

Optimizing Quality in Differentiated Service Delivery: Driving Sustainable, Person-Centered HIV Care

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Session Objectives

- Review overall quality management data from the quality domain on the **AHD, DART, and dHTS** capability maturity models.
- Describe **current DSD quality management strategies**, including standards, indicators, assessments, and progress of QI projects from 2 country examples.
- Describe the findings of the **Service Quality Assessment tool survey** focused on identifying various SQA tools in use across network member countries.
- To foster cross-country collaboration and knowledge exchange on incorporating PCS-focused, regional, and global **HIV program sustainability goals within Quality Management for HIV program models**.

Session Outline

Session moderators

- Nicholas Leydon (GF) and
- Abdulkadir Ibrahim, NEPWHAN Nigeria



Framing remarks:

- Onyekachi Ukaejiofo, ICAP/ CQUIN NG



Case Study Presentations

- Irenio Gaspar, Mozambique MOH
- Patrick Twesigye, Uganda MOH



Panel Discussion

- Irenio Gaspar, Mozambique MOH
- Patrick Twesigye, Uganda MOH
- Lilian Mworeko, ICWEA
- Lorenço Sumbane PLASOC Mozambique
- Teklu Lemessa Tiksie, Ethiopia MoH



Framing Remarks

Onyekachi Ukaejiofo



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 Domains Overview in CQUIN CMMs

2024 dHTS CMM: Quality of Clinical Services

Clin. Services						
2023	2024					
		Neither national quality standards nor a service quality assessment (SQA) toolkit for dHTS have been developed and neither are currently in development.	National quality standards and a SQA toolkit for dHTS models have been developed but no evaluations of quality using the standards have been completed in the past year OR <u>less than 50%</u> of HIV testing sites assessed met or exceeded national standards	The SQA toolkit has been used to conduct at least one evaluation of dHTS quality in the past year, and <u>50-75%</u> of HIV testing sites assessed met or exceeded national quality standards	The SQA toolkit has been used to conduct at least one evaluation of dHTS quality in the past year, and <u>more than 75%</u> of HIV testing sites assessed met or exceeded national quality standards	The SQA toolkit has been used to conduct at least one evaluation of dHTS quality using a nationally representative sample in the past year, and <u>more than 75%</u> of HIV testing sites assessed met or exceeded national quality standards

2024 DART CMM: Quality of Differentiated Treatment

DART Quality							
2022	2023	2024					
			<p>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.</p>	<p>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</p> <p>OR the SQA tool has been used in the past year but fewer than 50% of facilities assessed met or exceeded national standards</p>	<p>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</p>	<p>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</p>	<p>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</p>

- In 2024, Kenya, Lesotho, Malawi, Nigeria, and South Africa maintained consistent dark/light green scores across all three quality components, showing stability compared to 2023.
- Mozambique has joined the dark/light green scores group across all 2024 CMM self-staging exercise components.
- Burundi continued to face challenges, remaining in the red across all three components in 2024.

How did countries fare in the quality domain of the dHTS CMM?

Countries	Quality of testing services					
	2023			2024		
	EQA/IQC	Proficiency Testing	Clinical Services	EQA/IQC	Proficiency Testing	Clinical Services
Burundi	Red	Red	Red	Red	Red	Red
Cameroon	Red	Red	Red	Orange	Yellow	Orange
Cote d'Ivoire	Orange	Orange	Orange	Orange	Light Green	Yellow
DRC	Orange	Light Green	Red	Orange	Orange	Red
Eswatini	Light Green	Light Green	Red	Light Green	Yellow	Dark Green
Ethiopia	Orange	Yellow	Orange	Orange	Orange	Orange
Ghana	Orange	Light Green	Red	Orange	Yellow	Yellow
Kenya	Yellow	Dark Green	Dark Green	Light Green	Light Green	Dark Green
Lesotho	Dark Green	Dark Green	Light Green	Dark Green	Dark Green	Dark Green
Liberia	Light Green	Red	Red	Orange	Light Green	Dark Green
Malawi	Dark Green	Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Mozambique	Orange	Orange	Orange	Light Green	Light Green	Dark Green
Nigeria	Light Green	Dark Green	Dark Green	Dark Green	Dark Green	Dark Green
Rwanda	Light Green	Light Green	Orange	Yellow	Yellow	Dark Green
Senegal	Orange	Red	Red	Orange	Red	Yellow
Sierra Leone	Orange	Yellow	Red	Orange	Yellow	Red
South Africa	Light Green	Light Green	Dark Green	Dark Green	Light Green	Dark Green
Tanzania	Yellow	Yellow	Red	Yellow	Yellow	Orange
Uganda	Dark Green	Dark Green	Dark Green	Yellow	Dark Green	Orange
Zambia	Orange	Yellow	Orange	Yellow	Light Green	Orange
Zimbabwe	Orange	Yellow	Orange	Light Green	Orange	Orange

