

# “Optimizing Quality in Differentiated Service Delivery: Driving Sustainable, Person-Centred HIV Care” A Case Study of Uganda

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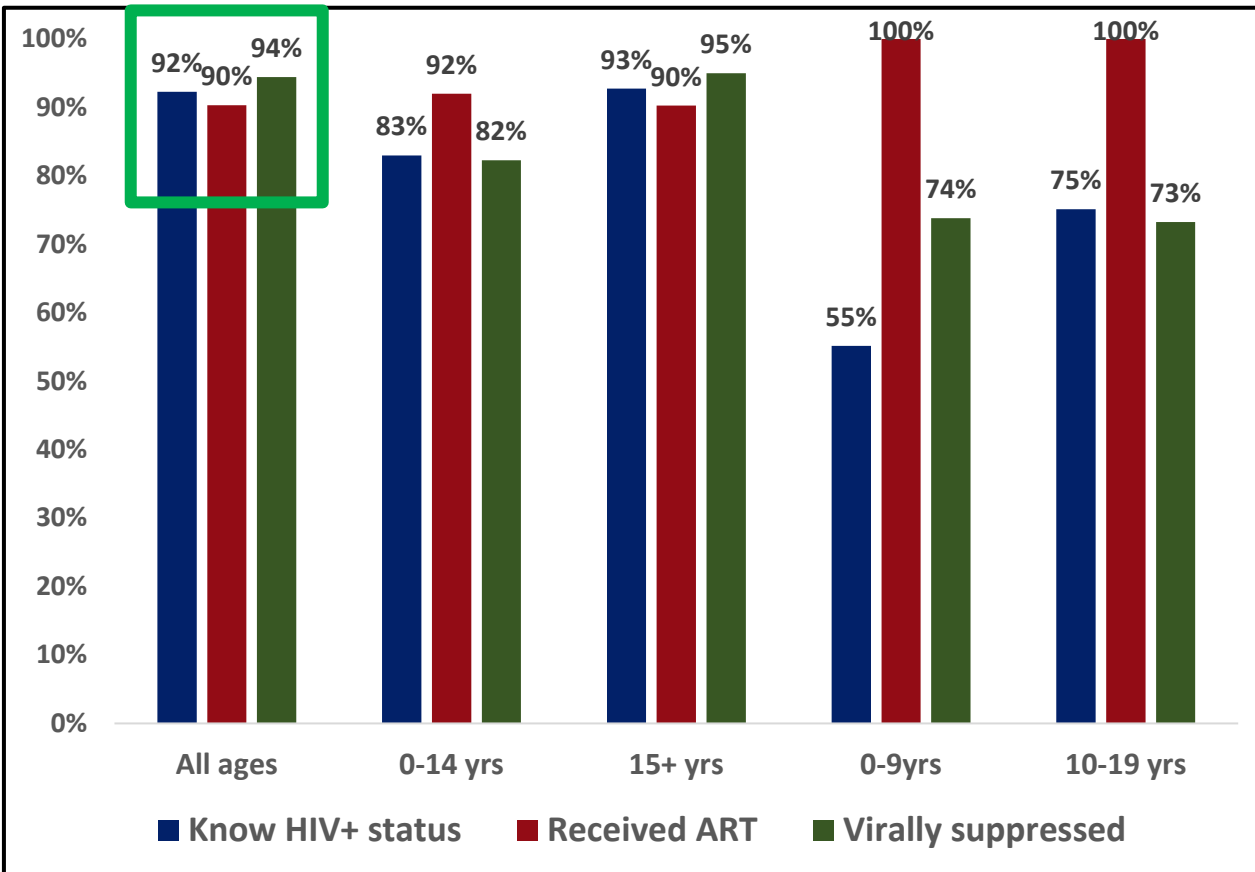


