Striving for Excellence: Quality Management for DSD

Gillian Dougherty, ICAP New York

Tuesday November 14th, 2023 8:30-10:00am

CQUIN 7th Annual Meeting

November 13 – 17, 2023 | Johannesburg, South Africa

Session Objectives

- Review quality domain results from the 2023 treatment capability maturity model
- Describe current DSD quality management strategies in Nigeria and Uganda, including standards, indicators, assessments, and progress of QI projects
- Provide information on DSD quality management CoP activities to inform country action plans
- Share quality resources available from the QM for DSD community of practice

Session Outline

Session Moderators: Nicholas Leydon, Bill and Melinda Gates Foundation and Landom Henry Shay ReCAP+, Cameroon

Case Study Presentations

1. Eleen Ekanem, MOH Nigeria
2. Hudson Balidawa, MoH Uganda

Panel Discussion

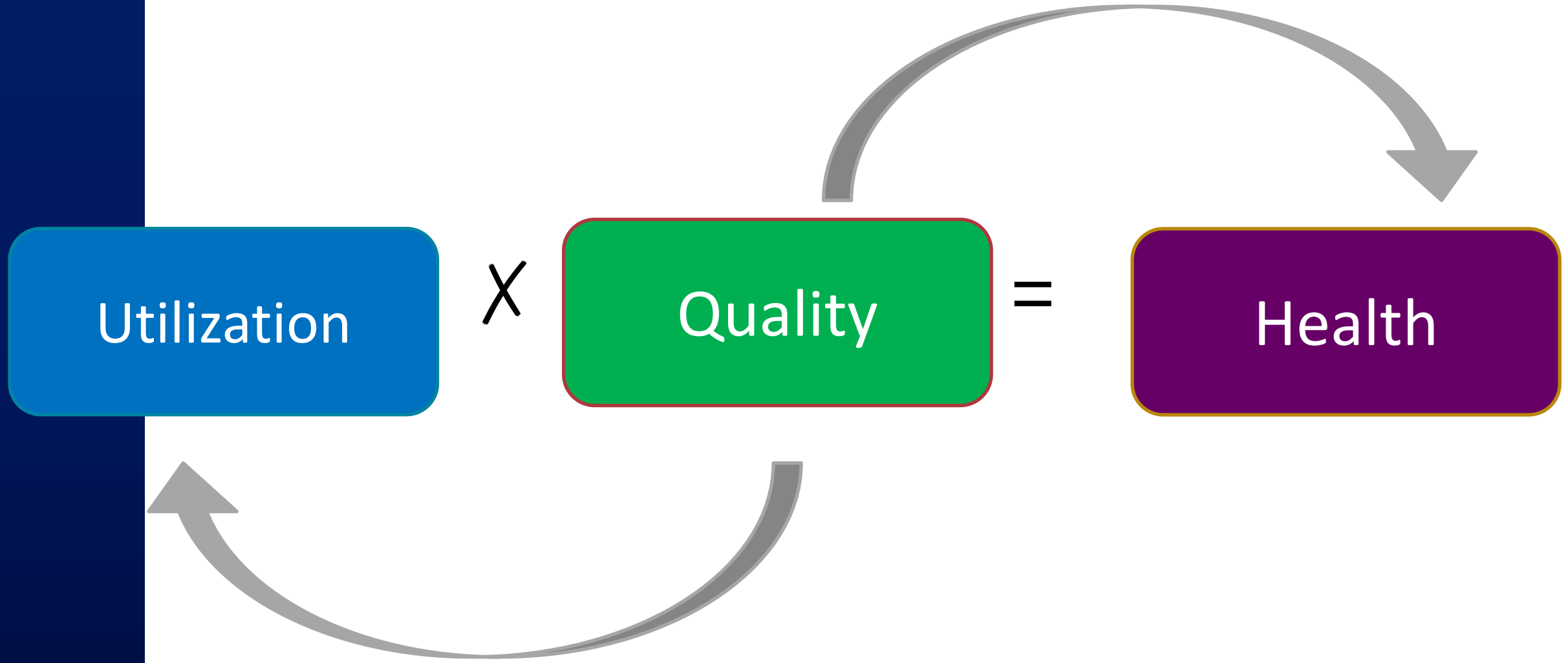
1. Eleen Ekanem, MOH Nigeria
2. Hudson Balidawa, MOH Uganda
3. Abdulkadir Ibrahim, NEPWHAN Nigeria
4. Stella Kentutsi, NAFOPHANU Uganda
5. Martin Msukwa, ICAP South Africa