DART and AHD Dashboard Results: 2023 and 2024

Quality of DART services			
Countries	2022	2023	2024
Burundi	Red	Orange	Orange
Cameroon	Red	Yellow	Yellow
Cote d'Ivoire	Orange	Yellow	Orange
DRC	Red	Yellow	Orange
Eswatini	Orange	Orange	Orange
Ethiopia	Red	Red	Orange
Ghana	Orange	Yellow	Yellow
Kenya	Orange	Orange	Orange
Lesotho	Red	Red	Orange
Liberia	Red	Red	Orange
Malawi	Red	Orange	Orange
Mozambique	Yellow	Yellow	Dark Green
Nigeria	Orange	Light Green	Orange
Rwanda	Yellow	Orange	Orange
Senegal	Red	Red	Red
Sierra Leone	Red	Orange	Orange
South Africa	Orange	Orange	Orange
Tanzania	Orange	Red	Orange
Uganda	Orange	Dark Green	Dark Green
Zambia	Orange	Red	Red
Zimbabwe	Orange	Orange	Orange

Quality of AHD Services			
Countries	2022	2023	2024
Burundi	Grey	Red	Orange
Cameroon	Grey	Orange	Yellow
Cote d'Ivoire	Red	Orange	Orange
DRC	Light Green	Dark Green	Dark Green
Eswatini	Red	Yellow	Orange
Ethiopia	Red	Red	Orange
Ghana	Grey	Orange	Yellow
Kenya	Red	Orange	Yellow
Lesotho	Grey	Red	Yellow
Liberia	Grey	Red	Orange
Malawi	Red	Dark Green	Dark Green
Mozambique	Yellow	Yellow	Dark Green
Nigeria	Orange	Yellow	Orange
Rwanda	Grey	Red	Orange
Senegal	Grey	Red	Red
Sierra Leone	Grey	Orange	Orange
South Africa	Grey	Orange	Orange
Tanzania	Yellow	Yellow	Orange
Uganda	Yellow	Dark Green	Dark Green
Zambia	Orange	Orange	Orange
Zimbabwe	Orange	Orange	Orange

Key Points

- Two countries (Mozambique and Uganda) achieved Dark Green in the Quality domain of the DART CMM.
- For the Quality domain of the AHD CMM, three countries (DRC, Malawi, and Uganda) sustained Dark Green scores from 2023 through 2024, with Mozambique joining them in 2024.
- Four countries (Lesotho, Liberia, Senegal, and Zambia) scored Red, indicating the absence of national quality standards or tools for differentiated HIV treatment (DART).
- These four countries will be priority countries in PY25, as they have consistently remained in the Red for the DART CMM.



Mapping the Landscape: A CQUIN Survey to Assess the Availability of MOH HIV Program Service Quality Assessments (SQA)

Overview of the MOH SQA Survey (Oct 2024)



Rationale: Within CQUIN member countries, the availability of SQAs across all HIV program areas remains unevenly documented. Understanding the availability of SQA tools and how assessments are conducted is critical for identifying gaps, improving accountability, and enhancing service delivery.