# Outline

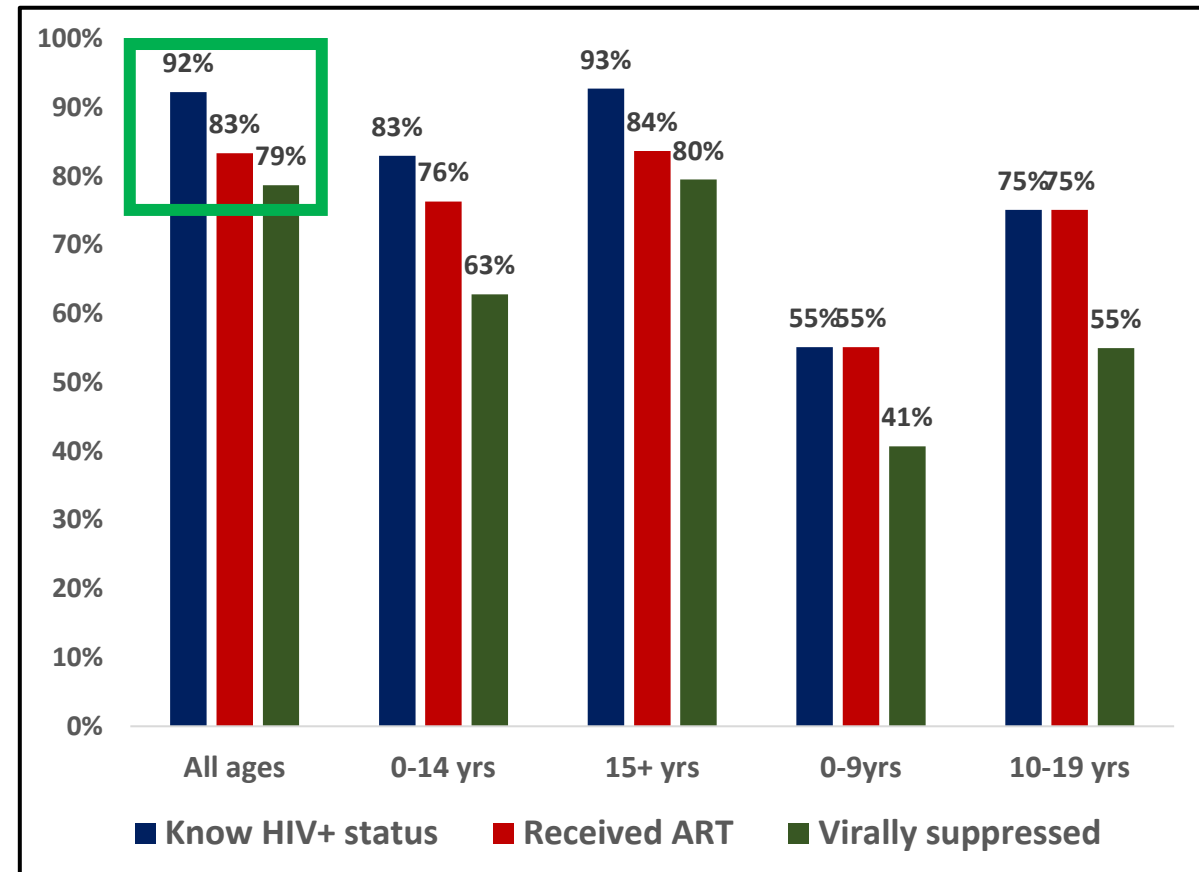
- Background of DSD quality management in Uganda
- 2023 DSD quality assessment results
- Quality gaps identified
- QI projects being tracked
- Next steps

# 95-95-95 Achievements in Uganda – Sept 2024 (Spectrum)

## Conditional Cascade



## Population Cascade



# Uganda DSD Quality Management Background

- Uganda has had a National Quality Improvement Framework since 2015 that guides the implementation of Continuous Quality Improvement (CQI) in programs.
- In 2019, Uganda conducted a two-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 Quality Management Community of Practice and developed the Quality Standards that feed into the Maturation Model
- Uganda conducts Regional Performance Reviews, supervision and mentorships.

# Quality Improvement Framework for Uganda



THE REPUBLIC OF UGANDA

## HEALTH SECTOR QUALITY IMPROVEMENT FRAMEWORK AND STRATEGIC PLAN 2015/16 – 2019/20

*Improving the value of healthcare in Uganda  
with proven interventions, implemented with quality methods.  
“Our care saves” and “Spend to save”*

### Objective 3: To improve compliance to the health sector service delivery standards.

and	Develop/review service delivery standards, guidelines and tools	MoH	x	x	x	x	x	No. of standards, guidelines and tools reviewed	Availability of reviewed standards, guidelines and tools	
based standards, SOPs	Print and disseminate service delivery standards, support supervision guidelines and tools	MoH/ Partners		x	x			No. of standards, supervision guidelines and tools printed and disseminated	Availability of reviewed standards, guidelines and tools	
bodies	Revise, harmonize and update existing Acts	Professional Councils / DPs / Cabinet	x	x	x			Acts revised	Revised Act	
and	Streamline, consolidate and digitize the professional and facility licensing systems	Professional Councils / DPs	x	x	x			Information systems digitalized	Digitalised information systems	
	Create Critical Tools for Quality Assurance	Professional Councils / DPs		x				QA tools developed	QA tools	
	Roll out the voluntary Quality Improvement System in the private health facilities		x	x	x			VQIS rolled out	Reports	
Health	Orient and train district supervisors in the HFQAP	MoH / Partners	x	x				No. of districts oriented	Reports	
g. MTA,	Print HFQAP assessment tools	MoH QAD / Partners	x	x	x	x	x	Assessment tools printed	Tools available	
clinical / program assessment etc	Conduct HFQAP assessments	MoH / LGs / Partners	x	x	x	x	x	No. of districts conducting facility assessment	Reports	

# National Quality Management System: Coordination Through Technical Working Groups



Uganda uses DSD TWG and sub-committee groups as platforms for planning and coordinating DSD activities, including quality management



With the inception of DSD in 2017, a quality management tool for DSD looking at domains at the different levels of District, Implementing Partner and Health Facility was developed.



