

Use of an SQA tool to improve HTS Quality in Ghana

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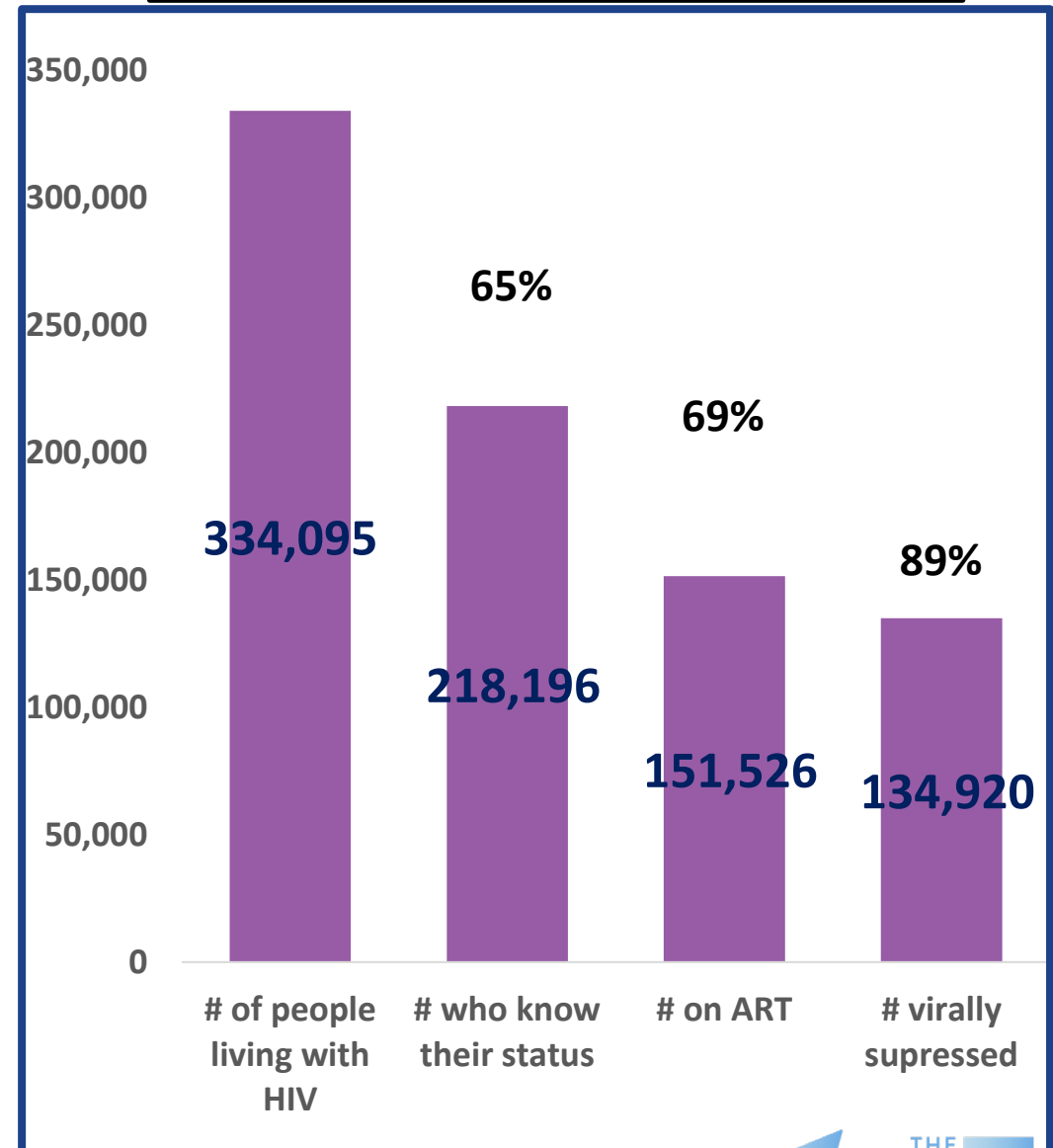
Outline

- Background and Progress towards 95:95:95
- dHTS Service Quality Assessment
- Development/adaptation process
- Assessment Process
- Findings/Results
- Key lessons
- Use of Findings/Next steps

Background-1

- Ghana adopted the WHO recommendations to “TREAT ALL” in 2016 towards achieving 90-90-90 (UNAIDS targets)
- Innovative & pragmatic approach like DSD to help achieve these targets; commenced in 2018 across the cascade of care
- Despite significant scale-up, first 95 is still far from being attained
- There is a need to focus on the Coverage and quality of dHTS implementation

95-95-95 Status (Spectrum 2023)



Background-2

Country Context

	Female Adult (15+)	Male Adult (15+)	Total
1st 95	74	53	65%
2nd 95	71	65	69%
3rd 95	90	87	89%
	Female	Male	Total
HIV Prevalence	2.02	1.04	1.53
HIV Incidence	0.12	0.06	0.09

Priority Sub-populations

Sub population	Prevalence	n	%
MSM	26.1%	47,757	43%
TG	48%	2,945	3%
FSW	4.6%	60,049	54%
Total (N)		110,751	100