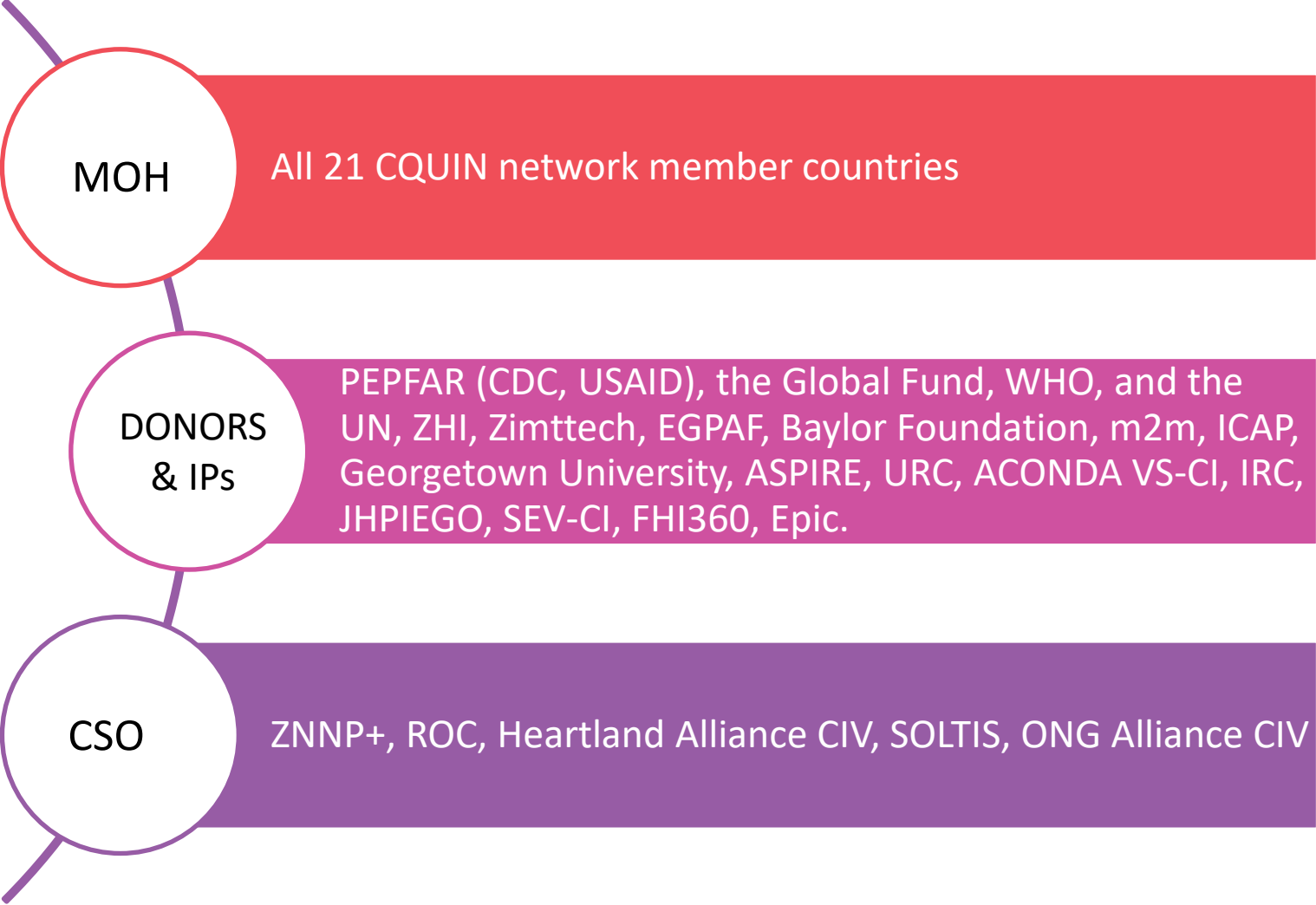


Survey Goal: Enhance understanding of the complex landscape of MOH-led HIV program SQAs across CQUIN. The findings are providing actionable data and critical insights to inform quality management policy decisions such as the need for a comprehensive, digitized, harmonized tool and approach



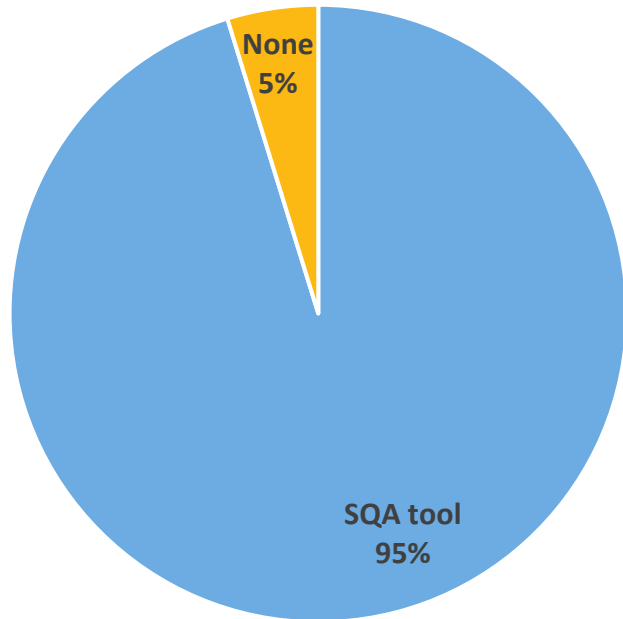
Approach: MoH representatives completed the survey via Qualtrics in collaboration with PEPFAR agencies, implementing partners, donor agencies, and CSOs in Oct 2024.

