

Quality Management for DSD in Uganda

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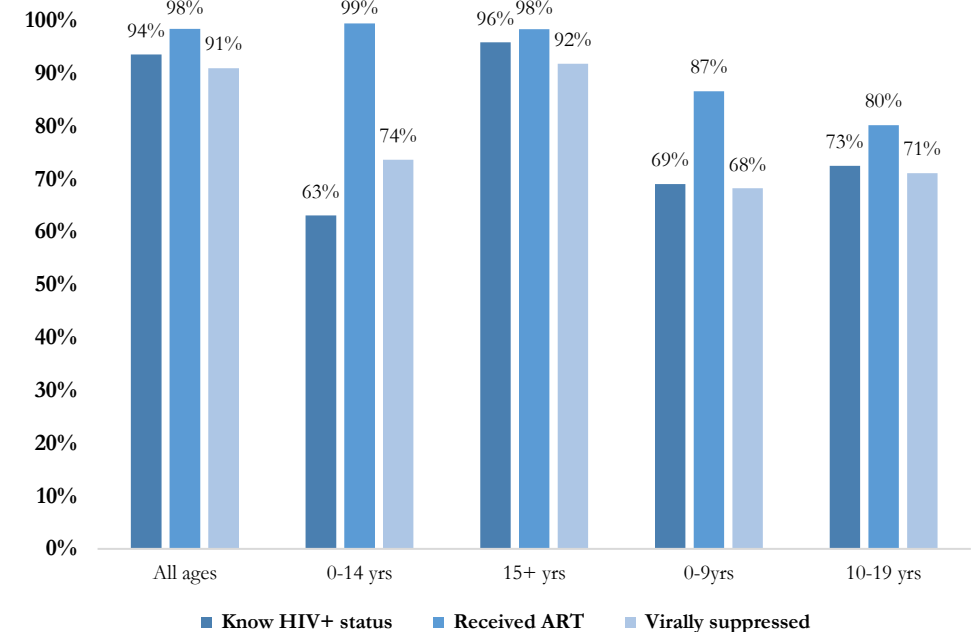
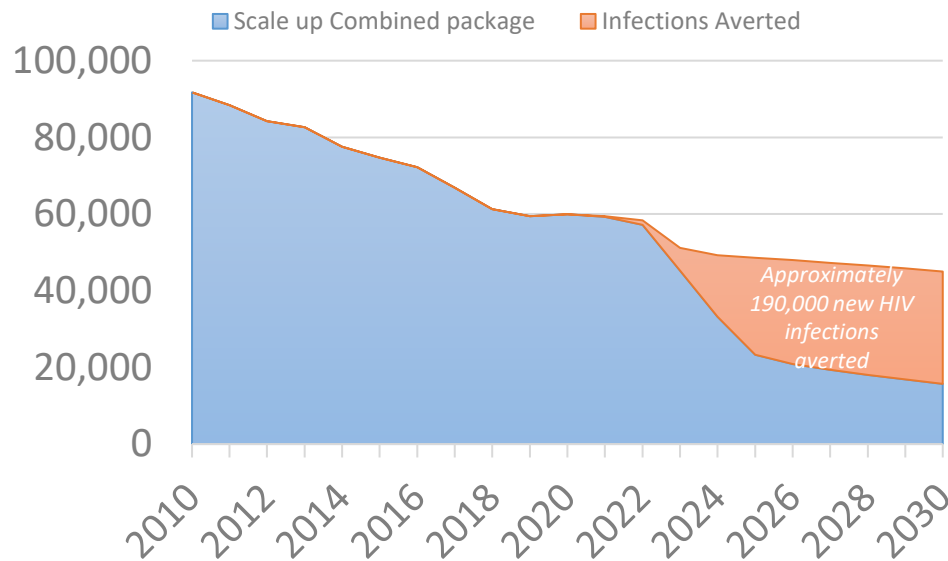
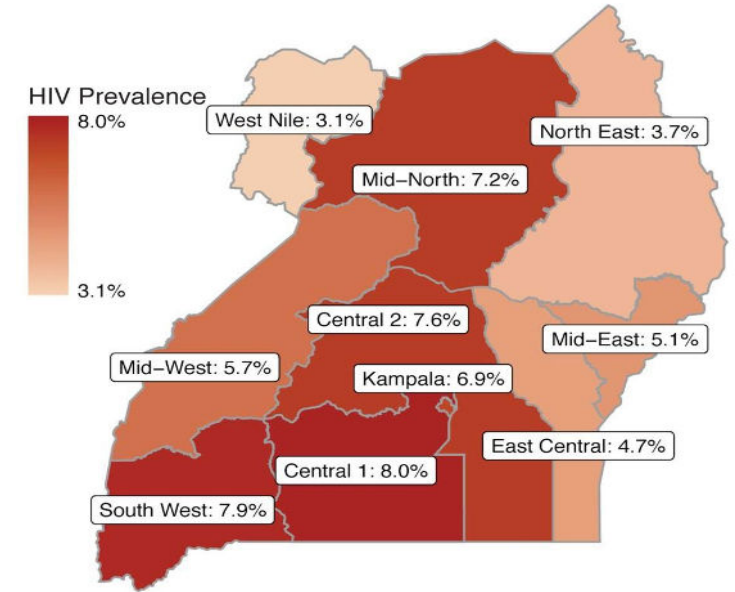