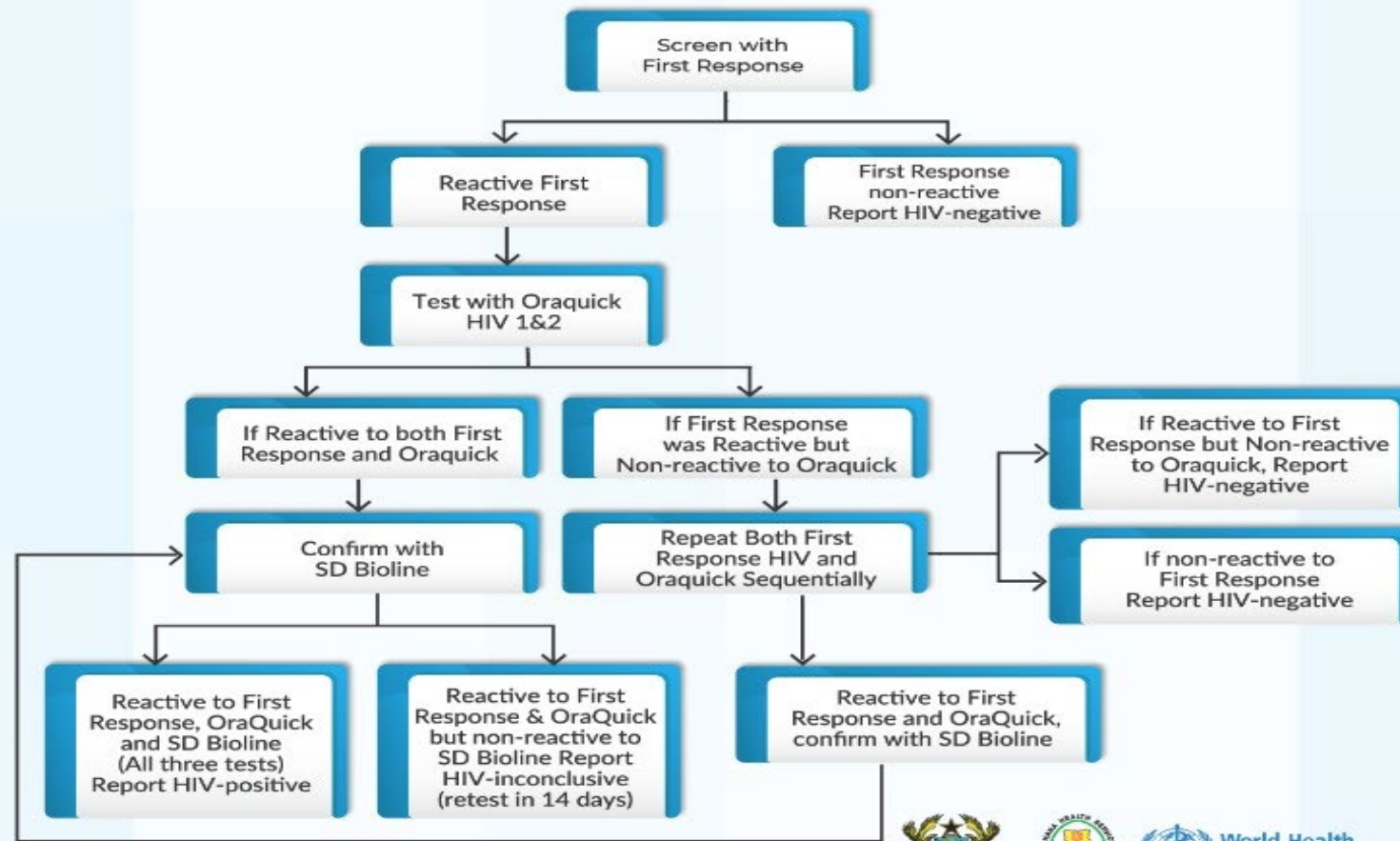
Spectrum 2023

Background: Ghana is implementing the 3-test strategy

- Ghana is implementing the 3-test strategy as recommended by WHO since 2020
- The 3-test strategy applies to both PBFW and the general population
- A 3-test strategy reduces misdiagnosis of HIV, hence increasing the validity of test results (correct results)