Stakeholders contributing to the SQA Survey



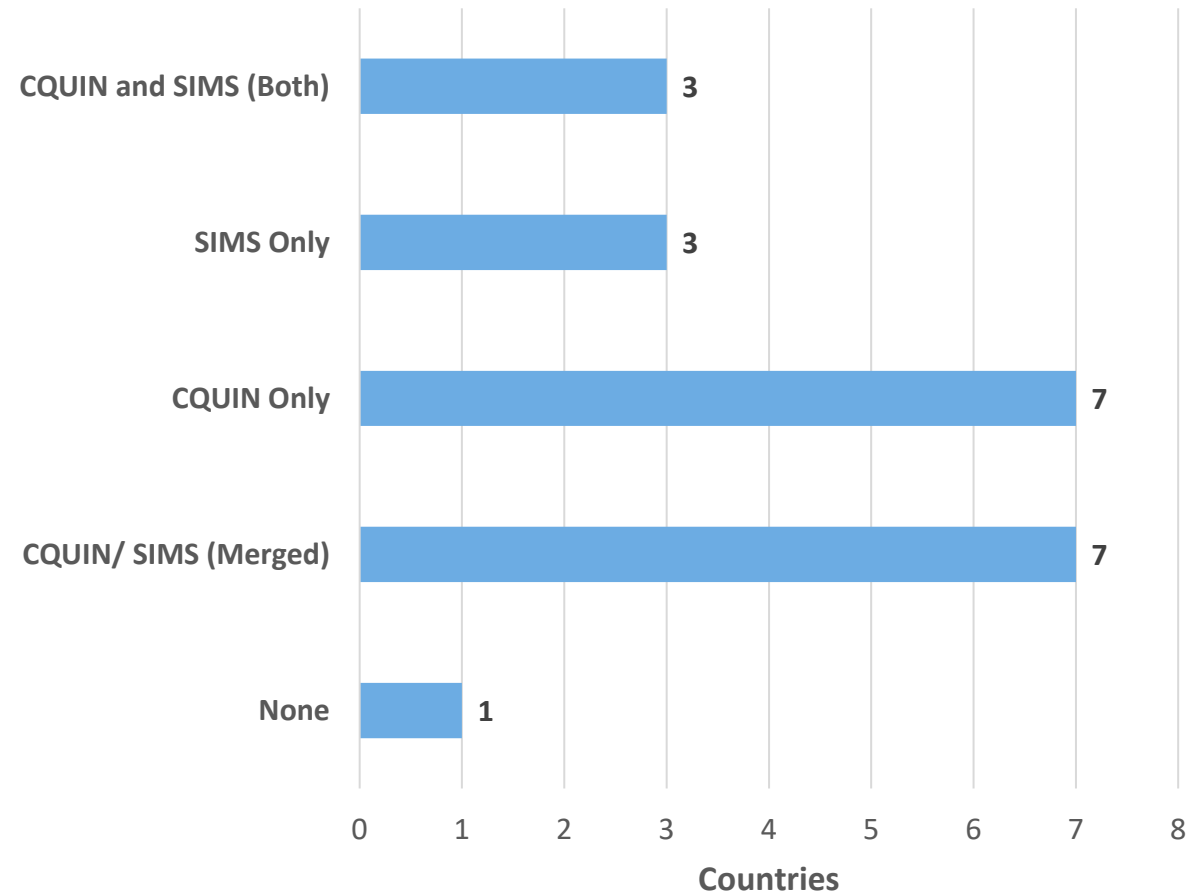
HIV Program SQA tools by type currently available in CQUIN member countries

Proportion of CQUIN Network Countries that have an SQA tool



■ SQA tool ■ None

SQA tools in network member countries





SIMS

SITE IMPROVEMENT THROUGH
MONITORING SYSTEM (SIMS)

Implementation Guide

Version 4.2, August 15, 2022

Examples of SQA tools

Afya Supportive Supervision System (AfyaSS)



Technical supervision

NACP_Comprehensive Supportive Supervision Checklist on HIV and AIDS Health Services for Health Facility

NACP_Comprehensive Supportive Supervision Checklist on HIV and AIDS Health Services for Health facility

