



# Differentiated HIV Testing: Lessons from Ghana's dHTS Service Quality Assessment

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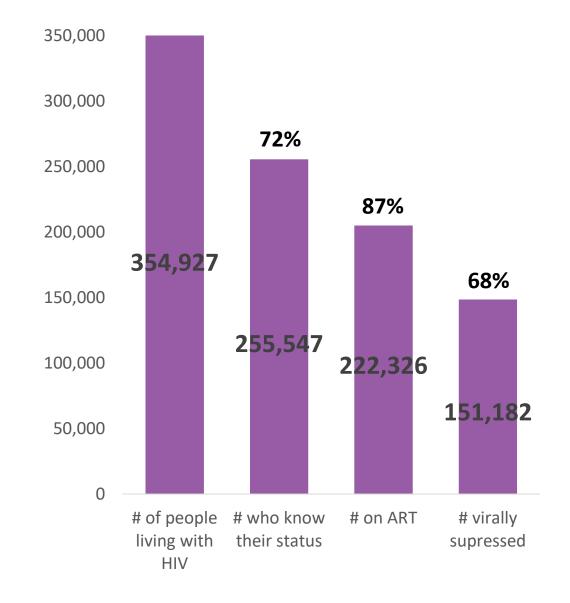


#### **Outline**

- Background
- dHTS Service Quality Assessment tool
- Development process
- Assessment
- Findings
- Key lessons
- Use of Findings/Next steps

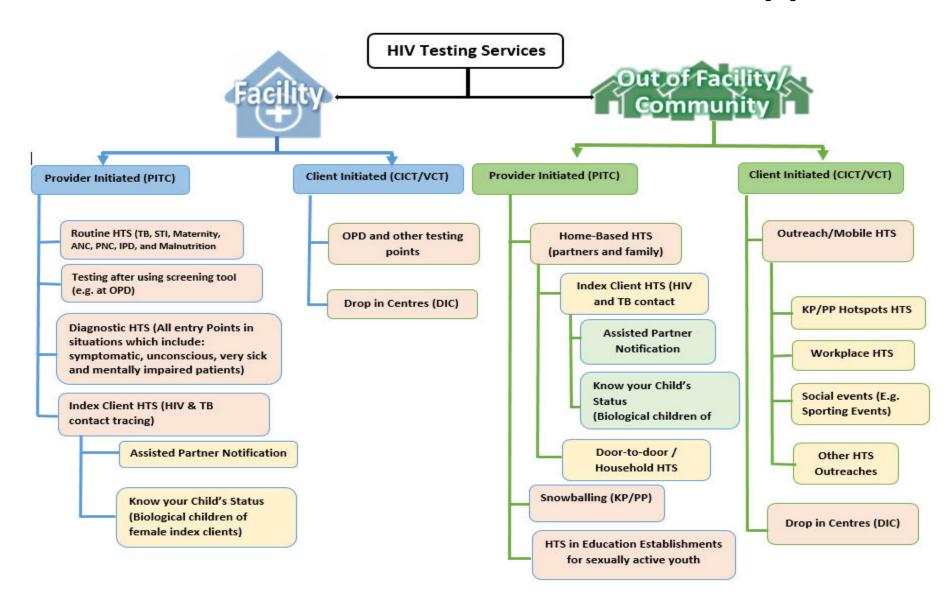


- Ghana adopted the WHO recommendations to "TREAT ALL" in 2016 towards achieving 90-90-90 (UNAIDS targets)
- Innovative & pragmatic approach like DSD is needed to help achieve these targets, and DSD implementation commenced in 2018 across the cascade of care
- Despite significant scale up, achievement to the first 95 remains suboptimal to attain epidemic control
- The Ghana MoH prioritized focusing attention on improving the quality of dHTS implementation