Background: Ghana is implementing the 3-test strategy

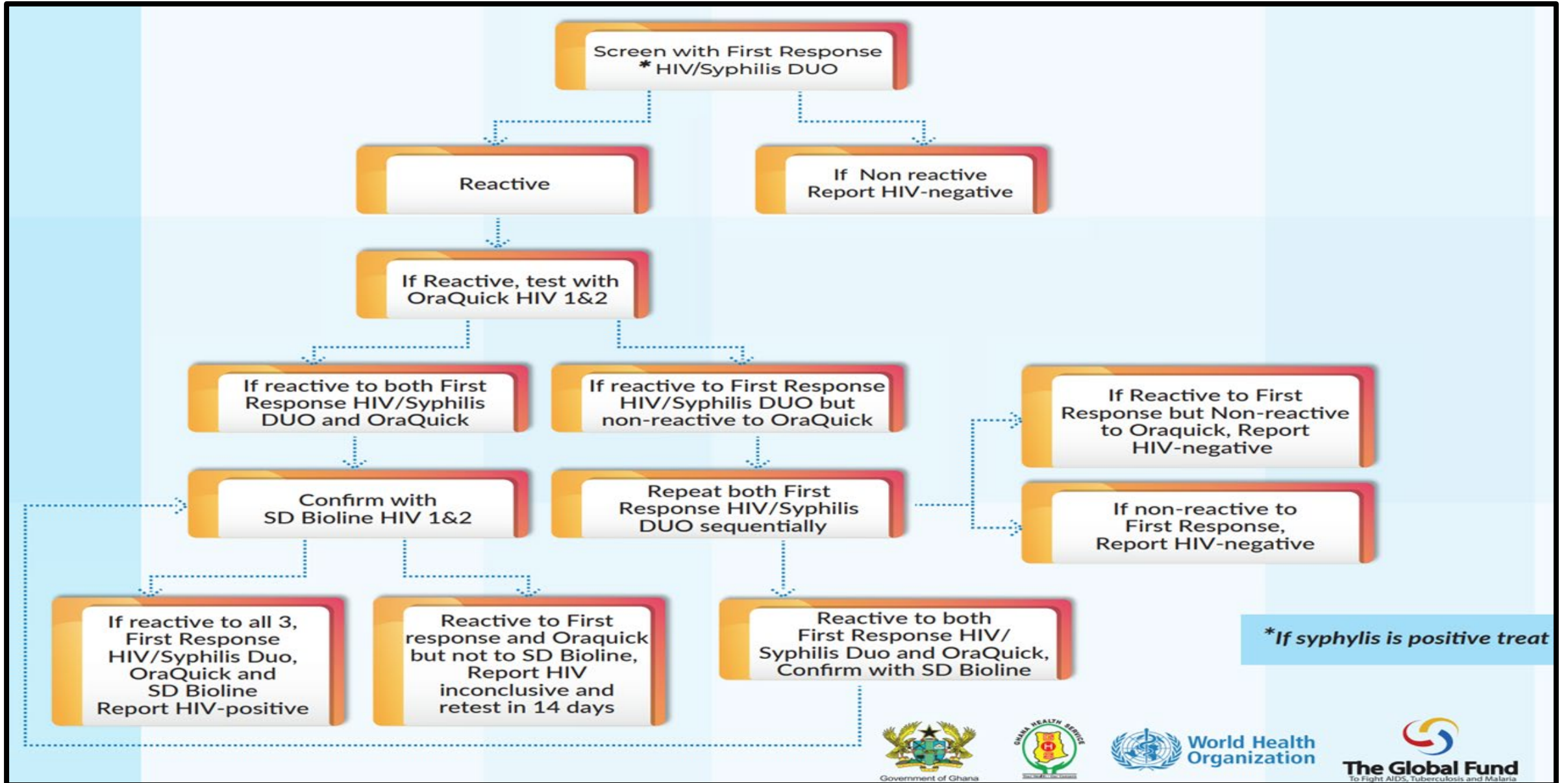
HIV TESTING ALGORITHM FOR NON-PREGNANT WOMEN AND GENERAL POPULATION



World Health Organization



3-Test Strategy Among Antenatal Clients



Ghana's dHTS Quality Assessment Tool 1: **Domains**



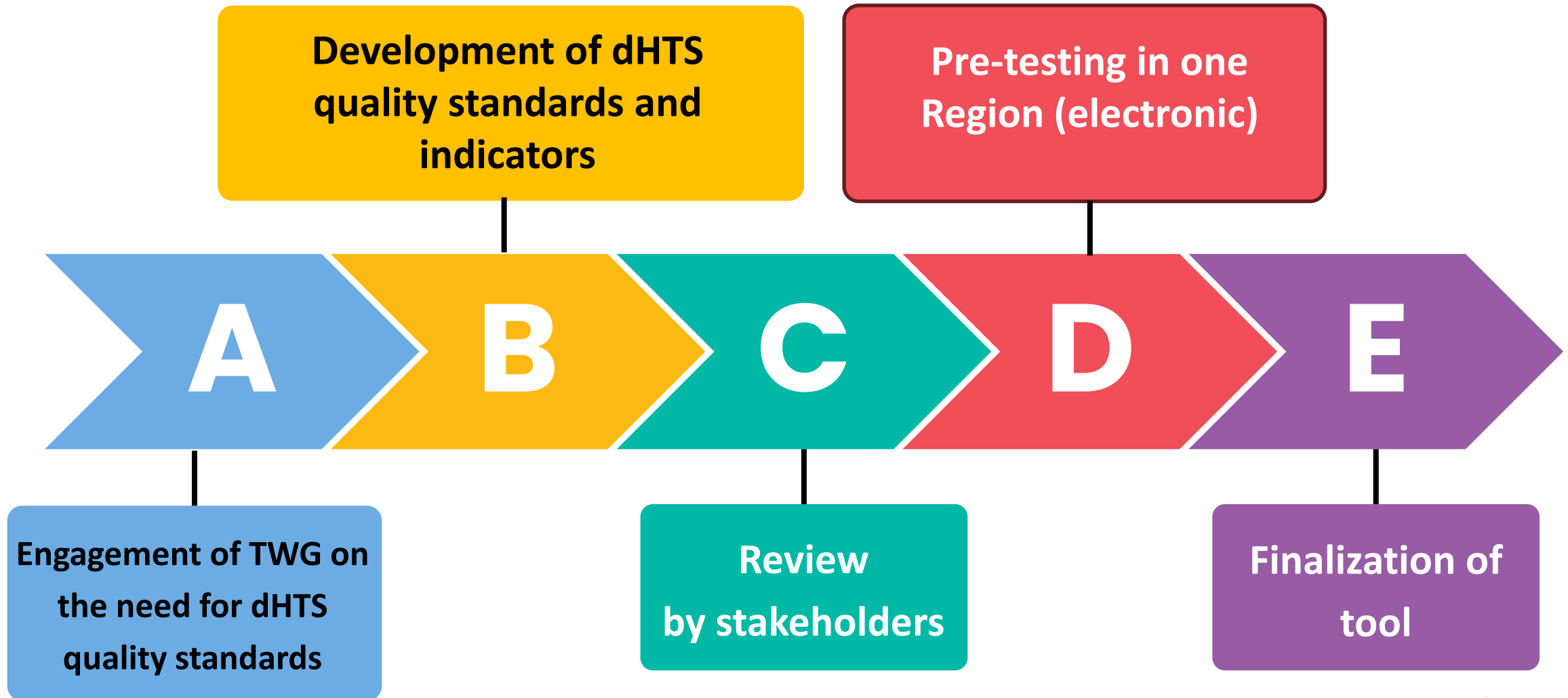
Domain	Quality standards
Cross-cutting	1. Availability of SOPs
	2. Training on dHTS
	3. Access to dHTS
	4. Commodity availability(RDTs, ARVs(onsite/referral), prevention packages(onsite/referral)
	5. Timely Data capture
Mobilization	1. Use of risk-population-specific approaches to identify clients for testing