Quality of Care is Paramount

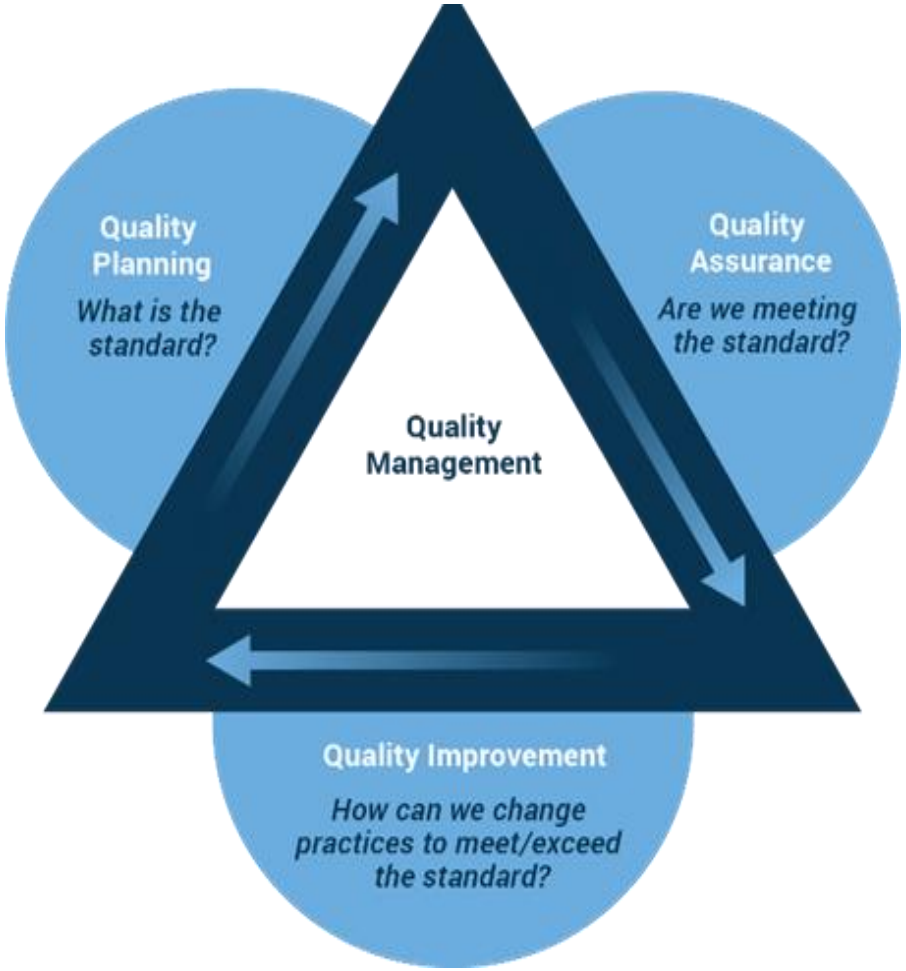
“The right to health is meaningless without good quality care, because health systems cannot improve health without it.”

