

HTN/HIV facility and community models of integration: Case study from Nigeria

National AIDS, Viral Hepatitis and STIs Control Program (NASCP)

Treatment Care and Support Branch

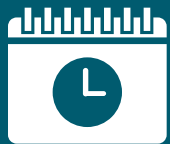
17 April 2024

Integrating non-HIV Services into HIV Programs

April 15-18, 2024 | Nairobi, Kenya



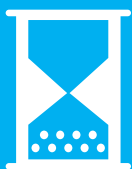
Presentation Outline



Country Profile



Overview of Differentiated Service Delivery/Differentiated ART Models



HIV/NCD (HTN) in Nigeria

HIV/HTN implementation planning



HIV/NCD (HTN) tools and documentation

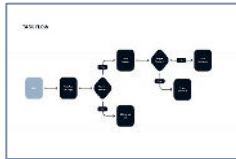
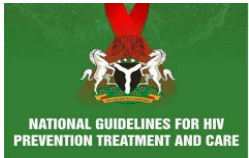


HIV/HTN implementation challenges, gaps and remedial strategies



Country Profile

<p>Est. Population</p> <p>226.2M</p> <p>NPC – Dec. 2023</p>	<p>Est. PLHIV Burden</p> <p>2.0M</p>	<p>HIV Prevalence (15-49 yrs)</p> <p>1.3%</p> <p>NAIIS 2018</p>	<p>Nigerians on ARV Treatment</p> <p>1.74M</p> <p>2023 Programmatic data</p>
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2016
First recommended DSD packages of care in the 2016 National Guidelines for HIV/AIDS Prev, Tx and Care

2018
Conducted a Situational Analysis on DSD

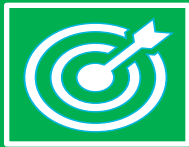
2019
Establishment of a Country DSD Task Team (now DSD subcommittee)

2019-2021
Development of DSD Operational Manual, Training Guides/Slides and Job Aids

Nov. 2021
Nigeria Joined CQUIN

July 2021
Finalization of DSD Operational Manual, Training Guides/Slides and Job Aids

Overview of Differentiated Service Delivery in Nigeria



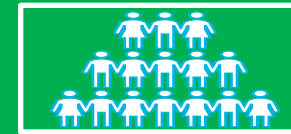
Eligibility Criteria for Less Intensive DSD Models (LIM)

- Age > 5yrs
- On ART for at least one year
- Clinically stable with no OIs
- Adherent with an optimal understanding of lifelong treatment
- Virally suppressed
- CD4+ counts > 200 cells/mm³
- Has no adverse drug reactions



Facility-based LIM Models:

- Fast-track
- Decentralization (Hub and Spoke)
- After hours
- Weekend and Public holidays
- Facility ART group: HCW-led
- Facility ART group: Support group-led
- Child/Teen/Adolescents club (Peer managed)
- Mother infant pair/Mentor mother led



Community-based LIM Models:

- Community Pharmacy ART refill
- One Stop Shop (OSS)
- Home delivery
- Community ART Refill Group: HCW- led
- Community ART Refill Group: PLHIV- led
- Adolescent Community ART/ peer-led groups

HIV/NCD (HTN) in Nigeria – NCD package of care



Screening and diagnosis



Linkage to quality and affordable NCD treatment



Person centered care and support



Long-term follow-up and monitoring

HIV/NCD (HTN) in Nigeria – Model design & implementation

Engage	Engage key stakeholders in the State; SMOH, SPHDA, HMB, and Facility Heads, to get their buy in and support.
Assess	Assess baseline service readiness and for HIV/NCD program integration using the WHO SARA tool to identify available resources, barriers and enablers of integration.
Design	Design context-specific and evidence based NCD Integration Model that will meet the individual needs of clients
Equip	Equip facilities with basic NCD equipment and technologies to support the provision of NCD services to all eligible clients
Train	Capacity building of multidisciplinary team of facility staff using a training curriculum adapted from CDC Hypertension Management Training Curriculum, with inputs from the WHO hypertension treatment guidelines and Nigeria hypertension treatment protocol.
Monitor	Strengthen the HIV HIS to monitor NCD services along service provision cascades and ensure availability of quality data to guide program implementation.