Outline

- **Uganda HIV statistics**
- **Background of Quality in DSD**
- **DSD Quality Assessment tool**
- **2023 DSD quality assessment results**
- **Gaps identified**
- **DSD QI projects**
- **Client Satisfaction surveys**
- **Next steps**

Uganda HIV Statistics

- Estimated PLHIV: **1,453,891**; Pop: **45M**
- HIV prevalence: Overall **5.5%** and **6.0%** among 15-64 years (UPHIA, 2020)
 - Women: **7.1%**, Men: **3.8%**
- Estimated adult HIV incidence **0.29%**
- New infections and AIDS-related deaths reduced to 54,000, and 17,000 respectively
- Linked 95.2% to ART
- Active on ART (June 2023) **1,403,381**



Background: Quality and DSD in Uganda

- Uganda has a National Quality Improvement Framework that guides implementation of CQI in programs
- CQI is used to optimize performance in all HIV management approaches
- In 2019 Uganda conducted a three-phase study to assess the application of CQI in implementation of the DSD models
- Uganda has included CQI in the DSD guidelines, the DSD training materials, Quarterly supervision and annual regional Review meetings include CQI implementation status.
- Uganda has actively participated in the CQUIN QM-CQI CoP and developed the Quality Standards that feed into the Maturation Model
- Uganda conducts Regional Performance Reviews, supervision and Mentorships.

Uganda's DSD Quality Assessment Tool

- Uganda uses DSD TWG and sub-committee groups as platforms for planning and coordinating DSD activities including quality management.
- After an evaluation of DSD programs in 2018, a DSD quality management tool was developed to assess standards related to the following domains at different levels semi-annually.
- Quality Standards Domains:

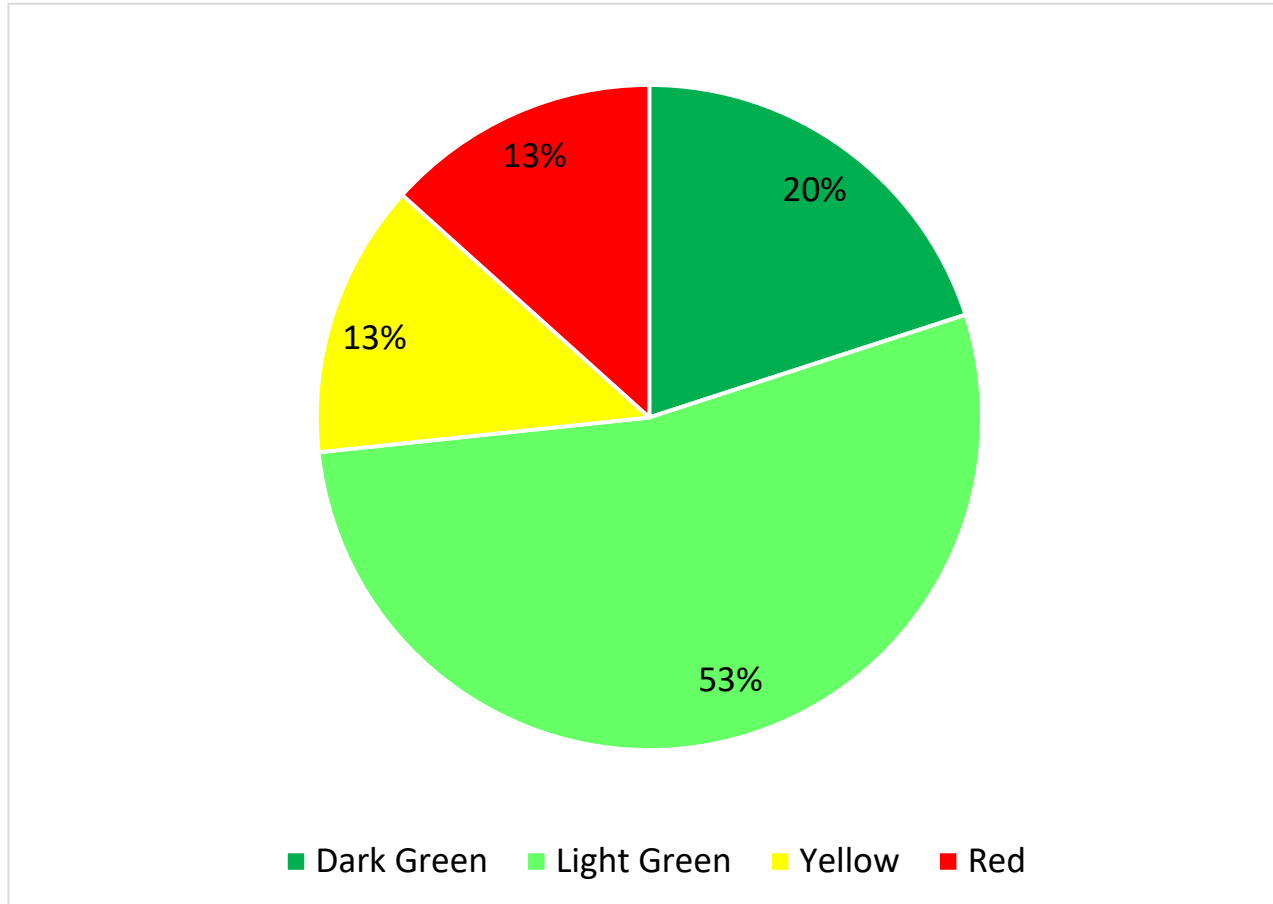
Region	District	Facility
<ol style="list-style-type: none">1. Coordination2. Implementation progress	<ol style="list-style-type: none">1. Leadership & Governance2. Human Resource3. Access to essential medicines4. Health Information systems5. Continuous Quality Improvement	<ol style="list-style-type: none">1. Leadership & Governance2. Human Resource3. Access to essential medicines4. Health Information systems5. Continuous Quality Improvement6. Service delivery (dHTS, DARTS)7. Integration of TB/HIV services8. Chart review

The 2023 DSD Quality Assessment

- DSD quality assessment is a bi-annual activity covering 81% of the regions in the country.
- Using paper-based and Excel tools, data is collected, submitted to the M & E officer for review, cleaning and analysis.
- The results are presented to the MoH TWG PEPFAR agencies and IPs.
- The MoH leads orientation meetings for the field teams, along with entry and feedback meetings at the districts and facilities.
- The 2023 quality assessment was conducted in June for two weeks at 65 high-volume sites