Ghana's dHTS Quality Assessment Tool 2: Domains

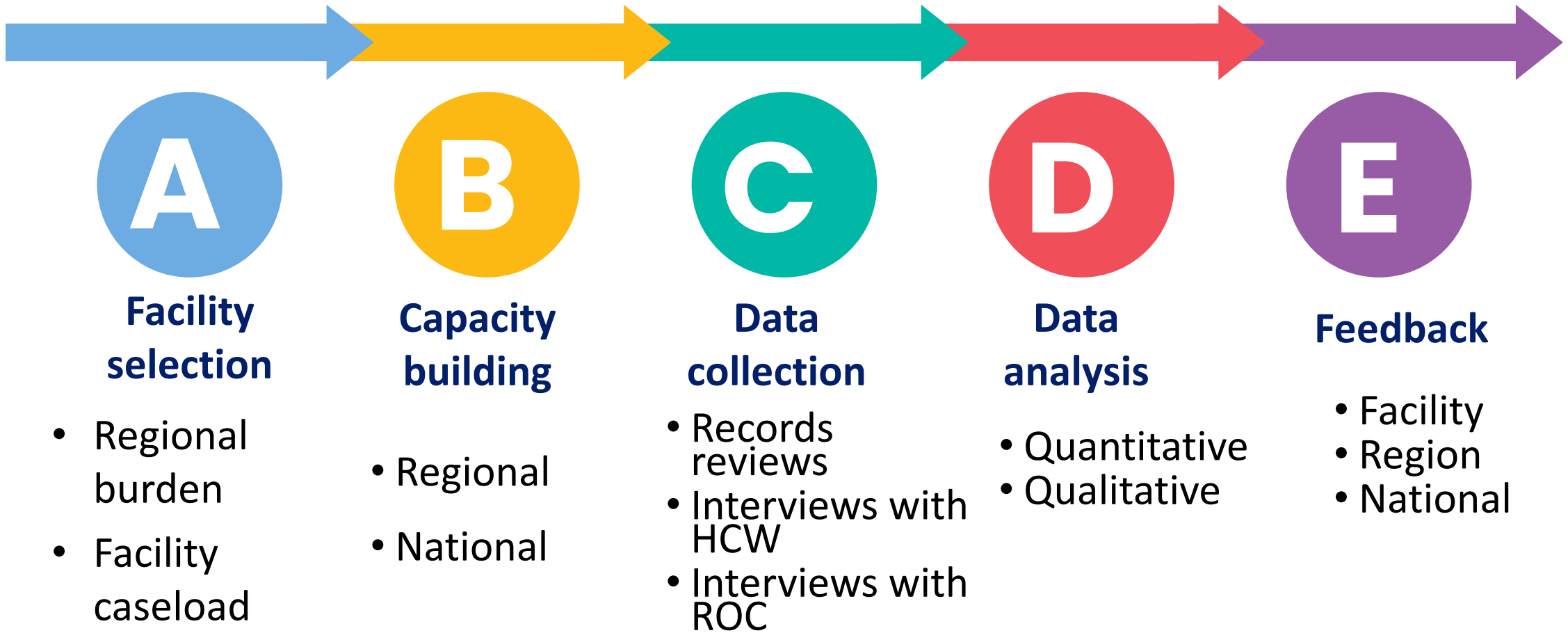


Domain	Quality standards
Testing	1. Adherence to 5 Cs of HIV testing
	2. Adherence to three-test algorithm
	3. HIV risk assessment
Linkage	1. Timely linkage to treatment (within 7 days)
	2. Timely linkage to prevention (immediate)
Summary	Challenges, innovations, recommendations

Adaptation Process (July-Dec 2022)



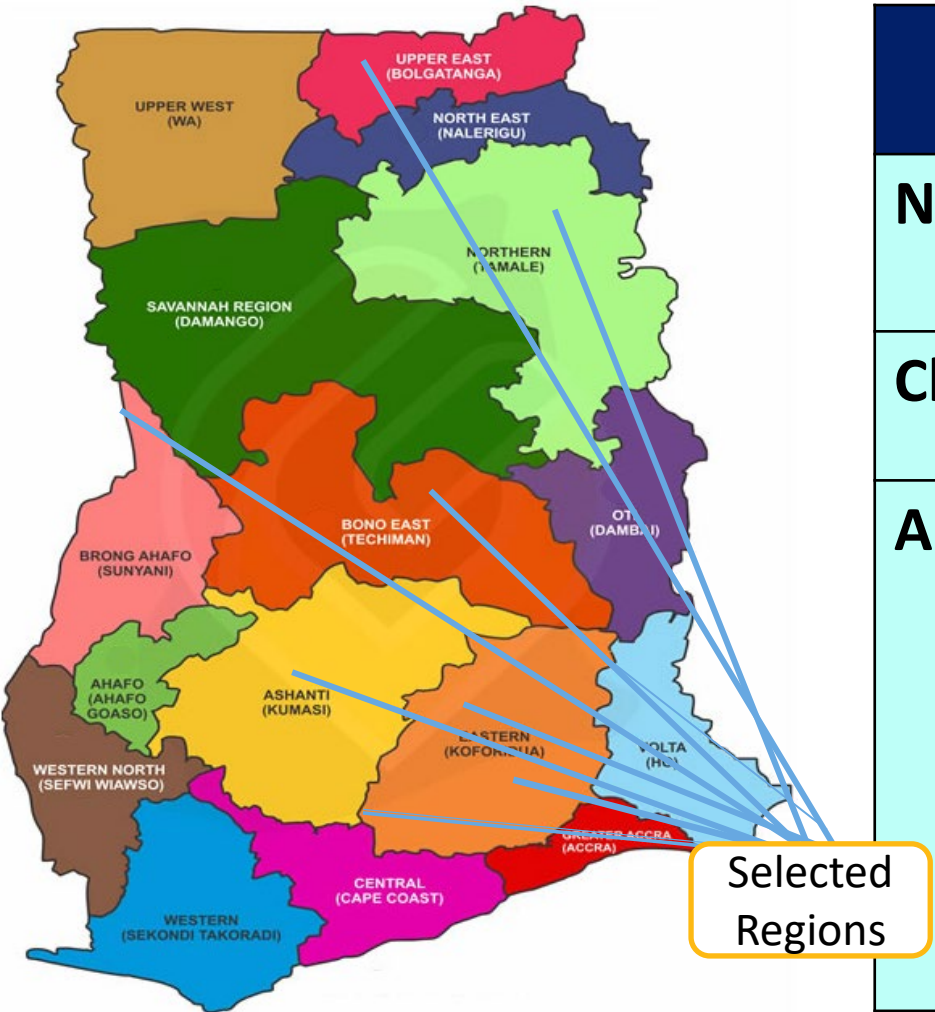
Assessment Process



Scoring

Color score	Percentage	Description
Dark green	>90	Exceeds standards
Green	80-90	Meets standards
Yellow	60-80	Needs improvement
Red	<60	Needs urgent remediation