- 2018 Lancet Global Health Commission on High Quality Health Systems

Quality is the essential element in the formula for Patient Centered Care



QM Community of Practice: Vision, Goal and Objectives



Vision: To enhance the quality of DSD programs using modern QI approaches, ultimately improving outcomes and satisfaction for ROCs

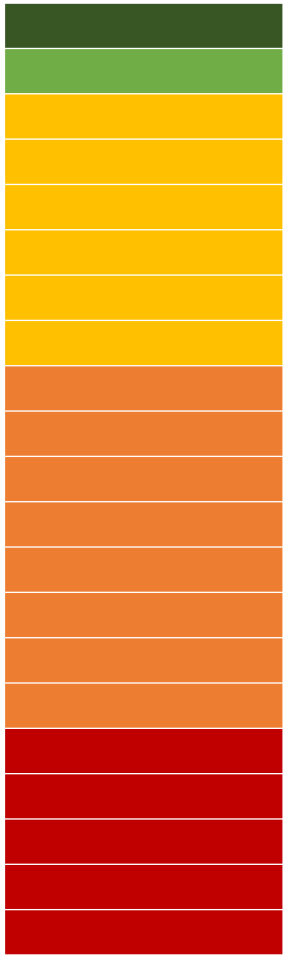
Goal: To embed quality and QI in the delivery of DSD

Objectives

To support countries to develop country-specific DSD quality standards, indicators and tools	To support countries to conduct routine quality assessments of DSD programs	To use the results to design DSD-specific quality improvement projects for DSD service delivery

2023 Treatment Dashboard Capability Maturity Model Quality Domain Operational Definition and Results

2023 results stacked by stage



Neither national quality standards nor a services quality assessment (SQA) tool for differentiated treatment (DART) model have been developed and neither is currently in development.	National quality standards and a SQA tool for DART models have been developed but no evaluations of quality using the standards have been completed in the past year OR the SQA tool has been used in the past year but fewer than 50% of facilities assessed met or exceeded national standards	The SQA tool has been used to conduct at least one evaluation of DART quality in the past year, and at least 50% of facilities assessed met or exceeded national quality standards	The SQA tool has been used to conduct at least one evaluation of DART quality in the past year, and more than 75% of facilities assessed met or exceeded national quality standards	The SQA tool has been used to conduct at least one evaluation of DART quality using a nationally representative sample in the past year, and more than 75% of facilities assessed met or exceeded national quality standards

These 4 countries will provide updates during the annual meeting

	CQUIN Dashboard 2022	CQUIN Dashboard 2023
Burundi		
Cameroon		
Cote d'Ivoire		
DR Congo		
Eswatini		
Ethiopia		
Ghana		
Kenya		
Lesotho		
Liberia		
Malawi		
Mozambique		
Nigeria		
Rwanda		
Senegal		
Sierra Leone		
South Africa		
Tanzania		
Uganda		
Zambia		
Zimbabwe		

Key Points

- Scores improved in 11 countries and regressed in 1 country
- 5 countries are still in the red stage, which means that they do not have national quality standards or tools for differentiated HIV treatment (DART)
- 9 countries are still in the orange stage, which means they either have not assessed DART quality or that < 50% of facilities assessed met quality standards
- Nigeria achieved light green and Uganda achieved dark green!