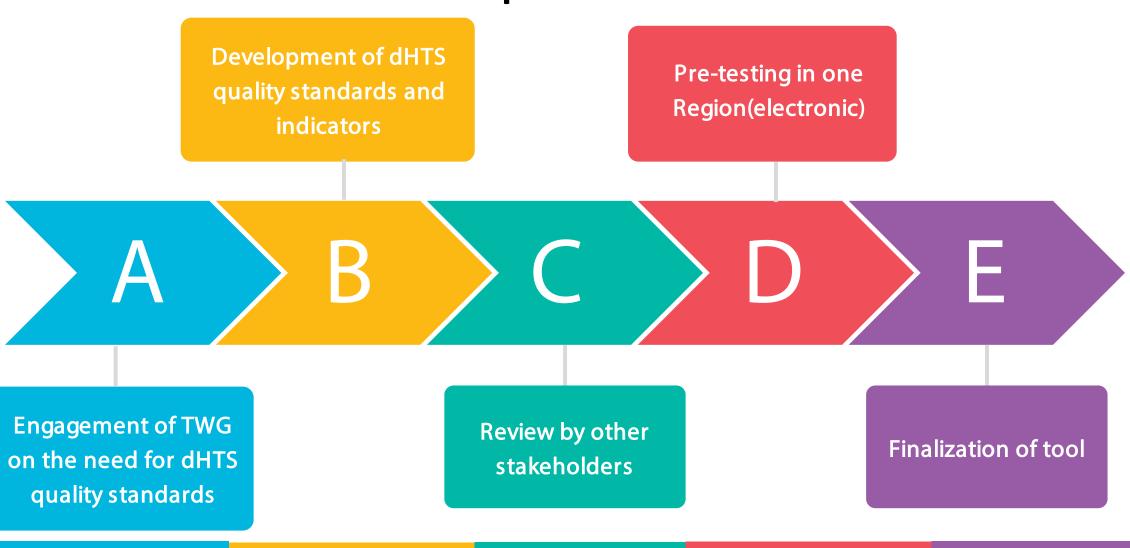




### Recommended Differentiated HTS Models and Approaches



### Quality Standards and Assessment Tool for dHTS Development Process



2 weeks

5 days

3 weeks

1 day

5 days

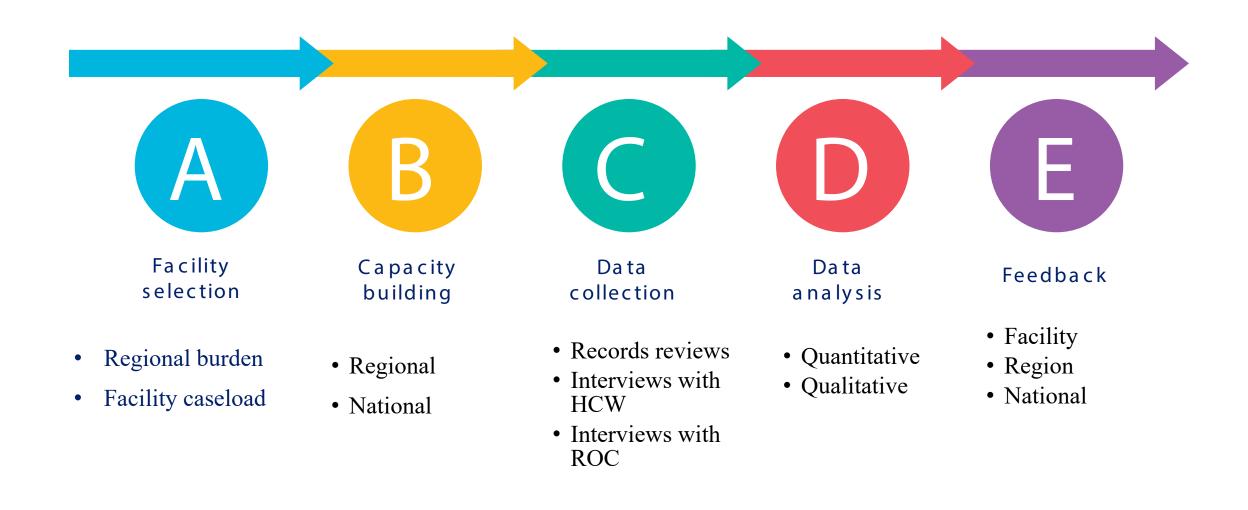
### Ghana's dHTS Quality Assessment Tool