Assessment sites

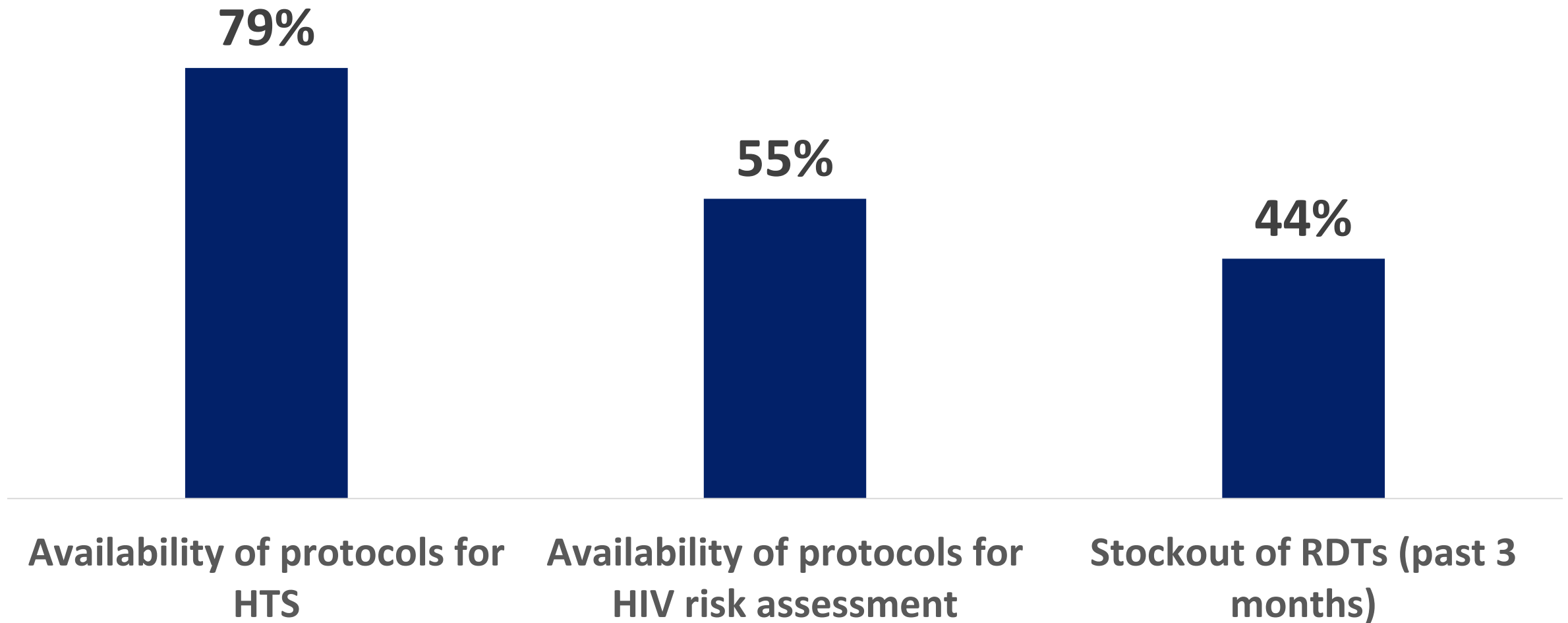


Number of Regions	9 (out of 16)
Number of Facilities	198 out of 733(27%)
Client Load	116,281(75%)
Approaches (selected)	<ul style="list-style-type: none"> • HIVST • Index testing • Risk network testing • Testing at multiple entry points



Findings

Cross-cutting-1/3: Proportion of facilities with protocols and stockout of RDTs



Cross-cutting 2/3: Proportion of facilities by various modes of access to HIV testing services