Supervision Level: Facility

Facility Types: ALL

1.0. Management and quality improvement

1.1 Is there functional health facility QI team?

Hint: *Not set*

Yes No

1.2 Are QI team members active?

Hint: *Check for QI meeting minutes to justify*

Yes No

1.3 Are QIs meetings conducted monthly?

Hint: *Enquire for monthly meetings minutes for 2020/21*

Yes No

1.4 Did the facility receive feedback from higher authority regarding reports or data?

Hint: *Enquire the feedback report to verify*

Yes Partial No N/A

1.5 Is there evidence of data analysis, visualization, interpretation and use on HIV by the facility?

Hint: *Check whether data is used for planning and decision making*

Yes No

1.6 Is there linkage between different interventions within the facility?

Hint: *Check whether different interventions are interlinked within facility's departments*

Yes No

1.7 Is the Medicines and Therapeutic Committee available?



Eswatini HIV Differentiated ART Service Delivery

Quality Assessment Tool

Version 3.0. January 2024

Facility Name: RFM HOSPITAL (ART DEPT)

Region: Manzini

Assessment Date: 07 February, 2024

Facility lead respondent: Sr Sindy Dlamini

Assessment Team Lead: Ms Thembe Dlamini |

Assessment team members

Hughen Bvarugabe, Ntokozo Dlamini, Sikhanviso Sengwavo, Sanele Matsebula

Observer: Sr Zinhle Dlamini

Differentiated ART Service Delivery (DSD) Quality Assessment Tool. Version 3.0 January 2024

REPUBLIQUE DU BURUNDI



MINISTRE DE LA SANTE PUBLIQUE
ET DE LA LUTTE CONTRE LE SIDA



PROGRAMME NATIONAL DE LUTTE
CONTRE LE VIH/SIDA, IST et HV

Annexe 1 : Modèles PSD validés au Burundi selon les Définitions/catégories des modèles de PSD du réseau CQUIN (Modèles moins intensifs pour les PVVH stables)

Catégorie	Exemples	Notes
Modèles individuels basés dans les établissements de santé	Espacement des visites de 6 mois (sans dispensation accélérée des ARV) EV6	Pour les bénéficiaires de soins qui remplissent des conditions de stabilité, les visites cliniques sont moins fréquentes que dans le modèle non différencié et les bénéficiaires de soins reçoivent un TARV pour trois à six mois. Contrairement au modèle de dispensation accélérée, tous les rendez-vous comprennent une consultation clinique complète.
	Espacement des visites de 3 mois (avec dispensation accélérée des ARV) EV3	Ce modèle combine l'espace des visites de 3 mois avec une dispensation accélérée. La première visite comprend une consultation clinique complète en plus de d'un kit des traitements de 3 mois, la prochaine visite dans 3 mois sera faite d'une « dispensation accélérée » qui ne comprend généralement que la collecte des TARV et de brèves questions lors du dépistage sur l'observance et la présence/absence de nouveaux symptômes ou problèmes.
Modèles de groupe basés dans les établissements de santé	Club d'observance	Distribution de médicaments dirigée par un agent de santé à plusieurs personnes lors d'un rendez-vous de groupe. Les groupes se réunissent à l'établissement après les heures ou pendant les heures de consultation, dans un lieu désigné où ils reçoivent des conseils en matière d'observance du traitement, des conseils psychosociaux et d'autres services cliniques, et où ils reçoivent ensuite leurs médicaments. Les groupes pourraient être diversifiés et conçus pour répondre à des besoins spécifiques, comme la distribution



NATIONAL AIDS AND STIs CONTROL PROGRAMME FEDERAL MINISTRY OF HEALTH

Monitoring and Supportive Visits (MSV) Checklist and Feedback Report

Name of Facility: _____

Physical Address: _____

LGA: _____

State: _____ Geo coordinates: _____

Date: _____

Supporting Partner(s): _____

No of persons on ART: _____

Data Collector Names: _____ Phone: _____

_____ Phone: _____

Type of Facility: ART PMTCT HTS PCR

Facility Contact Persons (Site Project Coordinator, Pharmacy and Lab focal persons etc)