HIV/NCD (HTN) in Nigeria – Facility Models

The One Stop Shop Model of HIV/NCD Integration



- **Integrated health messaging and promotion** during health talk – HIV/NCD/COVID-19/TB and other Public health priorities

- **Screening, diagnosis, and treatment** using evidence-based, simplified diagnosis and treatment protocol.

- **Co-appointment, co-management, and co-dispensing** of NCD and HIV medications

- **Use of integrated Case Management Teams** to provide patient centred care and ensure continuity of treatment.

- **Integrated Health Information System** to generate quality data for use in decision making

The One Stop Shop Model of HIV/NCD Integration

WHEN	WHERE	WHO	WHAT
SDPs/ART Initiation/Next Clinic visit	Facility(One stop shop Centers)	Triage Nurses, CHEWS, ,Case Managers	Integrated health messaging and promotion during health talk and the use of Case management Team to support Patient centered Care and continuity of Treatment.
SDPs/ART Initiation/Next Clinic visit	Facility(One stop shop Centers)	ART Doctors, Nurses, Pharmacists and CHEWs	Screening, diagnosis, and treatment using evidence-based, simplified diagnosis and treatment protocol.
SDP's/ART Initiation/Next Clinic visit	Facility(One stop shop Centers)	ART Doctors, Nurses, Pharmacists and CHEWs	Co-appointment, co-management, and co-dispensing of NCD and HIV medications

HIV/NCD (HTN) in Nigeria – Facility DSD

WHEN

- NCD services will be provided at every clinic visit.
- PLHIV with NCDs will be monitored closely (monthly) until stable.
- PLHIV stable on ART and NCD will be given MMD3.

WHERE

- All NCD services will be provided within the ART clinic (one-stop-shop).

WHO

- NCD services will be provided by ART Doctors, Nurses, Pharmacists and CHEWs, that are trained on NCD management.

WHAT

- NCD services include nutritional and lifestyle counselling, screening, diagnosis, treatment, clinical monitoring and adherence support.

HIV/NCD (HTN) in Nigeria – Community DSD Models

WHEN

- NCD services will be provided to PLHIV in the community at every clinical contact.

WHERE

- Community DSD settings such as community pharmacy & PLHIV support group meetings

