
Policies 3: Linkage		Completed	<ul style="list-style-type: none"> <li>Linkage to combination prevention has been included in the nation HTS scale up plan (optimization plan)</li> </ul>
dHTS optimization and scale up plan		Completed	<ul style="list-style-type: none"> <li>Developed scale up plan with logistical support from CHAI, and PSI, TA support from ICAP CQUIN</li> <li>Training materials being developed to aid nationwide dissemination</li> </ul>
Linkage to prevention and other services		Completed	<ul style="list-style-type: none"> <li>HTS M&amp;E tools are being piloted</li> <li>HTS tools adapted to report linkage to combination prevention services</li> <li>Training materials are being developed to aid dissemination of changes</li> </ul>
Policies 2. Optimizing HIV Testing		In progress	<ul style="list-style-type: none"> <li>National algorithm is being revised.</li> <li>Lab validation has been completed.</li> <li>Field evaluation is ongoing</li> </ul>
Private sector engagement/oversight		In progress	<ul style="list-style-type: none"> <li>Private sector engagement plan is being developed with support from TASO (GF)</li> <li>National HTS TWG already includes private sector representation</li> <li>Quarterly supportive supervision visits now includes private facilities</li> </ul>
M&E		In progress	<ul style="list-style-type: none"> <li>M&amp;E tools being piloted following revision</li> <li>The client card, HTS register, and monthly reporting forms have been revised to include linkage to combination prevention cascade</li> </ul>
Linkage to Rx 1: Timely Linkage		In progress	<ul style="list-style-type: none"> <li>To be determined during roll out of new tools, included in revised optimization plan &amp; tools</li> </ul>
Population coverage		Not started	<ul style="list-style-type: none"> <li>PHIA to be conducted starting June 2024</li> </ul>



# Key accomplishments 2-dHTS optimization plan, and adapting HMIS tools to report Linkage to combination prevention services



Scale up & Optimization plan writing meeting



HMIS tools being adapted to report Linkage to prevention

## HMIS 105: HEALTH UNIT OUTPATIENT MONTHLY REPORT

		Number of individuals Below 1yr		Number of individuals 1 – 4		Number of individuals 5 - 9		Number of individuals 10 – 14		Number of individuals 15 - 19		Number of individuals 20 – 24		Number of individuals 25 - 29		Number of individuals 30 - 34		Number of individuals 35 – 39		Number of individuals 40 – 44		Number of individuals 45 – 49		Number of individuals 50+	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
HT05. Number of individuals by CICTM/ICT testing approach	Health Facility	Tested for HIV																							
		New HIV positive																							
		Linked to HIV care																							
	Community	Tested for HIV																							
		New HIV positive																							
		Linked to HIV care																							
HT07. Number of individuals tested for the first time ever		<div style="border: 2px solid blue; padding: 5px;"> <p>HT07. Number of individuals tested for the first time ever</p> <p><b>HIV negative at risk of acquiring HIV</b></p> <p><b>HIV negative at Risk Linked to HIV prevention services</b></p> </div>																							
HIV negative at risk of acquiring HIV																									
HIV negative at Risk Linked to HIV prevention services																									

## Challenges faced while implementing the action plan

- Competing program priorities and limited resources are hinderances to fast attainment of action plan activities
- Unfunded priorities e.g., development of a private sector engagement framework (*requirement for GC7, CMM staging*)
- Absence of countries with mature programs that track linkage from HIV testing to combination prevention services for people with ongoing risk of acquiring HIV
- Many stakeholders are still struggling to understand “Status Neutral” testing approach

# Lessons Learned

- Wider stakeholder involvement gives reliable self assessment results & promotes ownership leads to prioritization of support
- Action planning begins during the staging meeting, **DON'T WAIT!**
- The ICAP CQUIN learning network has provided valuable information and promising practices on linkage to prevention during quarterly dHTS calls
- PEPFAR, CHAI and PSI have been pivotal in attainment of the observed progress due to their logistical and Technical support
- Community involvement at all stages (planning, implementing, and monitoring) is vital in enhancing adoption and ownership of programs and services
- The CMM provides a platform for ranking the country program needs to guide priority setting & resource mobilization

# Wish list: What we would like to learn from the network to improve the CMM scores

- Benchmarking countries that are capturing and reporting data of re-diagnosis (testing for re-engagement): **Malawi**
- Benchmarking countries that are capturing, reporting and routinely monitoring private sector HTS work: **Liberia?**
- Learning about best practices on private sector engagement-**??**
- Benchmarking the use of digital platforms to enhance reach of adolescent and young people in tertiary institutions/university with HIVST **??**

# Acknowledgement

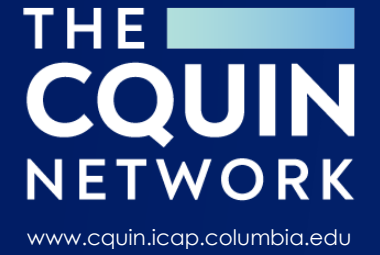
Uganda appreciates the ongoing engagement with CHAI, ICAP CQUIN, WHO, GF, PEPFAR, BMGF, PSI, UNITAID, CIFF, CSOs, for the technical and logistical support provided

*Thank you*



Ministry of Health





Thank you!