This tool is used bi-annually by the national-level team to assess the quality of DSD implementation in the country with the last assessment being November 2023 and is funded through the Global Fund

# HIV Program Service Quality Assessment Approach

- **DSD TWG and sub-committee groups** plan and coordinate DSD activities including quality management
- **DSD quality management tool** to assesses quality at different levels of the health system
- **Semi-annually assessments** performed by the national level team to assess quality DSD implementation in the country

Region	District	Facility
1. Coordination	1. Leadership & Governance	1. Leadership & Governance
2. Implementation progress	2. HR management	2. Human Resource
	3. Access to essential medicines	3. Access to essential medicines
	4. Manage HIS	4. Health Information systems
	5. Oversee CQI	5. Implement CQI
		6. Service delivery
		7. Integration of TB/HIV services
		8. Chart review

# The Uganda Service Quality Assessment Tool

## Area 5: CONTINUOUS QUALITY IMPROVEMENT FOR DIFFERENTIATED SERVICE DELIVERY IMPLEMENTATION

### S5 CQI FOR DSD IMPLEMENTATION

**STANDARD:** The district has a functional quality improvement management process for DSD.

Examples of the Quality Assessment Questions

	Standard	Response	Instructions for selecting response
Q1 👁️👁️	The district QI team meets regularly to discuss DSD implementation in the district	Y N	If there are minutes of the district QI team that show that the team met at
Q2 👁️👁️	The district QI manage on a regular basis to su facility QI teams to imp implementation.		
			Overall
	<b>Comments</b>		

### Area1: LEADERSHIP AND GOVERNANCE FOR DSD

#### S1 LEADERSHIP AND GOVERNANCE FOR DSD

**STANDARDS:** The district has a Focal Person to lead and coordinate DSD activities. The extended DHT meets regularly to review DSD progress and supervises DSD rollout and implementation within the district.

	Standard	Response	Instructions for selecting response
Q1	The district has a trained DSD Focal Person within the extended DHT.	Y N	
Q2 👁️👁️	The extended DHT met in the last 6 months to discuss DSD progress with documented minutes.	Y N	
Q3	The district receives funding support from the IP for DSD implementation.	Y N	
Q4 👁️👁️	The DHT provided DSD related support supervision in the last 6 months.	Y N	
	<b>Overall SCORE IN COLOUR</b>		If YES to all standards above score <b>Dark Green(DG)</b> , if YES to 3 standards score <b>Light Green (LG)</b> , if YES to 2 standards score <b>Yellow (Y)</b> , if YES to less than 2 standards score <b>RED (R)</b>
	<b>Comments</b>		