Leadership & Governance For DSD

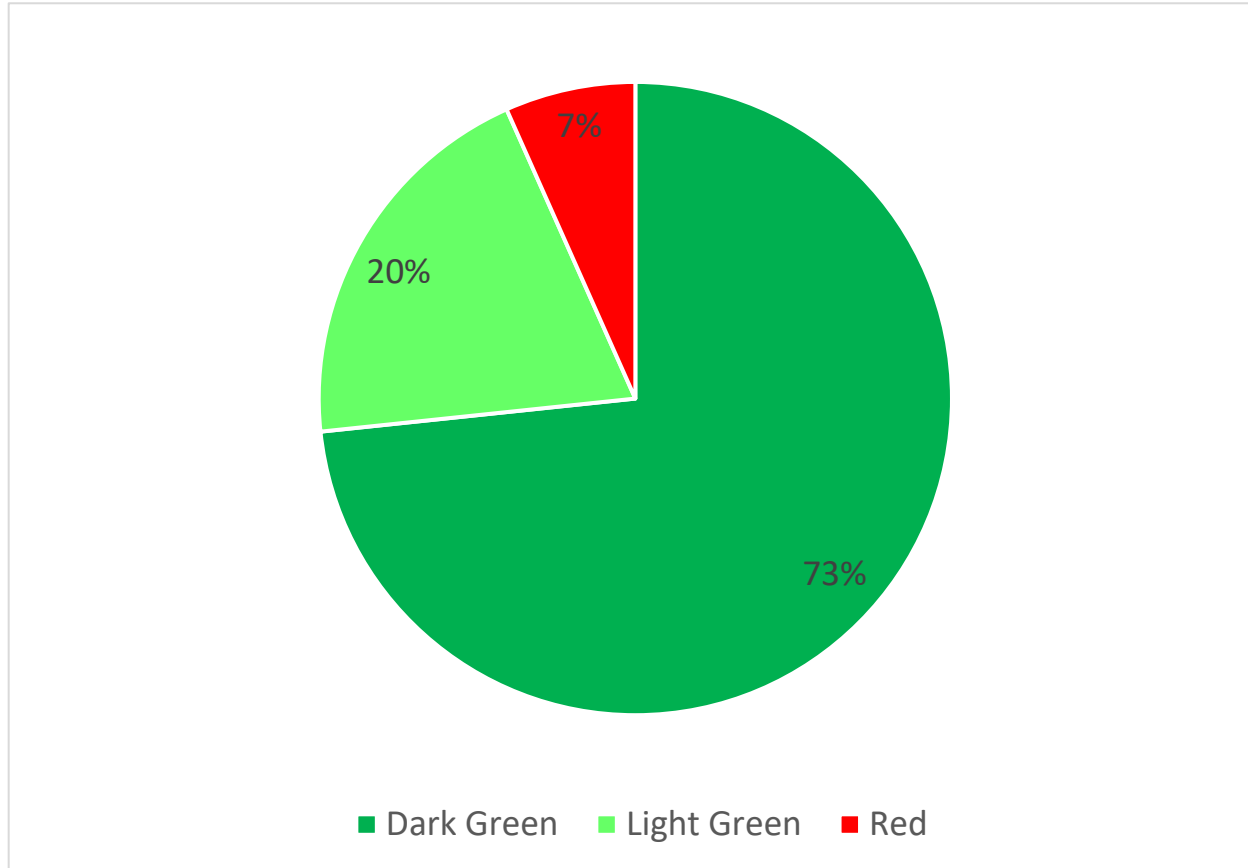
Aggregate data from 65 facilities, June 2023



	"Yes" to All
	"Yes" to 5-6 Qtns
	"Yes" to 3-4 Qtns
	"Yes" to <3 Qtns

The health facility has a Focal Person to lead and coordinate DSD activities	87%
The DSD Focal Person has clear terms of reference including the following;	87%
The facility has a DSD committee.	60%
The DSD committee has the following membership (ART in charge/HTS/HMIS/LOGISTIC PO/QI/PMTCT/VHTs/TB/LAB)	80%
This committee met at least once in the last 3 months (Jan- March 2023).	53%
The facility has a DSD work plan which includes the following key activities.	53%
The facility has the following DSD policy documents.	67%

Aggregate data dHTS Service Delivery (65 sites) June 2023



Dark Green	"Yes" to All
Light Green	"Yes" to 4-5 Qtns
Yellow	"Yes" to 3 Qtns
Red	"Yes" to <3 Qtns

The health facility offers HTS guided by the following key principles

- _ Targeting to maximize the yield
- _ Integration with other health service
- _ Decentralization of HTS
- _ Task-shifting