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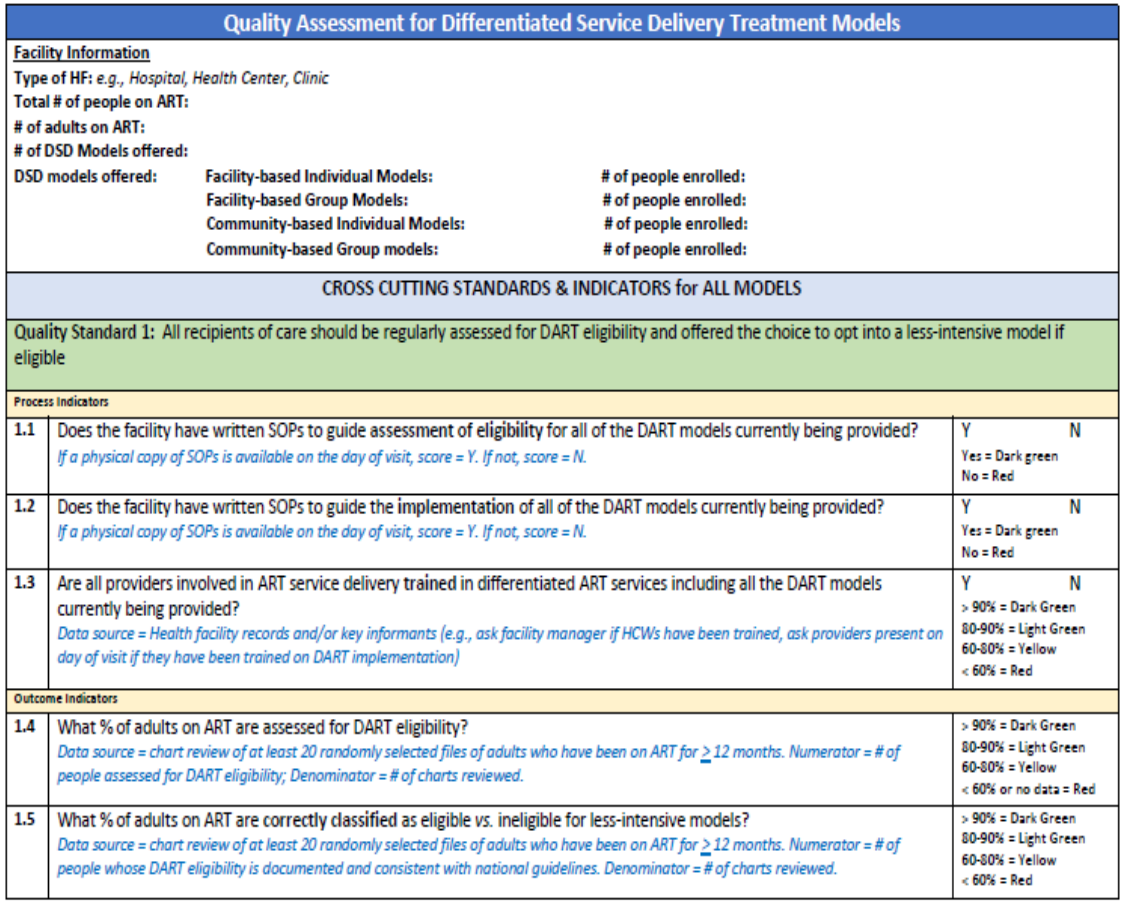
2023: Current Progress

- By 2023**, 16/21 countries** had formally adopted national quality standards for DART, moving out of the “red” (least mature) stage in the quality domain
- **Quality standards: 5 countries** still need to develop national quality standards and indicators for DART services
- **Quality assessment:** 7 countries were unable to conduct their DART quality assessments this year due to funding, human resource and other challenges
- **Quality improvement:** 7 countries are conducting quality assessments and improvement activities and are in various stages of achieving standards
  - Many countries are unable to link improvement initiatives to improvement in data which reflect both the delivery and the experience of care
- **Quality Achievement:** Nigeria and Uganda have achieved light green and dark green respectively

DART Quality Standards and Assessment Toolkit

- The quality assessment tool includes 11 core quality standards for a range of DART models including fast track refill, facility-based ART clubs, community-based ART groups and overall cross-cutting standards.
- Each individual standard has a set of assessment questions intended to weigh general processes which would indicate that a health facility is able to achieve the standard or where they could focus to achieve the standard.
- Individual assessment questions are associated with a color-coded score (i.e., red, yellow, green)
- Countries adapt the tool for their own setting- there is no one "CQUIN" standard
- Tool is located on the CQUIN website HERE



Quality Assessment for Differentiated Service Delivery Treatment Models

Facility Information

Type of HF: *e.g., Hospital, Health Center, Clinic*
Total # of people on ART:
# of adults on ART:
# of DSD Models offered:

DSD models offered:	**Facility-based Individual Models:**	**# of people enrolled:**
	Facility-based Group Models:	**# of people enrolled:**
	Community-based Individual Models:	**# of people enrolled:**
	Community-based Group models:	**# of people enrolled:**