Targeted Community HIV testing

51%

Testing at multiple entry points

96%

Availability of HTS on weekends

89%

Availability of HTS overnight

78%

Cross cutting-3/3: Proportion of facilities achieving documentation standards

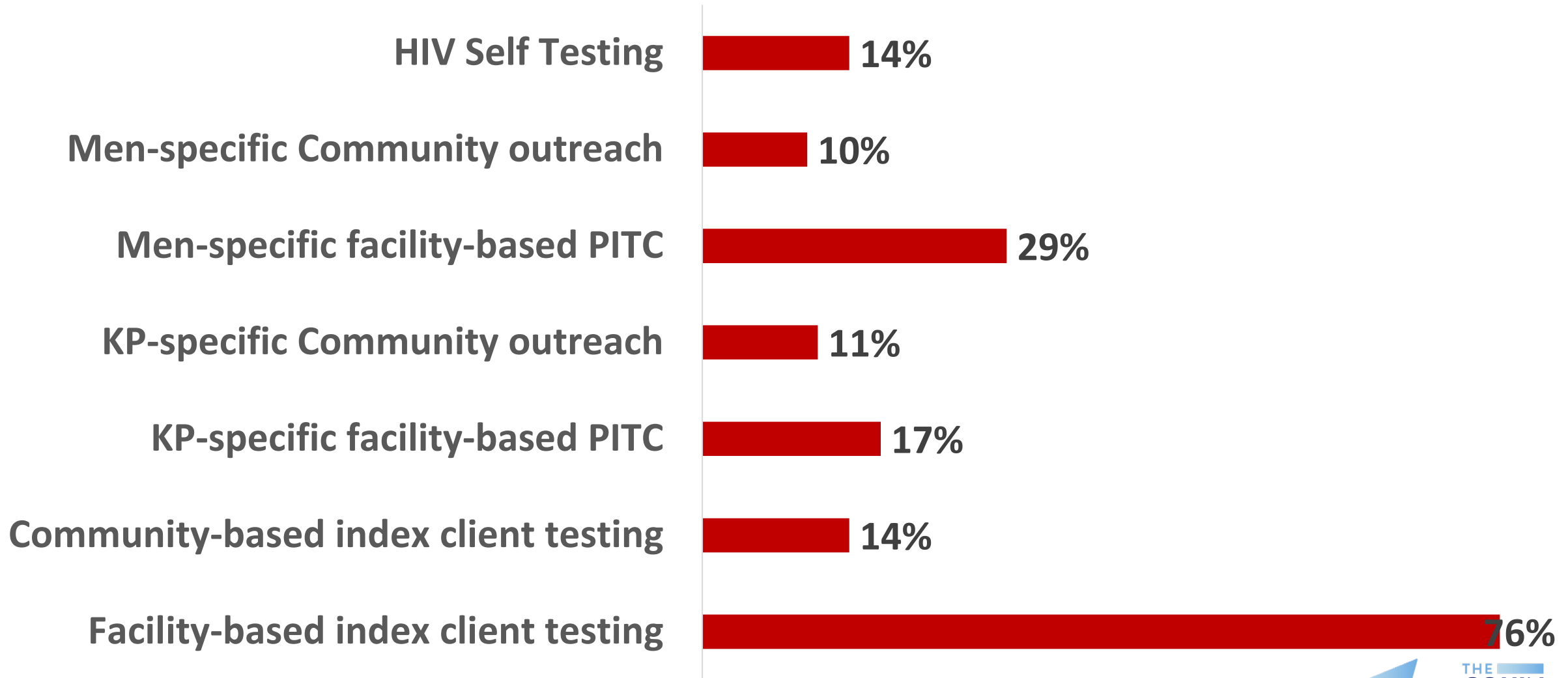


Proportion of entry points with appropriate data collection tools

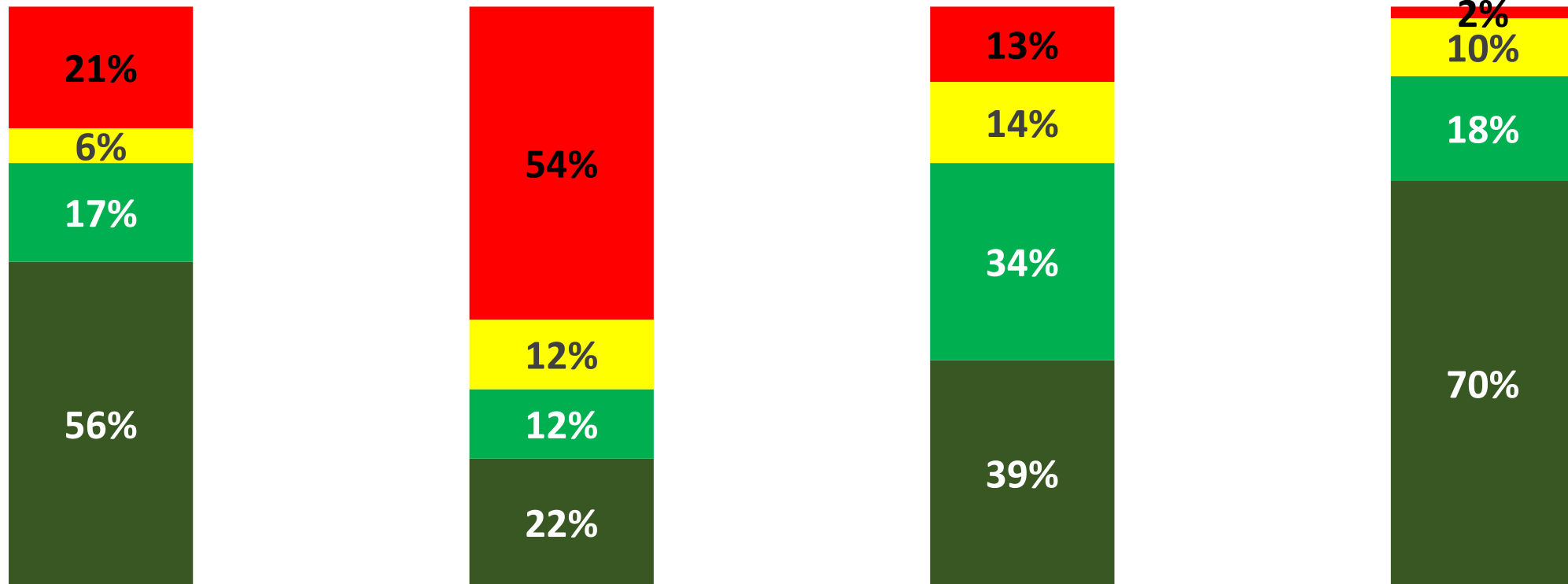
Proportion of tests in Registers collated into DHIS