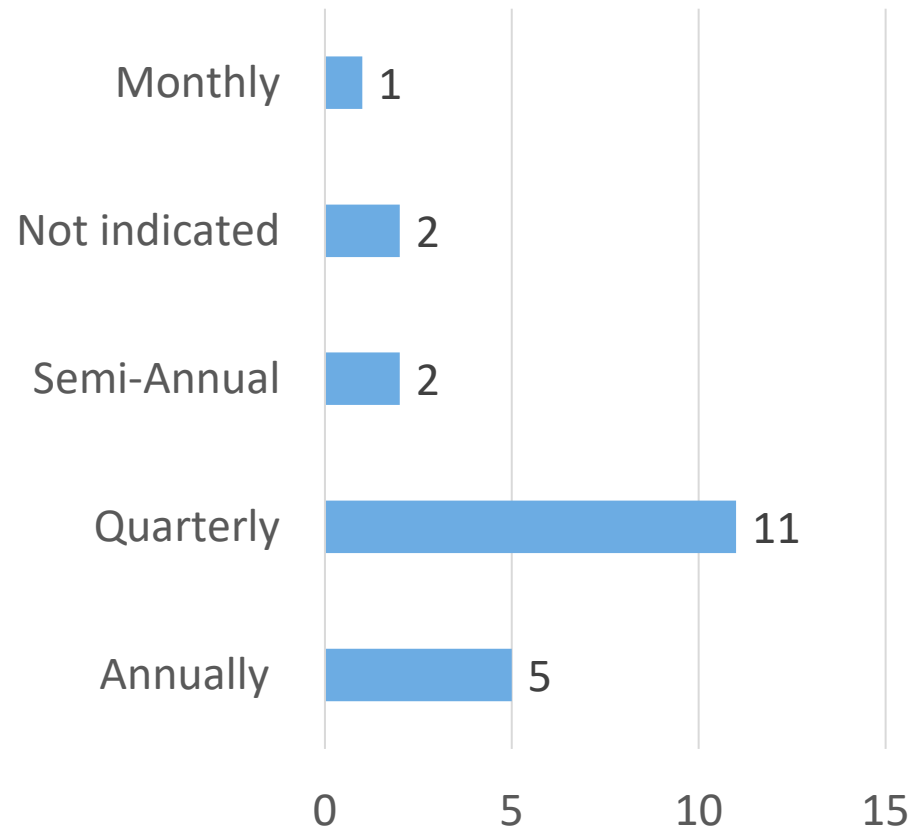
S/No	Name	Designation	Phone Number	Email

Scoring: A Likert scale scoring is used in this tool with scores from 0 – 2 as shown in the table below:

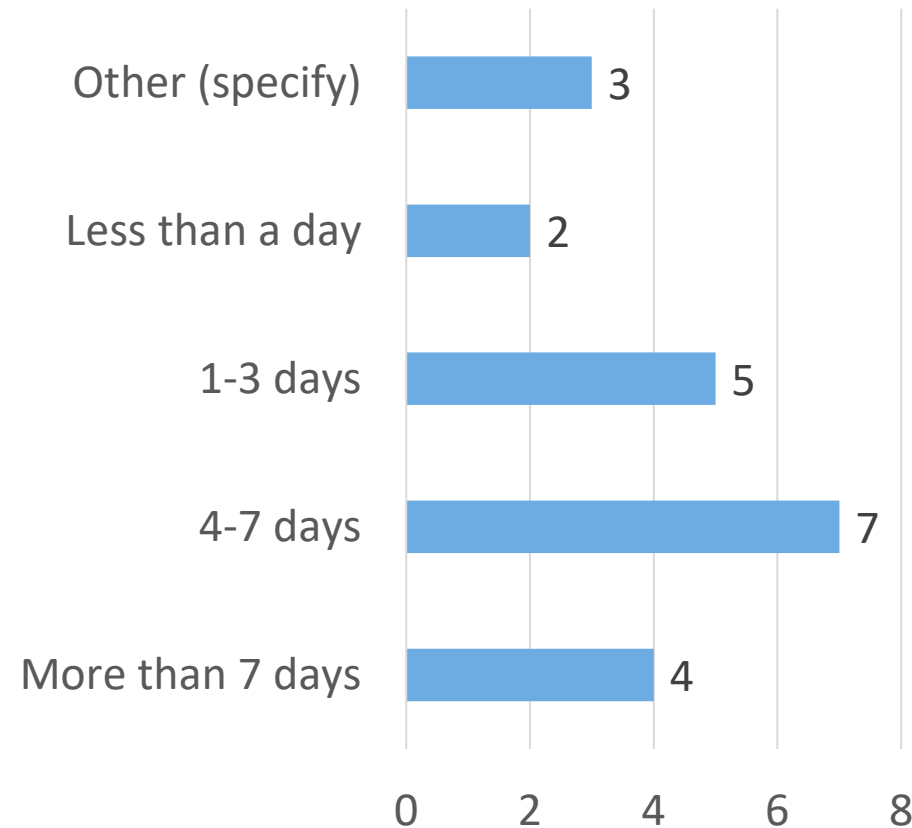
Description (use for other)	Score	Description (use for section A 3.0 – A 3.15)