# Summary Findings from the Uganda Service Quality Assessment, July-September 2023

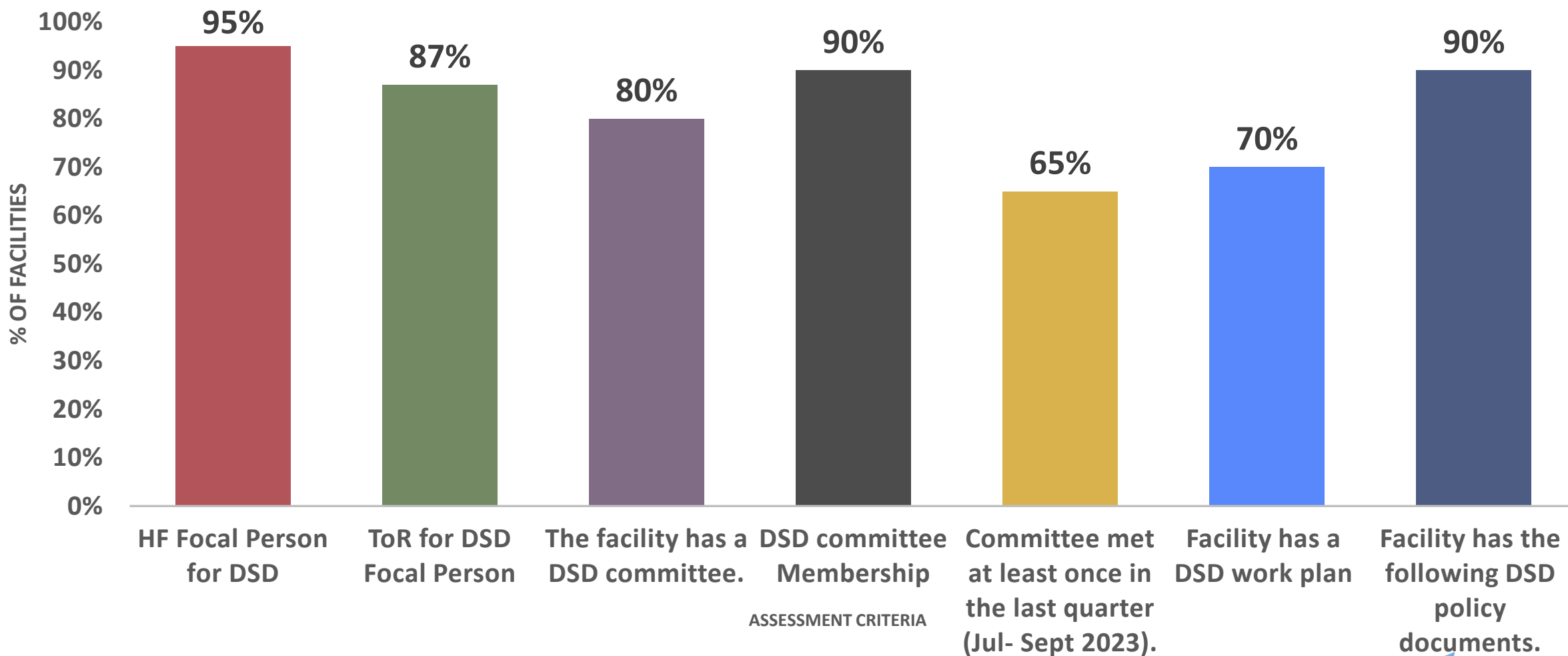


**MINISTRY OF HEALTH**

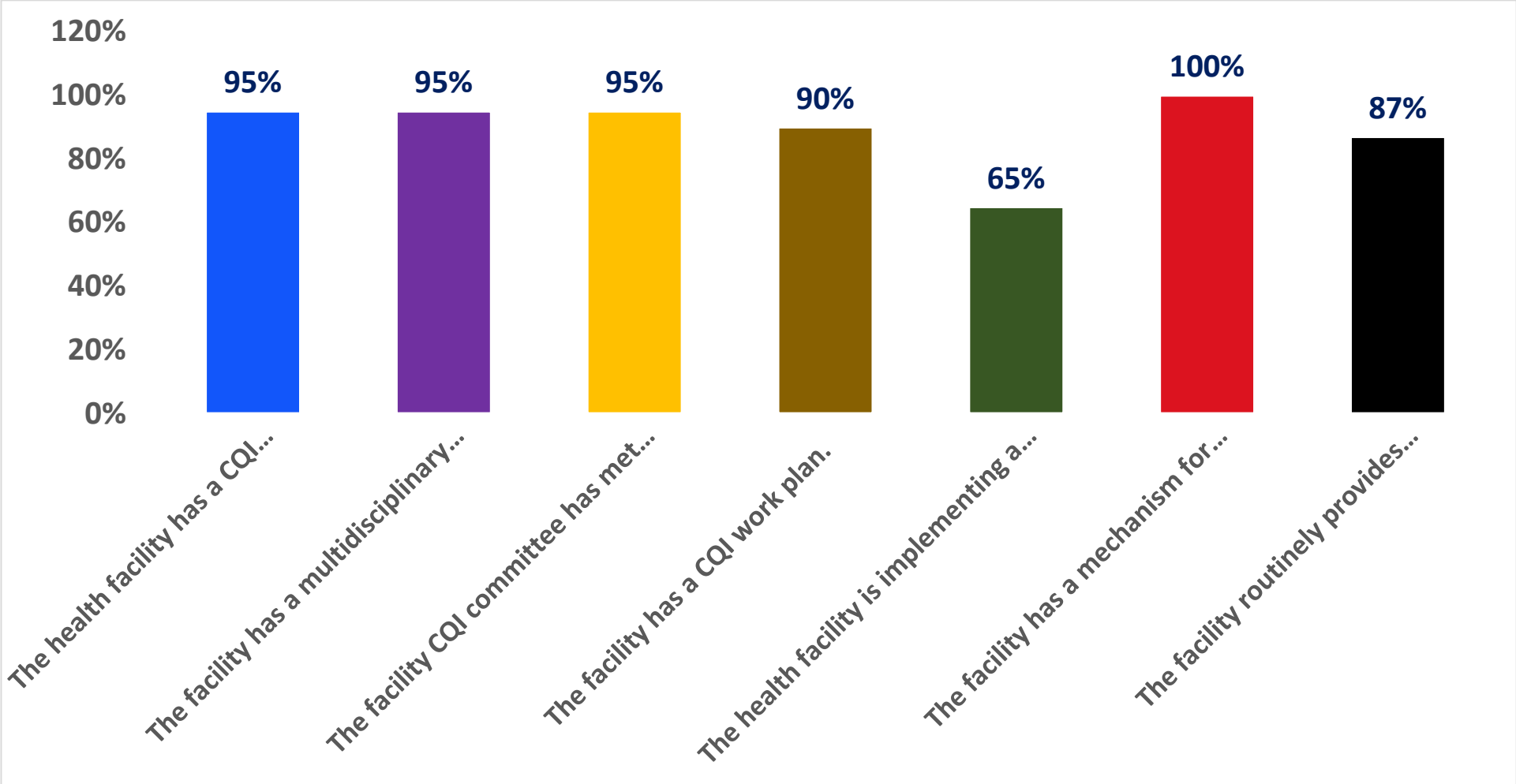
**DIFFERENTIATED SERVICE DELIVERY  
TARGETED SUPPORT SUPERVISION**

**FIELD ACTIVITY REPORT**

# Assessment Results: DSD Leadership and Governance (N=66 Health Facilities)

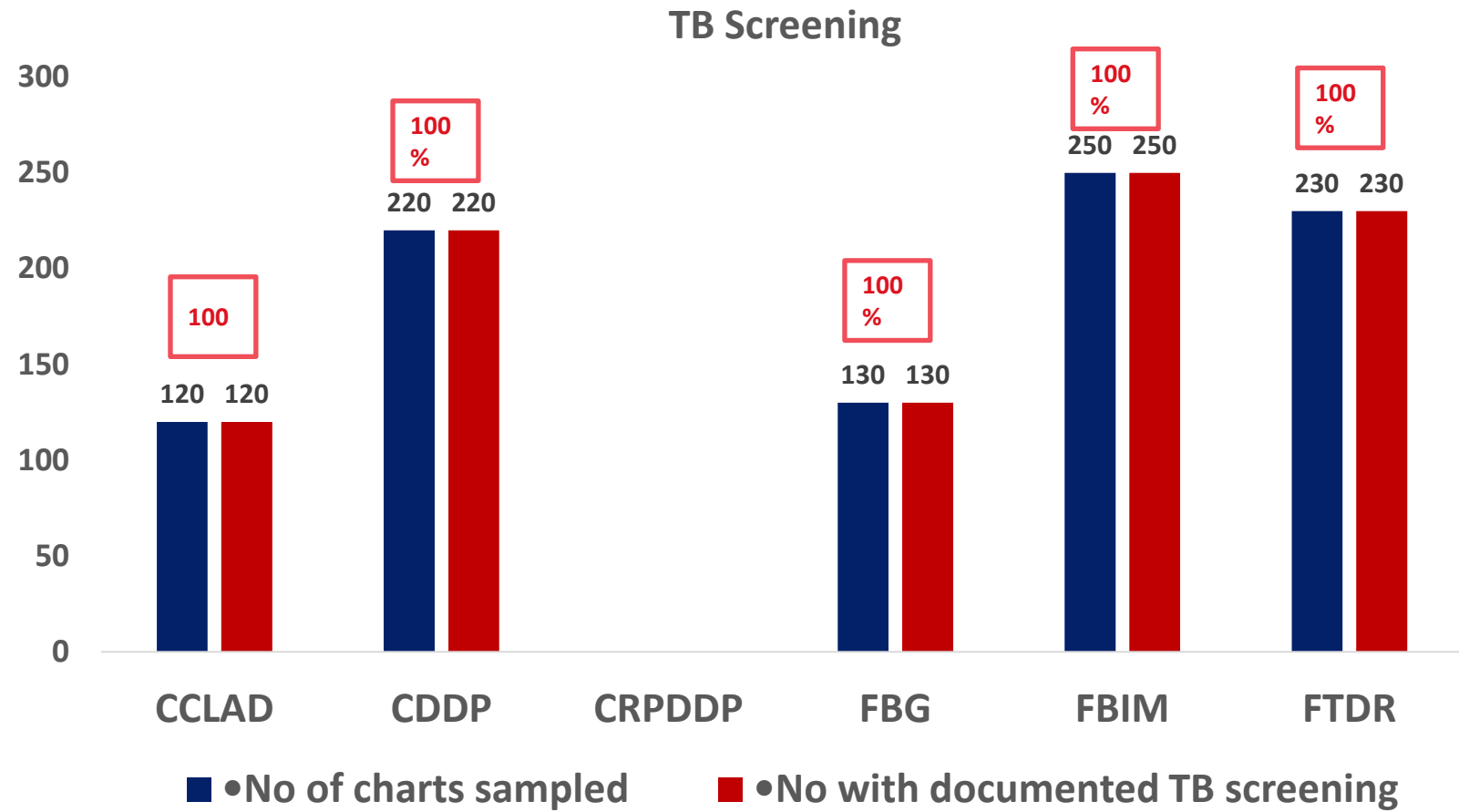