Domain	Quality standards
Cross-cutting	1. Availability of SOPs
	2. Training on dHTS
	3. Access to dHTS
	4. Commodity availability(RDTs, ARVs(onsite/referral), prevention packages(onsite/referral)
	5. Timely Data capture
Mobilization	Use of risk-population-specific approaches to identify clients for testing
Testing	1. Adherence to 5 Cs of HIV testing
	2. Adherence to three-test algorithm
	3. HIV risk assessment
Linkage	1. Timely linkage to treatment( within 7 days)
	2. Timely linkage to prevention(immediate)
Summary	Challenges, innovations, recommendations

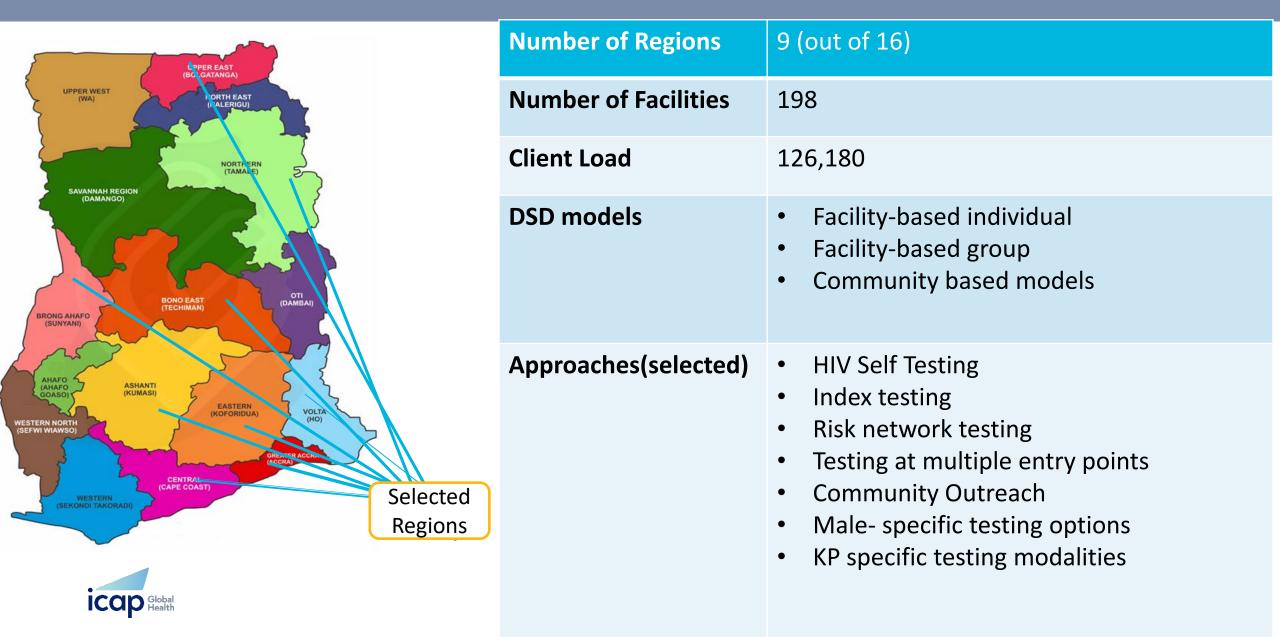