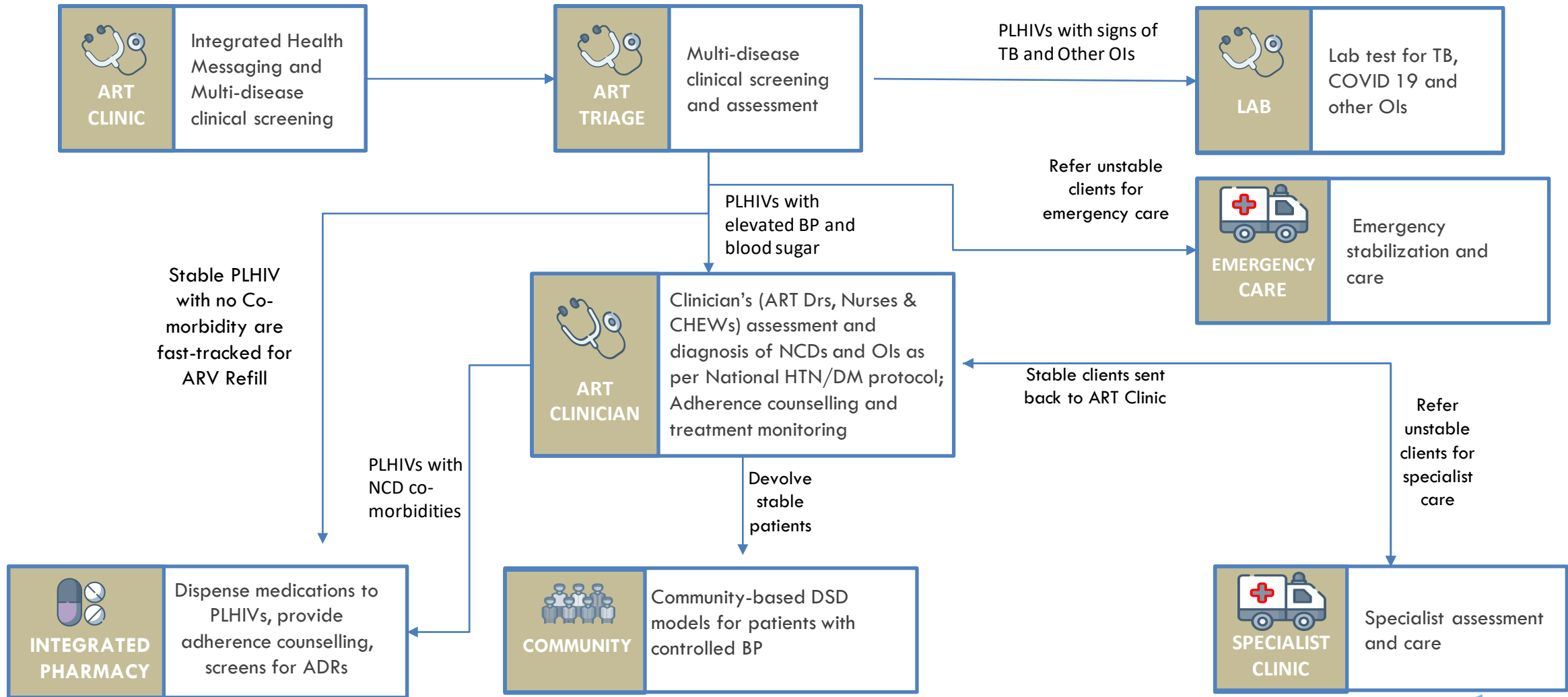
WHO

- NCD services will be provided by ART Doctors, Nurses, Pharmacists and CHEWs, that are trained on NCD management.

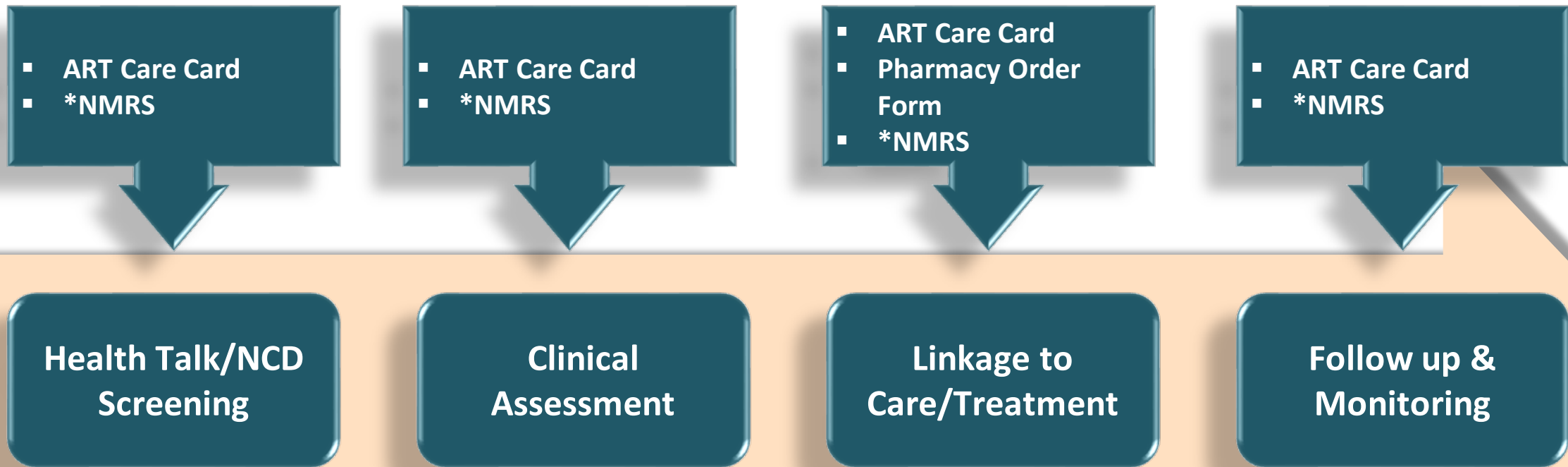
WHAT

- NCD services include nutritional and lifestyle counselling, screening, diagnosis, referral/linkage to treatment and adherence support.