Implementation of SQA by Frequency and Duration

Frequency of SQA Process in Network Countries



SQA Process Time Conducting SQAs



CQUIN Member Country Feedback: A Highlight of Collective Challenges with SQAs (1)

Developing remediation plans

- Developing corrective action plans can be challenging due to conflicting or unclear assessment results or their interpretation.

Monitoring corrective actions

- Disjointed tracking systems and/or inadequate follow-up leads to gaps in monitoring and delays in resolving issues, preventing timely and effective resolution.

Multiple SQA tools

- Multiple tools are used alongside the main HIV C&T and DSD SQA tools, straining facility resources.
- Each tool can require a separate assessment and follow-up, leading to inefficient use of time and personnel.

Standardization of results

- The results of different tools and assessments are not standardized, making it difficult to compare them and track improvements across facilities and countries.

CQUIN Member Country Feedback: A Highlight of Collective Challenges with SQAs (2)

Prioritizing remedial plans

- Overlapping and frequent assessments make it difficult to prioritize and implement solutions effectively
- In some cases, the remedial plans lack clarity and focus, which results in poor follow-through and delayed or incomplete execution.

HRH and Budgetary issues

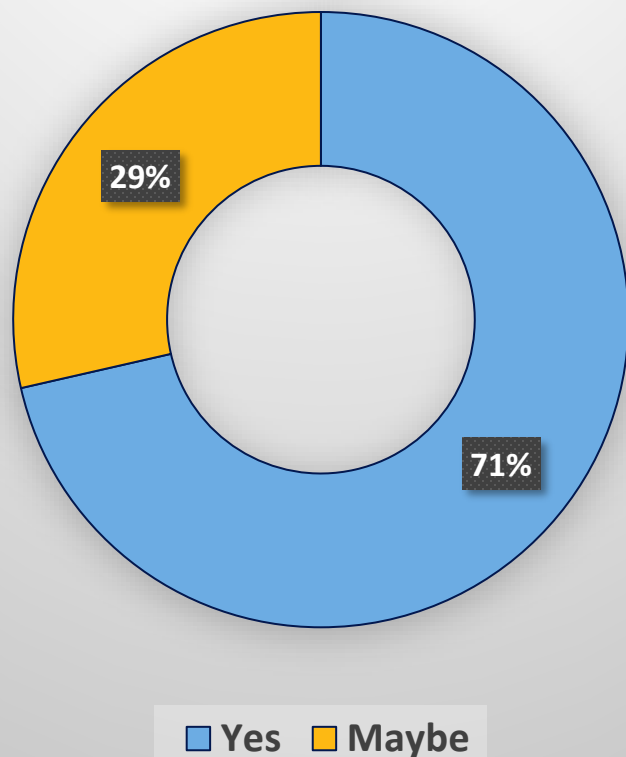
- Insufficient trained personnel, compounded by budgetary constraints, pose a significant barrier to conducting SQA exercises effectively.

Length of Questionnaire

- The length of the questionnaire impacts efficiency, causing assessment fatigue. It is time-consuming and overwhelming, leading to delays in collecting critical data needed to complete the exercise.