#### Assessment Process

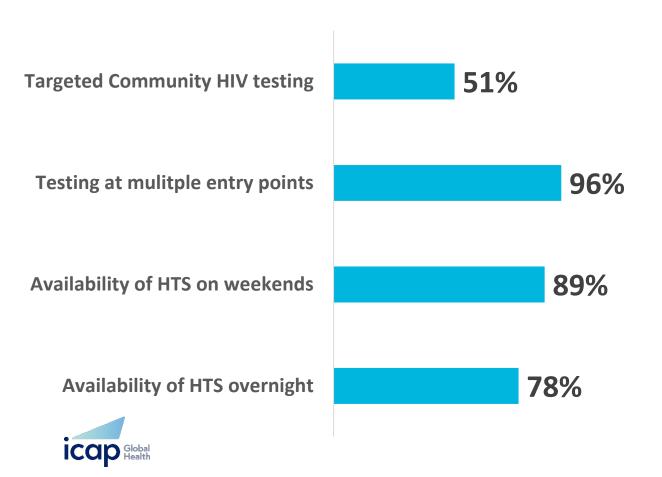


### dHTS Quality Management Assessment Sites

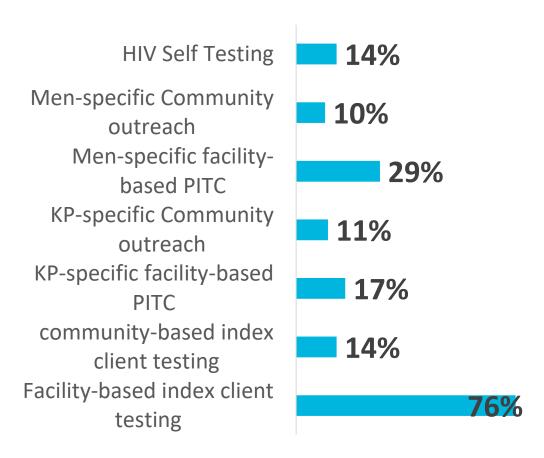


### Assessment Results: Proportion of facilities offering various modes of testing and mobilized services (198 sites)

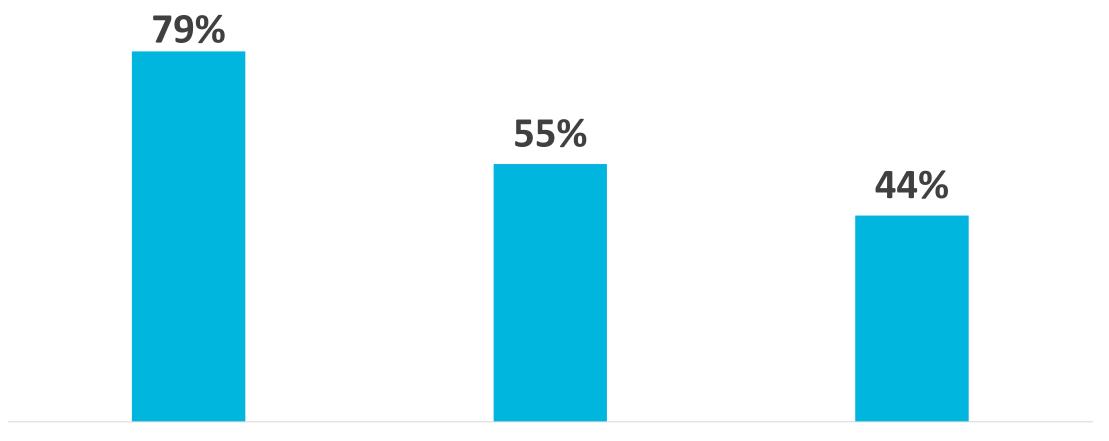
### Proportion of facilities offering various modes of HIV testing services



### Proportion of facilities offering mobilized testing approaches



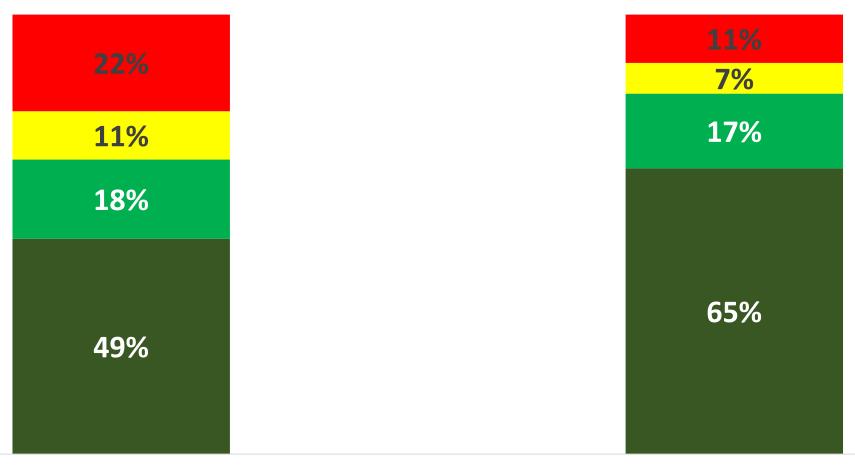
## Assessment Results: Proportion of sties with protocols and stockout of RDTs (198 Sites)