HIV/NCD (HTN) in Nigeria – Facility model clinic flow



HIV/NCD (HTN) in Nigeria – HIV/NCD Integration Service Flow



*NMRS – Nigerian Medical Record System

Indicators for HIV/HTN Reporting

S/N	INDICATORS	NUMERATOR	DENOMINATOR	SOURCES
1	HTN_SCRN	Number of adult PLHIV screened for hypertension with documented systolic and diastolic blood pressure	Number of adult PLHIV who visited the clinic during the reporting period	NMRS, Screening Register
2	HTN_DIAG	Number of PLHIVs diagnosed with hypertension (BP >140/90 mmHg)	Number of PLHIV screened for hypertension during the reporting period	NMRS, Screening Register
3	HTN_TX	Number of PLHIV diagnosed with hypertension and started on treatment for hypertension during the reporting period	Number of PLHIVs diagnosed with hypertension (BP >140/90 mmHg)	NMRS, NCD Monitoring Register
4	HTN_CURR	Number of PLHIV diagnosed with hypertension who are currently on treatment for hypertension	N/A	ART Care Card, NMRS, NCD Monitoring Register
5	HTN_CTRL	Number of PLHIV on hypertension treatment whose blood pressure is controlled at the last clinic visit	Number of PLHIV diagnosed with hypertension who are currently on treatment for hypertension	ART Care Card, NMRS, NCD Monitoring Register
6	HTN_TX_VLS	Number of PLHIV on hypertension treatment who are virally suppressed	Number of PLHIV diagnosed with hypertension who are currently on treatment for hypertension	ART Care Card, NMRS, NCD Monitoring Register

HIV/NCD(HTN) Tools: ART Care Card

E1	E2	E3	E4	E5	E6	E7	E8	E9	E10	E11	E12	E13	E14	E15
Visit Date: Tick if scheduled	Duration (in Months) on ART	Weight (kg)	Height / Length (cm)	BMI/ MUAC (insert code)	Blood Pressure (mmHg) Adults Only	Pregnancy/ Breastfeeding Status	Family Planning (write code)	Functional status (write code)	WHO Clinical Stage	TB Screening Status (write code)	Cryptococcal Screening Status	Cervical Cancer Screening Status (Write code)	Hepatitis Screening Result	Other OIs/ Other Problems
												Treatment (write code)		
<input type="checkbox"/>														
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E15: NCD (HTN/DM) Diagnosis. E.g. HTN, Known HTN on Rx, Known HTN not on Rx

HIV/NCD(HTN) Tools: ART Care Card

E19	E20	E21	E22	E23		E24	E25	E26	E27			E28	E29	E30	E31
ARV DRUGS		COTRIMOXAZOLE		TB Preventive Therapy			Other Drugs Prescribed	CD4 Tick if ordered. Enter result when available	Viral Load Tick if ordered a. Enter result when available b. Indication for Viral Load test c. EAC for VL >1000copies/ml (enter code)			Other Tests Done	Consult Hospitalise Refer	Next Appointment Date	Signature
Regimen	Adherence	Dose	Adherence	Medication <i>(Insert code)</i>	Dose	Adherence <i>(Insert code)</i>			E27a	E27b	E27c				
								<input type="checkbox"/>	<input type="checkbox"/>						
								<input type="checkbox"/>	<input type="checkbox"/>						
								<input type="checkbox"/>	<input type="checkbox"/>						
								<input type="checkbox"/>	<input type="checkbox"/>						
								<input type="checkbox"/>	<input type="checkbox"/>						

E25: NCD Medications prescribed. E.g. Amlodipine 5mg, Losartan 50mg

**E28: Random/Fasting Blood Sugar
E29: Referral**

HIV/NCD(HTN) Tools: Combined Pharmacy Order Form

3. Anti-TB Drugs

RHZE/RH	<input type="checkbox"/> Kit	<input type="checkbox"/> _____ OD	<input type="text"/>	<input type="text"/>	<input type="text"/>
Rifabutin	<input type="checkbox"/> 150 mg	<input type="checkbox"/> _____ 3ce/week	<input type="text"/>	<input type="text"/>	<input type="text"/>
Others	<input type="checkbox"/>	_____	<input type="text"/>	<input type="text"/>	<input type="text"/>

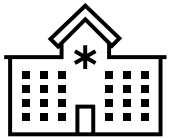
4. Drugs for other OIs or non-HIV related conditions