# Assessment Results: HIV Program Quality Management (N=66 Health Facilities)

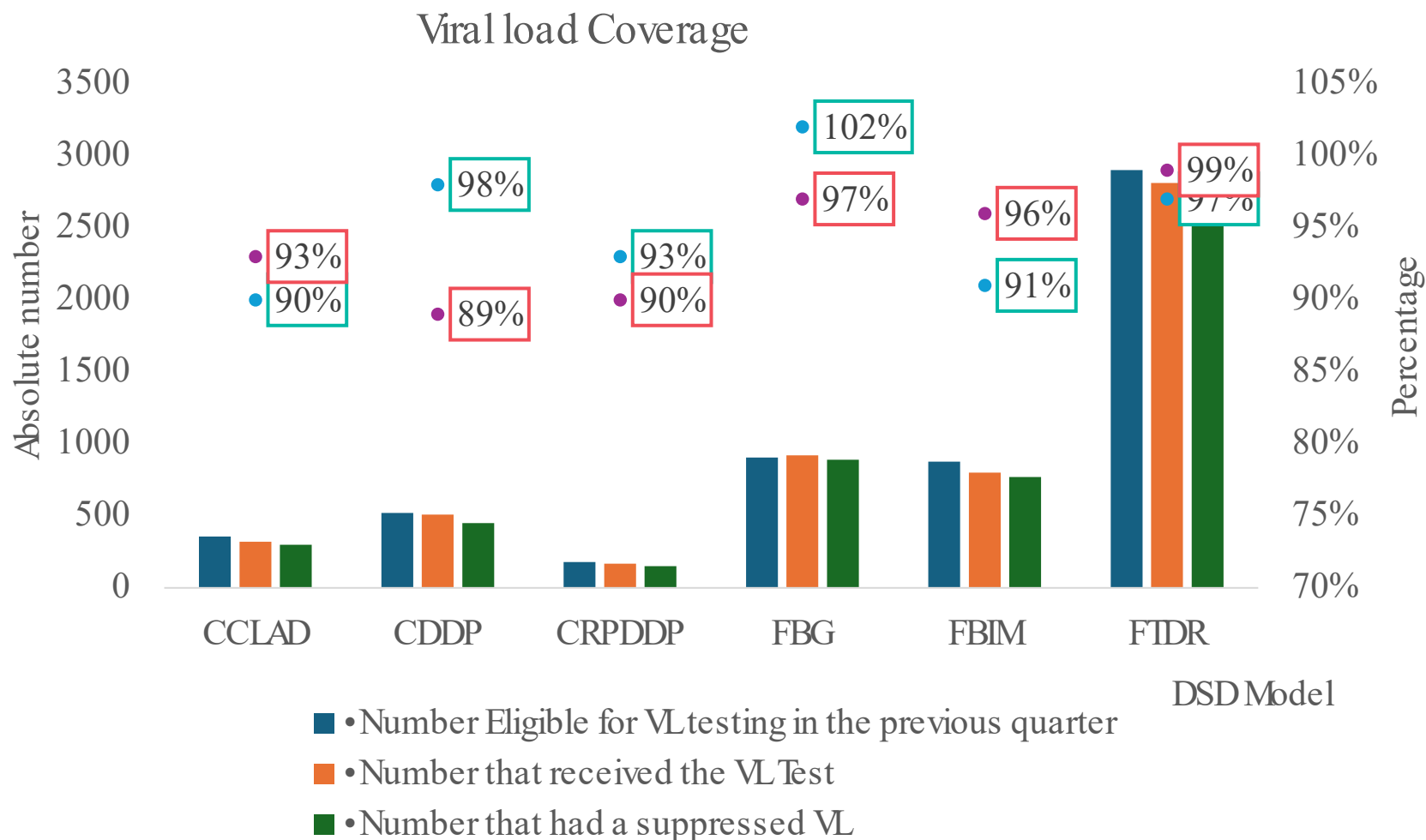


# Assessment Results: TB screening and DSD model type (N=950 Charts assessed)

All eligible RoC in the different models were screened for TB

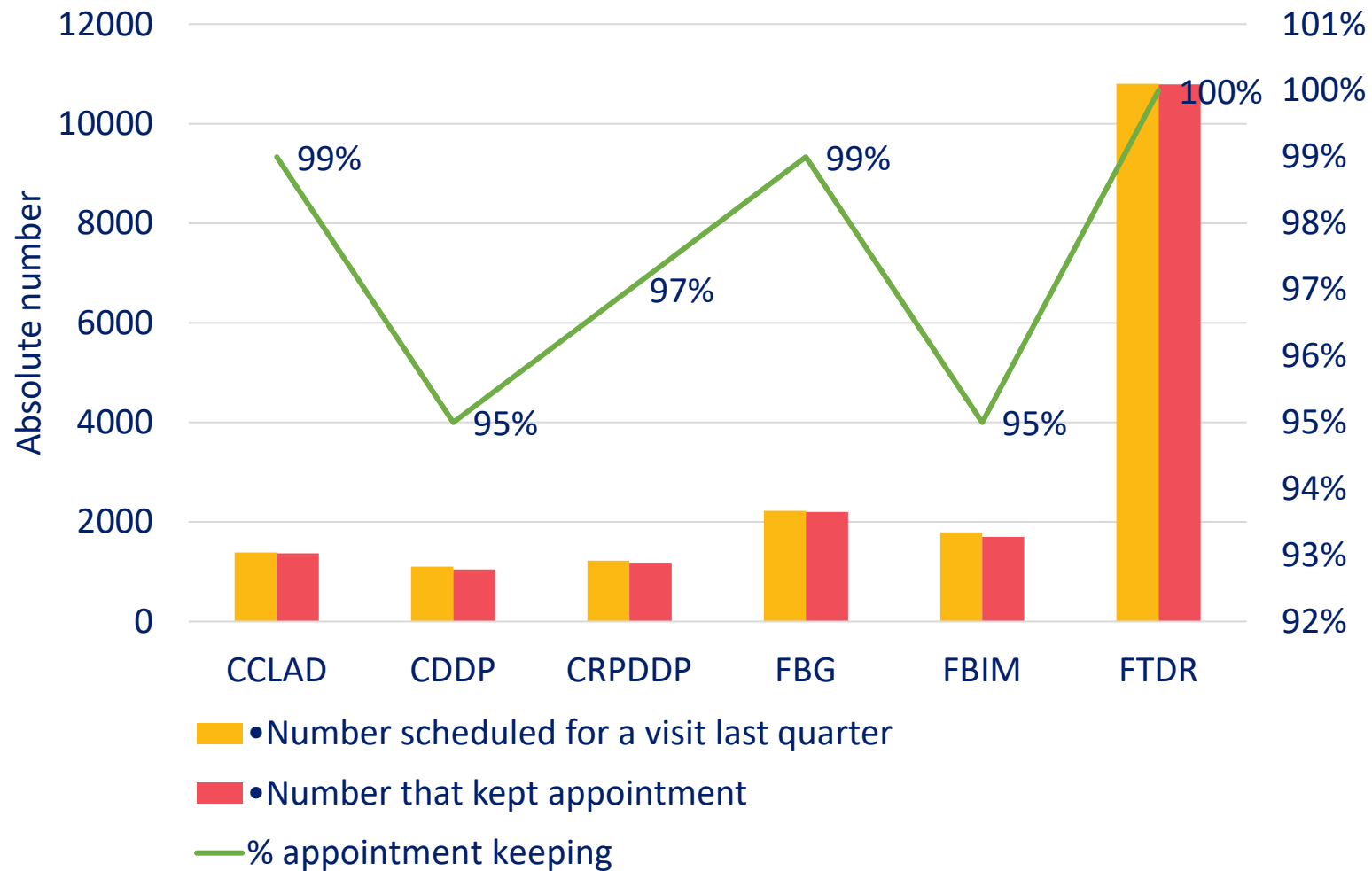


# Assessment Results: Viral load coverage across DSD model types (N=5738 Charts Assessed)



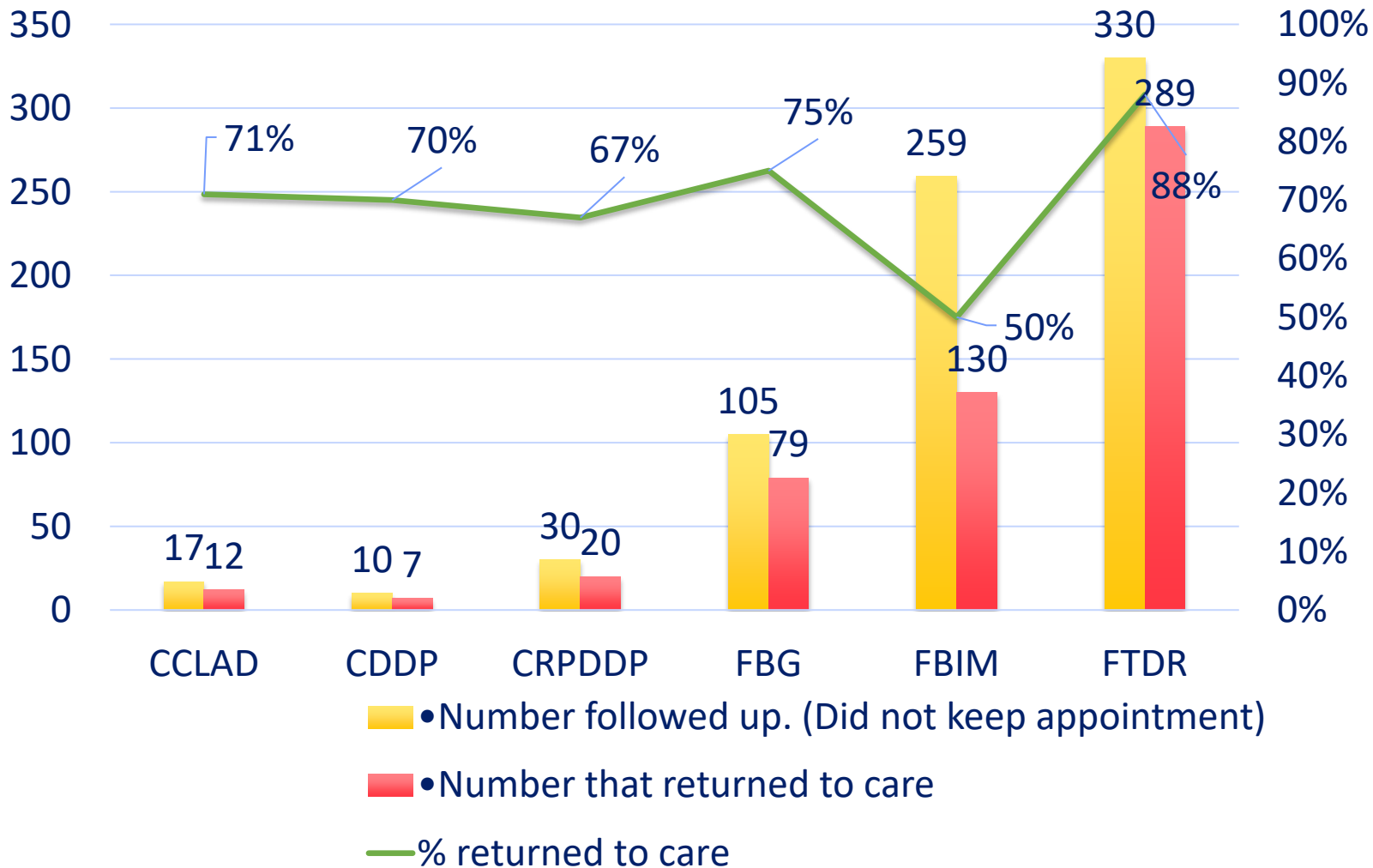