CROSS CUTTING STANDARDS & INDICATORS for ALL MODELS

Quality Standard 1: All recipients of care should be regularly assessed for DART eligibility and offered the choice to opt into a less-intensive model if eligible

Process Indicators		
1.1	Does the facility have written SOPs to guide assessment of **eligibility** for all of the DART models currently being provided? *If a physical copy of SOPs is available on the day of visit, score = Y. If not, score = N.*	Y N Yes = Dark green No = Red
1.2	Does the facility have written SOPs to guide the **implementation** of all of the DART models currently being provided? *If a physical copy of SOPs is available on the day of visit, score = Y. If not, score = N.*	Y N Yes = Dark green No = Red
1.3	Are all providers involved in ART service delivery **trained** in differentiated ART services including all the DART models currently being provided? *Data source = Health facility records and/or key informants (e.g., ask facility manager if HCWs have been trained, ask providers present on day of visit if they have been trained on DART implementation)*	Y N > 90% = Dark Green 80-90% = Light Green 60-80% = Yellow < 60% = Red
Outcome Indicators		
1.4	What % of adults on ART are assessed for DART eligibility? *Data source = chart review of at least 20 randomly selected files of adults who have been on ART for ≥ 12 months. Numerator = # of people assessed for DART eligibility; Denominator = # of charts reviewed.*	> 90% = Dark Green 80-90% = Light Green 60-80% = Yellow < 60% or no data = Red
1.5	What % of adults on ART are **correctly classified** as eligible vs. ineligible for less-intensive models? *Data source = chart review of at least 20 randomly selected files of adults who have been on ART for ≥ 12 months. Numerator = # of people whose DART eligibility is documented and consistent with national guidelines. Denominator = # of charts reviewed.*	> 90% = Dark Green 80-90% = Light Green 60-80% = Yellow < 60% = Red

Uganda Established Quality Domains and Standards for DSD with biannual assessments and QI interventions

S1.1 DSD SUPPORT SUPERVISION ELIGIBILITY

STANDARD: Each health facility to be supervised should have received an onsite training in Differentiated Service Delivery models of HIV and TB services in Uganda using the Ministry of Health curriculum

S1.2 DSD POLICY GUIDELINES

STANDARD: Each health facility has policy guidelines and tools for the implementation of Differentiated Service Delivery models of HIV and TB services in Uganda.

S1.3 DSD CAPACITY BUILDING

STANDARD: Each health facility having received an onsite training in Differentiated Service Delivery models of HIV and TB services in Uganda, had 1st DSD mentorship within 1 month of the onsite DSD training, held a CME on DSD during the last 3 months and conducted a DSD group leaders training.

S1.4 LEADERSHIP FOR DSD

STANDARD: Each health facility has identified a Focal Person to coordinate DSD activities with clear terms of reference and has reviewed its data and mapped (WHO and WHERE) the sub populations in their catchment area.

S1.5 GOVERNANCE FOR DSD

STANDARD: Each health facility has identified a committee to oversee DSD implementation and committee meets regularly to review progress.

S1.6 DIFFERENTIATED SERVICE DELIVERY - HIV TESTING SERVICES (HTS)

STANDARD: Differentiated HIV Testing Services should be provided by all sites in order to achieve the 1st 90 of the UNAIDS 2020 targets

S1.7 DIFFERENTIATED SERVICE DELIVERY – CLIENT AWARENESS CREATION

STANDARD: Each health facility should create awareness to all its HIV clients to guide informed decision making and facilitate DSD uptake by the clients.

S1.8 DIFFERENTIATED SERVICE DELIVERY - HIV CARE AND TREATMENT (C&T)

STANDARD: Differentiated HIV Care and Treatment Services should be provided by all sites in order to accelerate attainment of the 2nd and 3rd 90 of the UNAIDS 2020 targets

S1.9 M&E FOR DSD IMPLEMENTATION

STANDARD: Each health facility has monitor and evaluate DSD implementation through establishing and maintaining an M&E system for DSD.