100%

The health facility offers facility based HTS

93%

The facility offers both Provider Initiated Testing and Counseling

87%

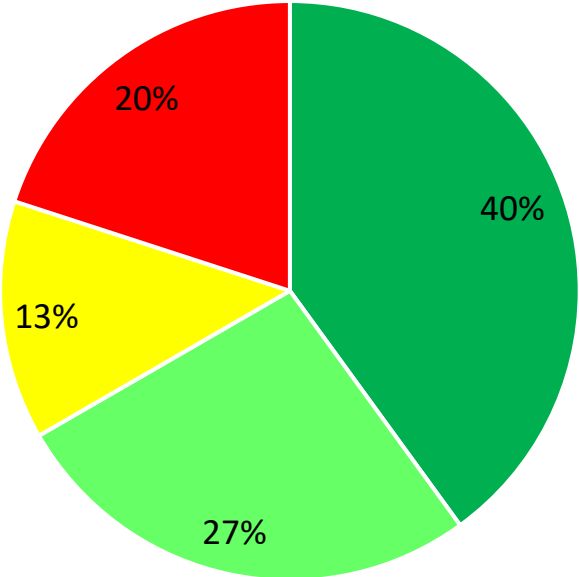
The health facility offers community based HTS

87%

The facility has a detailed HTS plan clearly showing the WHEN, WHERE, WHO and WHAT for/Mobilizing/Testing/Linking

93%

Aggregate data DSD QI activities (65 Sites), June 2023



■ Dark Green ■ Light Green ■ Yellow ■ Red

Dark Green	"Yes" to All
Light Green	"Yes" to 5-6 Qtns
Yellow	"Yes" to 3-4 Qtns
Red	"Yes" to <3 Qtns

The health facility has a CQI committee.	80%
The facility has a multidisciplinary department/work place improvement teams e.g. in the HIV clinic, MCH etc.	87%
The facility CQI committee has met at least once in the last 3 months.	80%
The facility has a CQI work plan.	67%
The health facility is implementing a DSD related CQI project or the facility implemented and closed a DSD related CQI project in the past 6 months.	53%
The facility has a mechanism for obtaining feedback from clients on DSD.	53%
The facility routinely provides feedback to the clients about their views on how services should be provided in the context of DSD.	87%

Aggregate DSD Models Outcomes, (65 sites) June 2023

	CCLAD	CDDP	CRPDDP	FBG	FBIM	FTDR
<i>No of charts sampled</i>	130	120		150	150	149
<i>No with documented TB screening</i>	116	100		134	138	135
% screened	89%	83%		89%	92%	91%
<i>Number Eligible for VL testing in the previous quarter</i>	421	537	219	1151	991	3398
<i>Number that received the VL Test</i>	391	401	167	1034	620	3102
<i>Number that had a suppressed VL</i>	385	295	167	942	446	2882
% coverage	93%	75%	76%	90%	63%	91%
% Suppression	98%	74%	100%	91%	72%	93%
<i>Number scheduled for a visit last quarter</i>	1410	1050	1158	2322	2303	11646
<i>Number that kept appointment</i>	1377	1042	1056	2202	1971	10822
%ge	98%	99%	91%	95%	86%	93%
<i>Number followed up. (Did not keep appointment)</i>	22	7	102	105	259	697
<i>Number that returned to care</i>	12	7	0	61	87	289
% returned to care	55%	100%	0%	58%	34%	41%

Quality Challenges Identified in DSD Programs in Uganda

- Limited use of CQI methods by health facility teams
- High level of patient miss-categorization for unstable patients managed under models for stable patients
- Sub-optimal patients' viral load monitoring
- Long recipient of care waiting time
- Low recipient of care satisfaction
- Activity based costing (ABC) 2020 indicate a \$20.3 higher cost for facility-based model than that of community-based models(Studies 2020)

Examples of DSD QI Projects

Quality Challenge	Root Causes	Change Interventions	Timeline
Low uptake for CCLAD across all facilities	Stigma among clients; low sensitization among RoC;	Continuous patient literacy and engaging facility peers to talk about the importance of community models; Use experienced clients to encourage peers to join groups	*Routine
ART 12-month Retention is 75% for all DSD models in Mayuge HF	Data entry is incomplete and inaccurate Mobile clients Double registration	Routine data reviews	June 2022 start date