■ >90% ■ >80-90% ■ 60-80% ■ <60%

Mobilization: proportion of facilities by mobilization approaches



Testing: Proportion of facilities achieving standards



Staff who adhere to 3-test algorithm

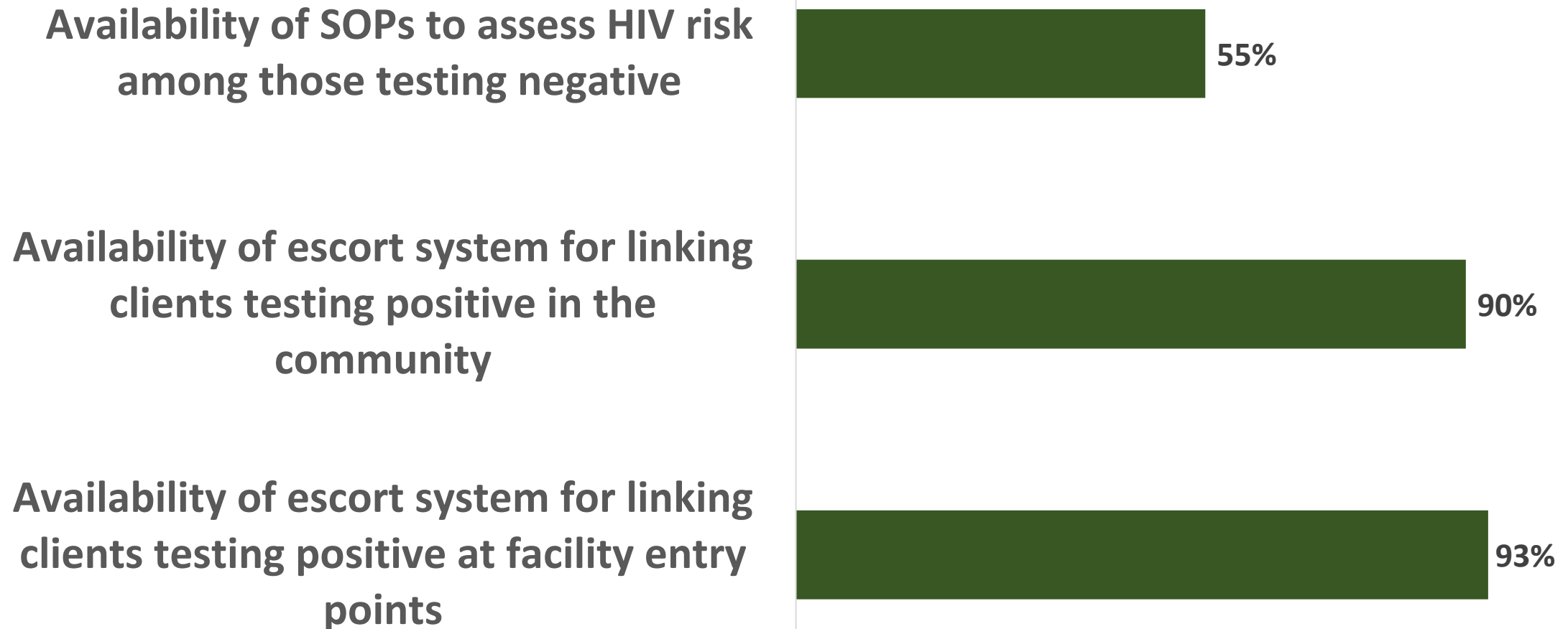
Entry points that confirm clients testing reactive at the same place

Entry points with adequate privacy and lighting

Adherence to 5Cs

■ >90% ■ >80-90% ■ 60-80% ■ <60%

Linkage to treatment and prevention services: proportion of facilities achieving standards



Impact

Domain	Standards(Past 3 months)	Percentage of facilities meeting standards			
		>90%	80-90%	60-80%	<60%
Mobilization	Newly diagnosed clients offered index testing	45%	29%	11%	15%
Linkage	Newly diagnosed clients linked to care	78%	13%	9%	0
Linkage	Proportion of high-risk HIV negative clients linked to prevention	0%	8%	12%	80%

Use of findings

Level	Relevance of outputs
National	<ol style="list-style-type: none">1. Evidence to guide intervention prioritization (GF grant)2. Knowledge gaps will influence training content3. To provide protocols to service delivery sites
Regional	<ol style="list-style-type: none">1. Human Resource gaps identified to be filled2. Evidence provided on areas to focus on during routine monitoring
Facility level	<ol style="list-style-type: none">1. Baseline data guided the selection of facility-level CQI interventions2. Resource gaps identified to be addressed by facility management

Case Study: Using QI to improve linkage to prevention for KPs in 5 facilities (March – November 2023)

Domain	Standards(Past 3 months)	Percentage of facilities meeting standards			
		>90%	80-90%	60-80%	<60%
Linkage	Proportion of high-risk HIV negative clients linked to prevention	0		0	100%

- Using the dHTS quality standards, we conducted an assessment to determine the level of adherence to the standards in facilities as described before
- During the baseline assessment, some facilities scored <60 in the linkage to prevention domain
- We purposively selected 5 facilities and trained health workers on basics of mitigating stigma among KPs