S1.10 COMMUNITY DIFFERENTIATED CARE AND TREATMENT MODEL

STANDARD: Each health facility should be able to provide a variety of differentiated care and treatment approaches including CDDPs and or CCLAD

S1.11 CQI FOR DSD IMPLEMENTATION

STANDARD: Each health facility should continuously improve the quality of differentiated HIV services through employing and implementing CQI approaches.

Under each section there's a section overview, and guidance of the thematic areas and standards to be assessed. At the end of each section a score is applied, which feeds into a final dashboard.

Nigeria NACP has adapted the quality toolkit and is managing the assessment process via a PowerBI system

NASCP
Federal Ministry of Health

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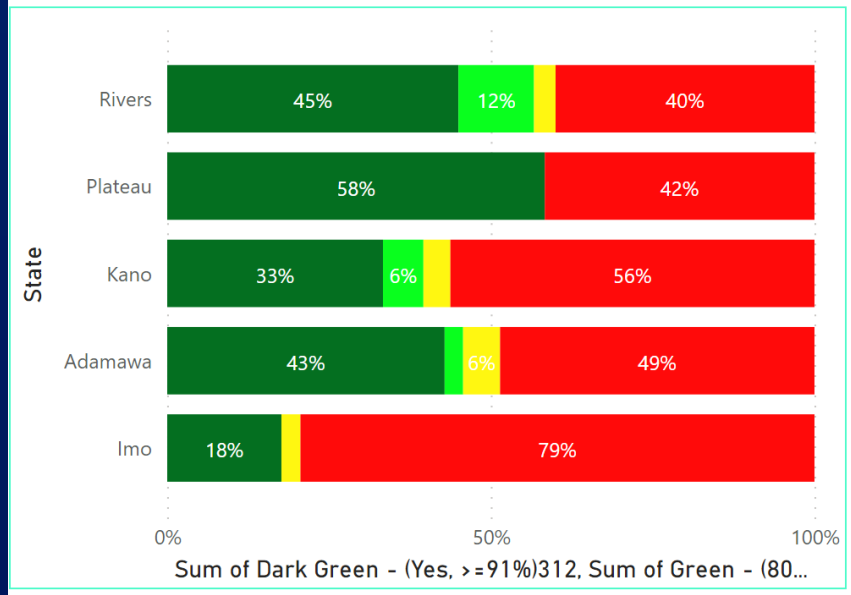
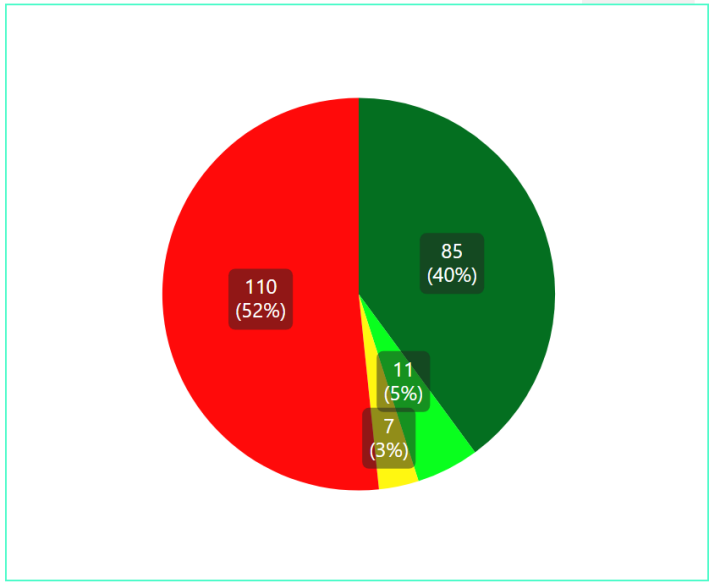
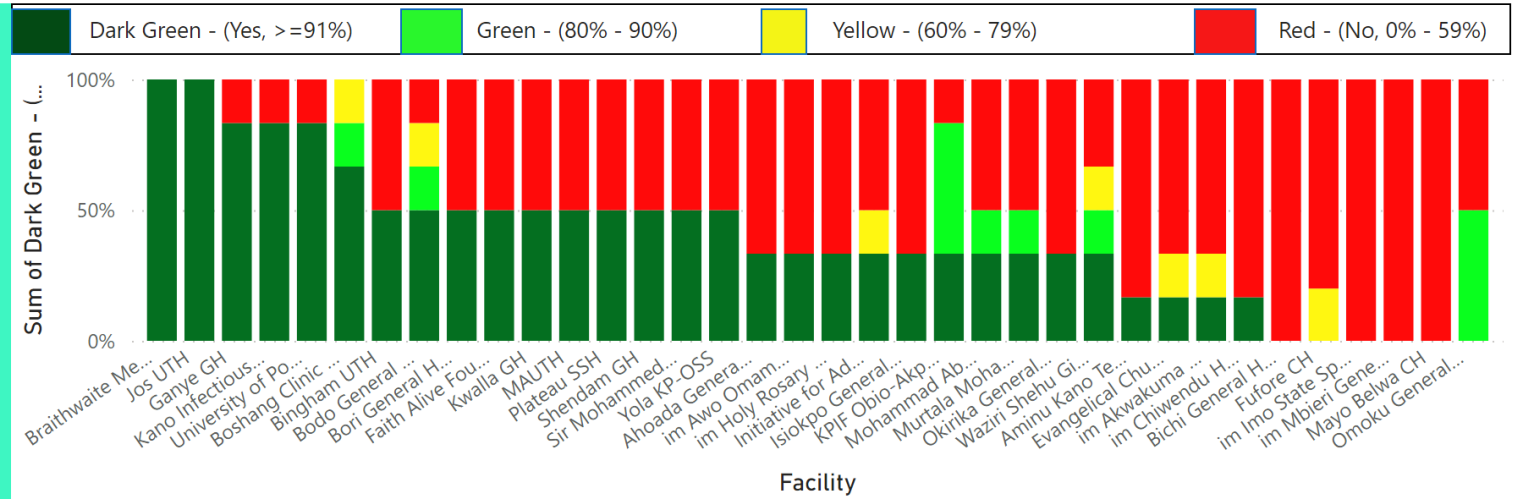