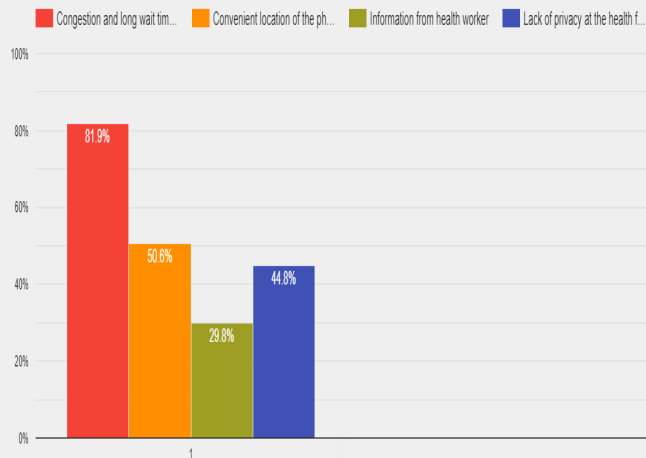
RoC Satisfaction Feedback Survey from 1,255 Respondents July 2023- Led by NAFOPHANU

ROCs join the model to have shorter wait times and improved convenience.

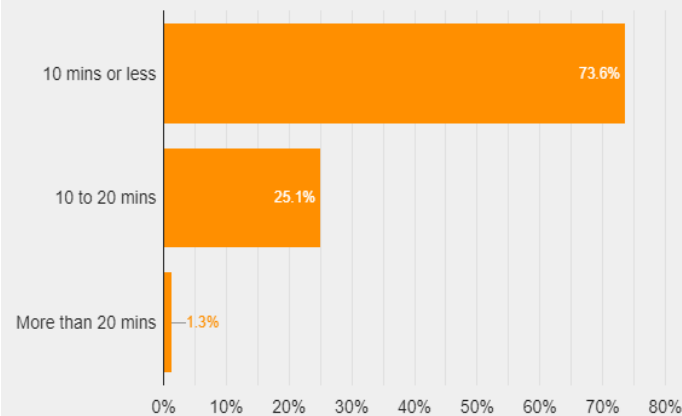
98.7% of respondents report wait times of less than 20 minutes at pharmacy.

98.4% of respondents would recommend this model.

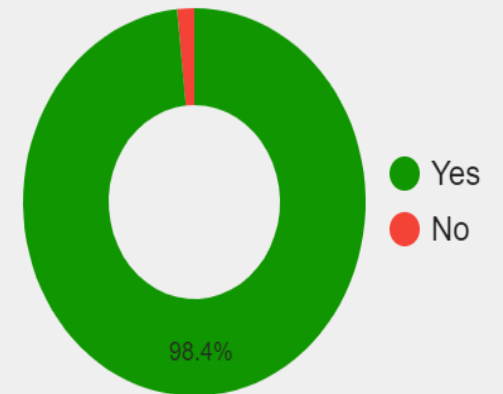
Why did you join the CRPDDP program?
(select all that apply)



How long was the pick up process at the pharmacy?



Would you recommend this service to friends and colleagues?



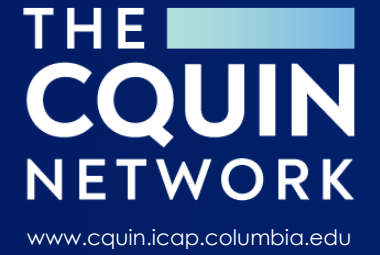
Data collected from **1,255 respondents** across the country. Survey was designed and analysed by MoH and data collection was led by the National Forum of People Living with HIV/AIDs Networks in Uganda (NAFOPHANU). The responses were collected from ROC that have joined the model and receive their drug refills from the respective pharmacies they are linked to. Read more at <https://dsduganda.com/crpddp-satisfaction>

Next Steps

- **Review the quality assessment tool in relation to the 2022 guidelines**
- **Plan for reassessments of poor performing sites and additional assessments to cover the whole country with half of the regions for each assessment**
- **Discuss with SI team on how to track the CQI projects on DSD at the national level**
- **Systematic studies on client outcomes in the different models**
- **Assessment HRQL among for persons and population living and affected with HIV**

Acknowledgements

- **MOH–Uganda Team**
- **PEPFAR-Uganda**
- **Global Fund**
- **ARC**
- **National DSD TWG members**
- **National Forum of People Living with HIV/AIDS Networks in Uganda**
- **CQUIN and the Bill and Melinda Gates Foundation**



Thank you!