Availability of protocols for HTS Availability of protocols for HIV risk Stockout of RDTs(past 3 months) assessment



### Assessment Results: Proportion of facilities achieving documentation standards (198 Sites)



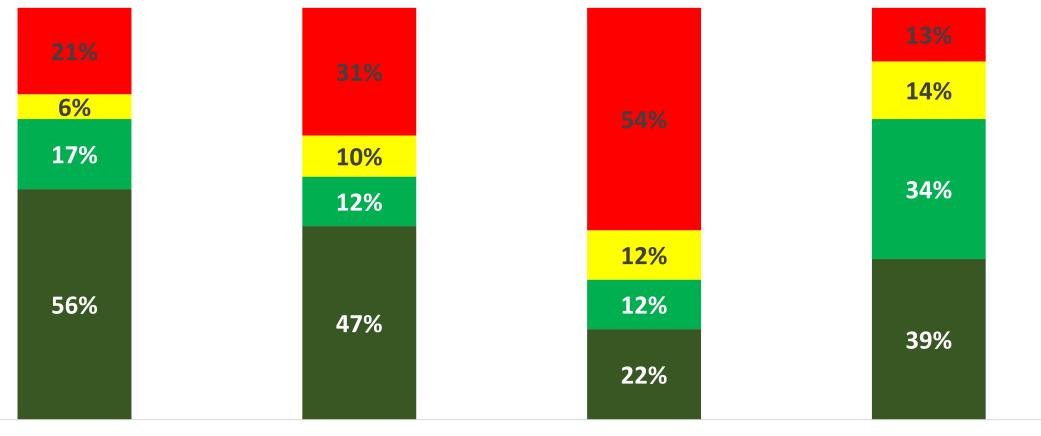
Proportion of entry points with appropriate data collection tools

proportion of tests in Registers collated into DHIMS



■ >90% ■ >80-90% ■ 60-80% ■ <60%

### **Assessment Findings:** Proportion of facilities achieving testing standards



test algorithm

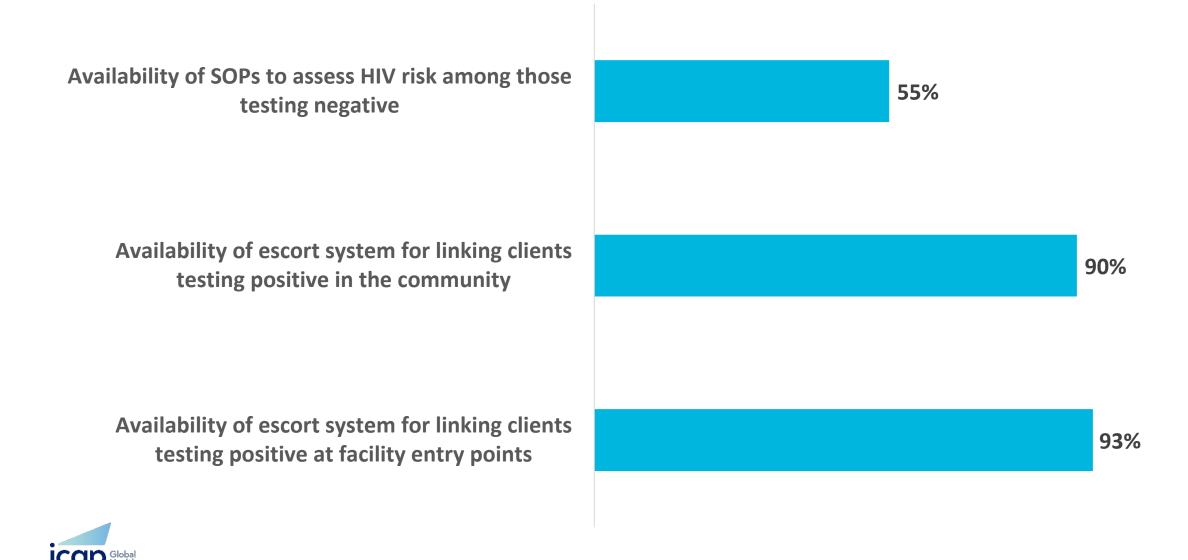
staff who adhere to 3- Staff who adhere to 5 Cs Entry points that confirm clients testing reactive at the same place