Collaborative Network activities

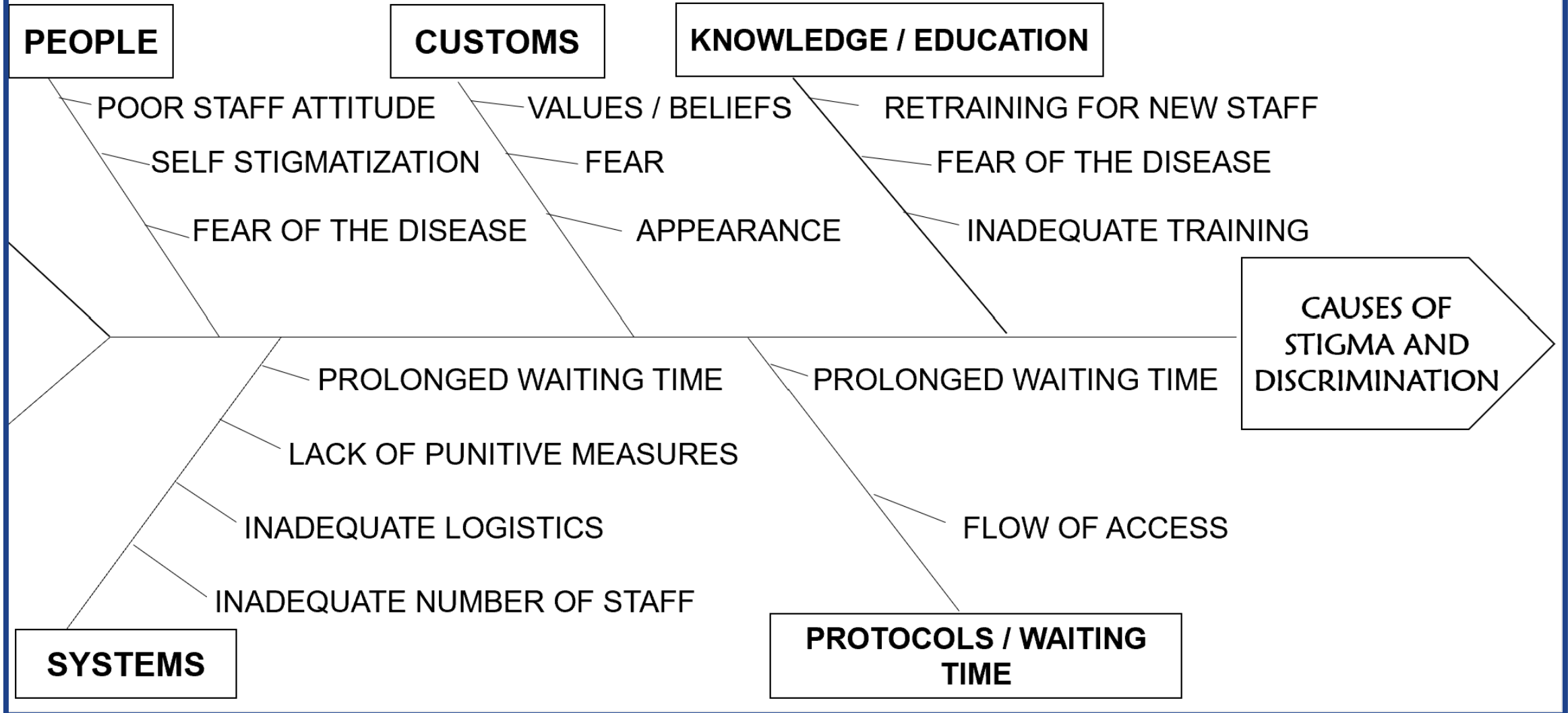
Facility-specific interventions

- Formation of facility stigma reduction teams (including management and ROC)
- Use of QI approaches to identify barriers
- Team orientation
- Data collection
- Monthly meetings

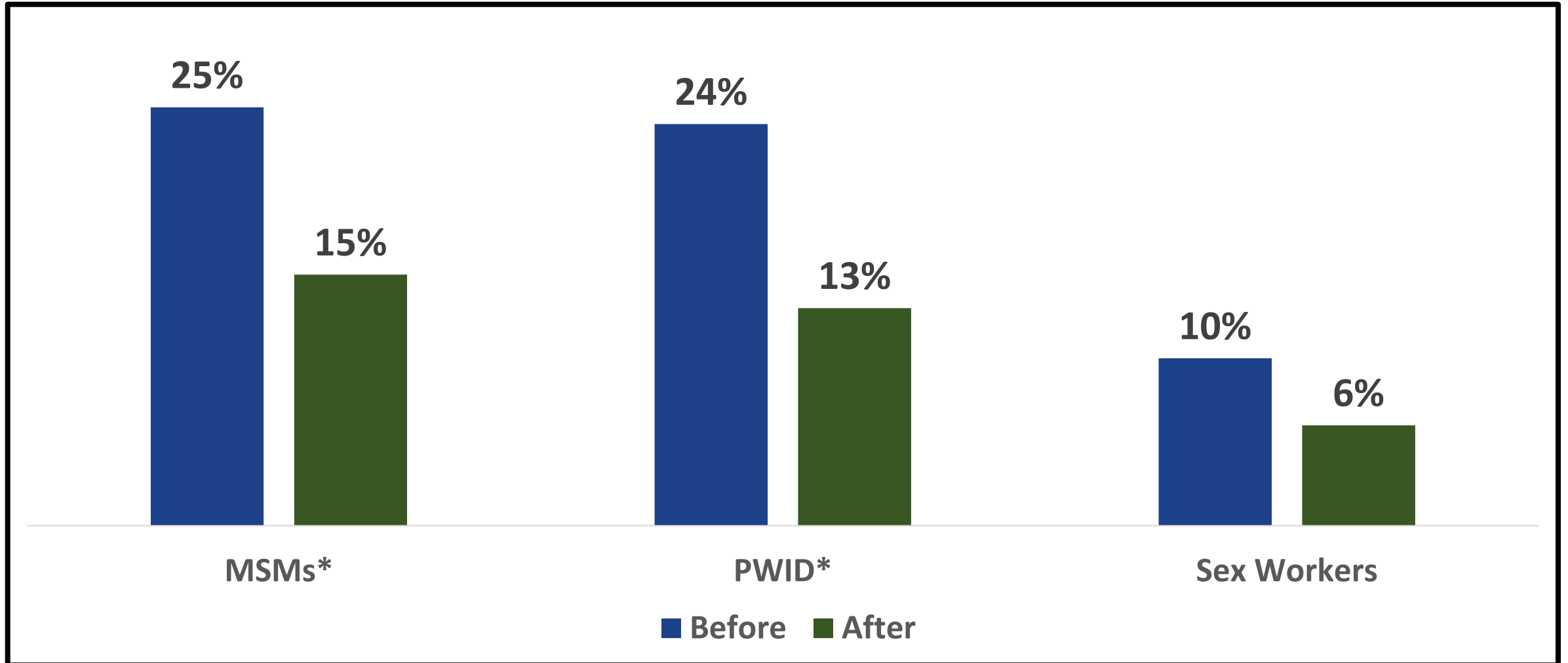


Collaborative Network activities: Collaborative meetings

STIGMA REDUCTION PLAN USING QI APPROACH



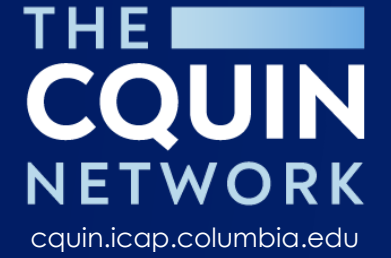
Results: Change to care for KPs (Before and After)



Effect of QI collaborative on linkage to prevention

Domain	Standards(Past 3 months)	Percentage of facilities meeting standards			
		>90%	80-90%	60-80%	<60%
Linkage	Proportion of high-risk HIV negative clients linked to prevention	0	60%	20%	20%

- After six months of implementation, the proportion of facilities meeting standards for linking KPs improved from 0 to 60%
- Next steps will focus on broadening the scope of QI collaboratives



Thank You!