Document anti-hypertensive/diabetic medications

_____ <i>Ordered by (Print Physician's Name)</i>	_____ <i>Signature & Date</i>	/ /20	_____ <i>Dispensed by (Print Pharmacist's Name)</i>	_____ <i>Signature & Date</i>
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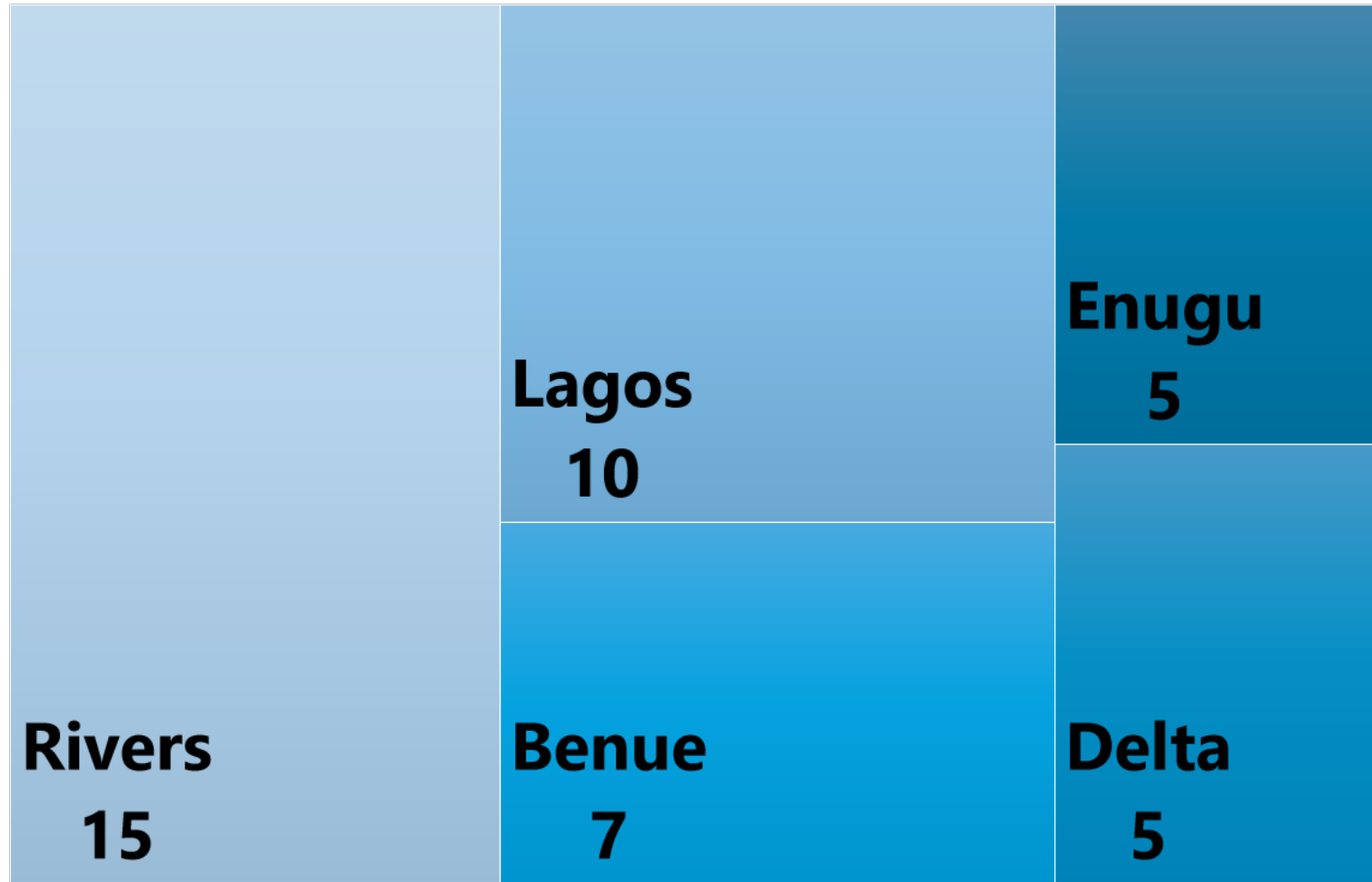
_____ <i>Counseled by (Print Adh.Counselor's Name)</i>	_____ <i>Signature & Date</i>	/ /20	_____ <i>Picked up by (Print Name)</i>	_____ <i>Signature & Date</i>
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2023 Data on HIV/NCD Integration into DSD – Number of Facilities with Integrated HIV/NCD Care