Many Countries are in Support of Developing a Harmonized HIV Program SQA Tool

Member Countries in support of a Harmonized SQA tool



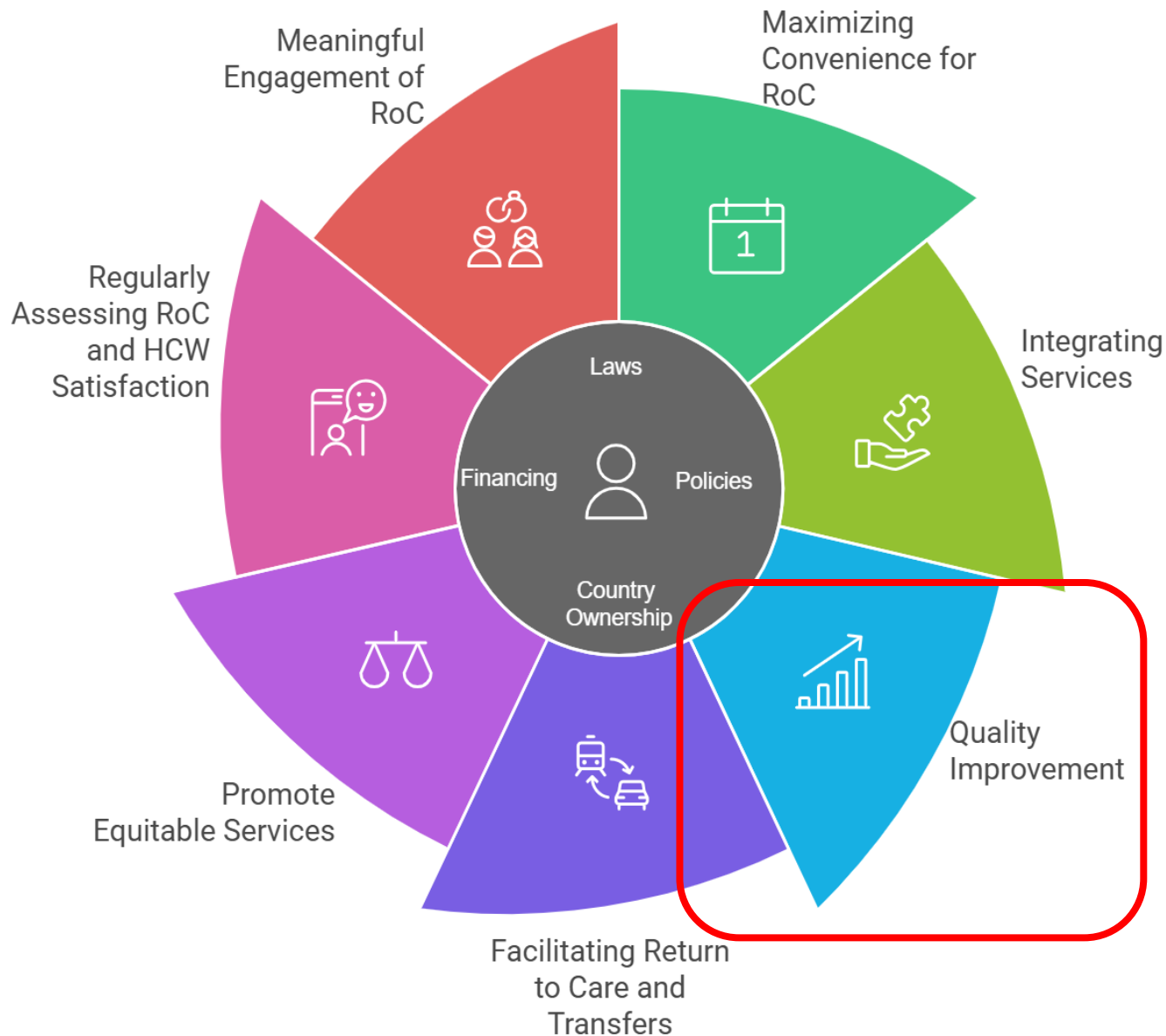
Network countries developing an integrated SQA tool.

Country	Stage of integrated SQA development
DRC	Pilot
Eswatini	Design
Rwanda	Final Approval and dissemination
Senegal	Planning
Uganda	Final Approval and dissemination

- **Integrated** tools include non-HIV service indicators into the HIV C&T and DSD service quality assessment tool.
- **Harmonized** tools are standardized tools to ensure consistency and comparability across various settings and regions

Why Are Quality Assessments So Important?

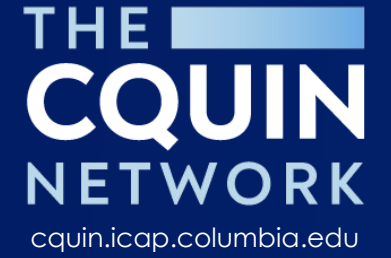
Person-Centered Services (PCS)



- Quality assessments in the form of SQAs, CMM quality scores can further inform progress of countries towards this component of person-centered services
- The proposed harmonized SQA tool will allow for better measurement of quality improvement in the context of PCS

Way Forward for 2025

- Development of a HIV program, PCS focused harmonized quality assessment digital tool and approach
- Support a Quality M&E Framework for PCS Quality Domain
- Development of a HIV program Integration CMM Dashboard and other tools / resources (e.g. readiness assessment toolkit) in collaboration with NCD, TB, MCH, and M&E CoPs



Thank You!