**Entry points with** adequate privacy and lighting

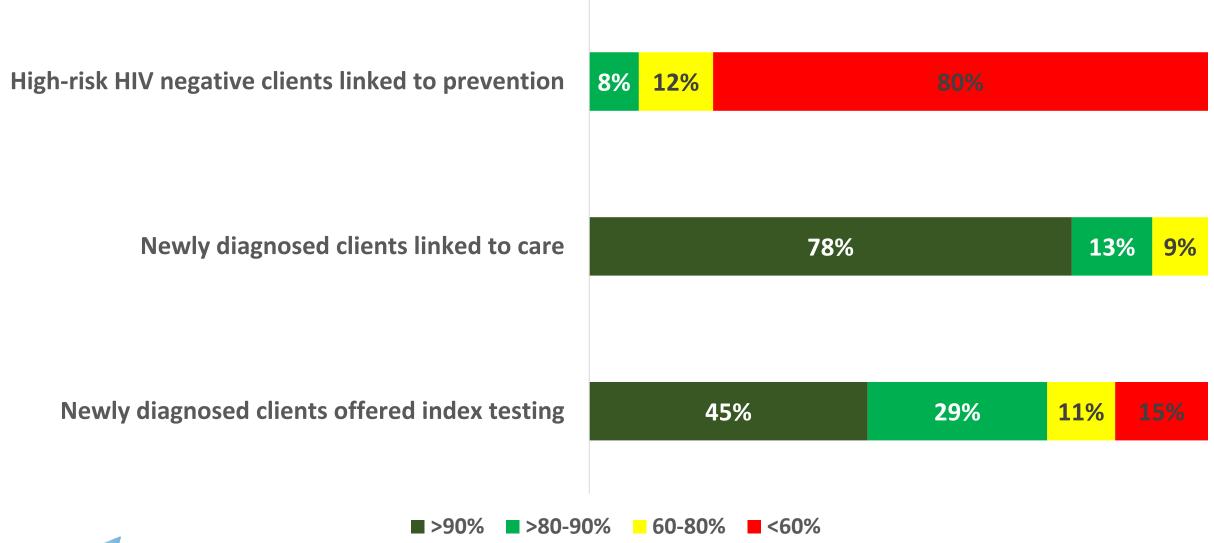


60-80% **■** >90% **>80-90**%

## Assessment Results: Proportion of facilities achieving Linkage to treatment and prevention services standards



#### Assessment Results: Proportion of facilities meeting linkage standards





#### dHTS quality challenges identified during the assessment

- 1. Human resource capacity and other challenges with short staffing
- 2. Gaps in prevention packages
- 3. Commodity stockouts
- 4. Unavailability of SOPs and protocols
- 5. Suboptimal documentation



### Use of findings

Level	Relevance of outputs
National	<ol> <li>Evidence to guide intervention prioritization(GF grant)</li> <li>Knowledge gaps will influence training content</li> <li>To provide protocols to service delivery sites</li> </ol>
Regional	<ol> <li>Human Resource gaps identified to be filled</li> <li>Evidence provided on areas to focus on during routine monitoring</li> </ol>
Facility level	<ol> <li>Baseline data provided to guide facility-level CQI interventions</li> <li>Resource gaps identified to be addressed by facility management</li> </ol>

#### Next Steps

Revise the tool further and deploy it on another electronic platform(ODK)

**Institutionalize dHTS Quality Assessment** 

Track facility-level QI interventions during routine monitoring visits







### Thank you!