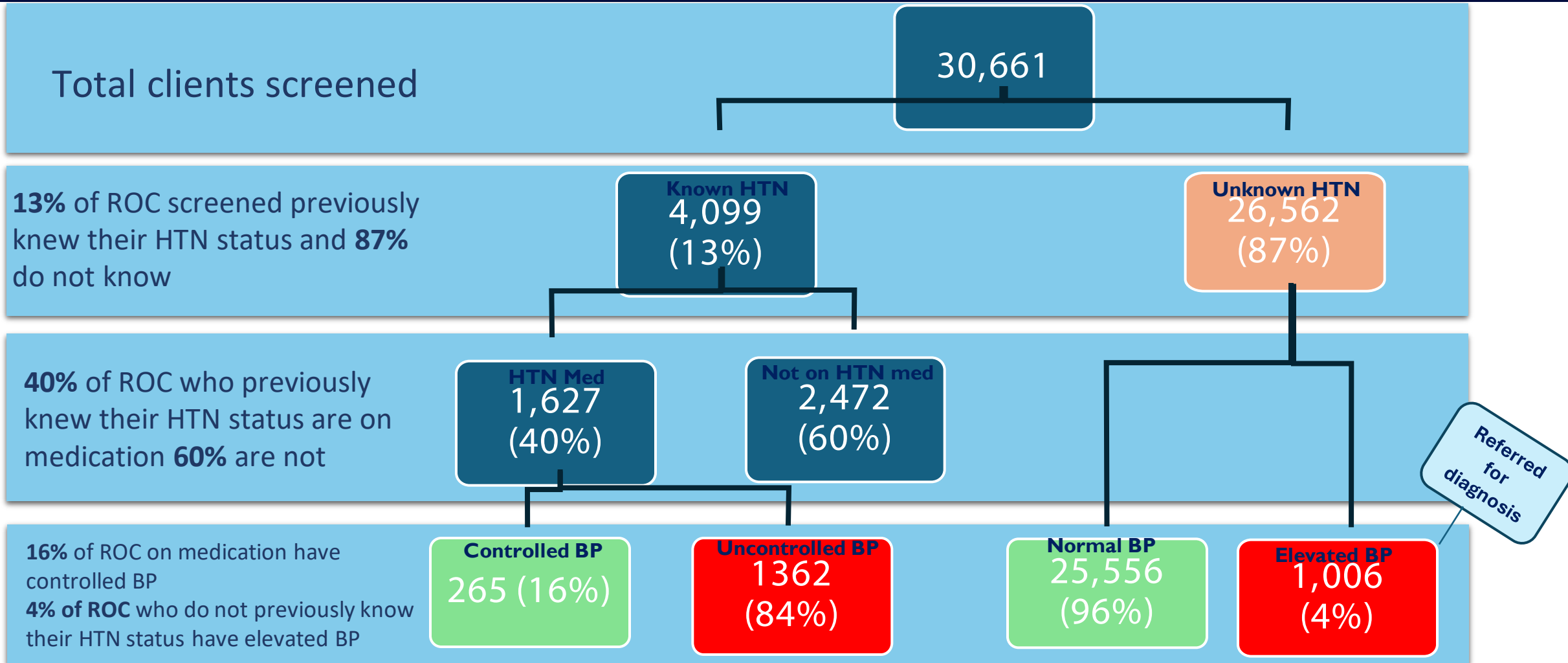


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Facilities where implementation has taken place



2023 Data on HIV/NCD Integration into DSD - Number of Recipients of Care (ROCs) screened



Challenges and remedial strategies

Challenges/gaps

- **Limited Human Resources for health due to occasional staff attrition (Japa Syndrome)**
- **Poor/Weak referral linkages**
- **Inadequate funding to procure the relevant NCD medications as well as build the capacity of the HCW and ensure effective monitoring**
- **Over-dependence on importation of almost all HIV response equipment, consumables & supplies**
- **Political instability**
- **Security challenges in some states**

Remedial strategies

- **Recruitment of more HCW and improvement of their working conditions to reduce the staff attrition rate**
- **Strengthen and improve referral linkages across all the levels of care**
- **Improve and increase funding and Government commitment to health care commodities.**
- **Encourage local production and sourcing of HIV and NCD commodities and products in the country**

Acknowledgements

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ICAP Global Health

CQUIN

NEPHWAN

Thank You!