Does the facility have written SOPs to guide the assessment of eligibility for all of the DART models currently being provided?

Does the facility have written SOPs to guide the implementation of all of the DART models currently being provided?

Are all providers involved in ART service delivery trained in differentiated ART services including all the DART models currently being provided?



Highlights from QM Community of Practice 2023

- Conducted routine QM CoP meetings for ongoing exchange of best practices and examples of QI for DART projects
- Continued support for countries interested in developing standards and indicators for DART
- Co-creation of the *Recipient of Care Satisfaction Toolkit* with the Community Advocacy Network, QM, CE, and M&E CoPs in April 2023
- Development of quality standards and indicators for AHD, KP and TPT services

What's next for 2024?

- ✓ Ongoing support for countries seeking to improve quality scores on CMM include adaptation of DART quality standards and toolkit, development of implementation strategies and evaluation of progress
- ✓ Support finalization of additional quality standards and assessment tools under review for TPT and KP
- ✓ Support countries to adapt, implement and scale up DART, AHD, KP and TPT standards
- ✓ Consolidate the different standards and assessment tools to create one DSD QM toolkit
- ✓ Expand data management and analysis processes for quality assessments and QI project data

What can I do to get out of the RED ZONE? How can I get to GREEN? Ideas for Action Planning

- Please join us for the Quality Management Community of Practice break out session 11a. on **Wednesday Nov 15th from 10:30 to 12pm**
- We will take a deeper dive into specific steps needed to achieve higher scores and will learn more from Rwanda, Ghana and Malawi
- Next, we will be learning from both Nigeria and Uganda and what steps they took to achieve their green scores

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Thank you!