- On average, more than 90% of all the models had VLC above 90%
- FBG had coverage of 102, due to some RoC reporting before their dates
- Suppression is above 90% across all models

# Assessment Results: Appointment attendance and DSD model Type (18,519 Charts Assessed)



Appointment attendance was 95% and above across all DSD models which is attributed to strong appointment tracking and response system

# Assessment Results: Return to care outcomes across DSD models (N=751 Charts)

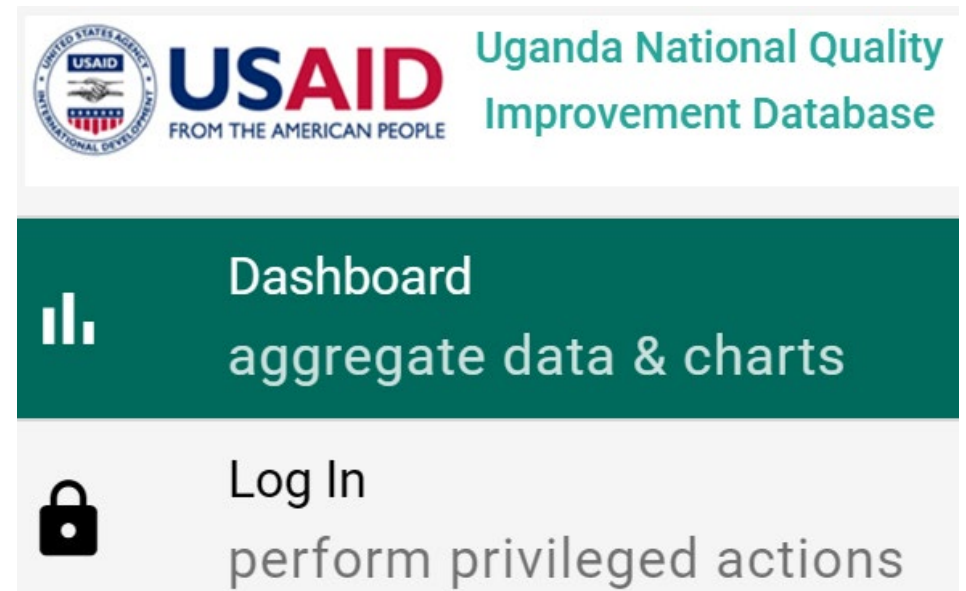


- RoCs enrolled in more intensive models tend not to be established on ART and contributes to why they are not in less intensive models
- Return to care after follow up was below 90% with FBIM being lowest at 50%
- Self-transfer, cross boarder movement, limited use of physical locator forms are partly responsible for the low return to care

# Uganda National Quality Improvement Database

- With support from USAID, Uganda MOH utilizes a national CQI project database tracker provides details of all running CQI projects
  - Detailed access is restricted to permitted users
- After the national level assessments, regions generate CQI projects to address cross cutting gaps
  - The database is not limited to DSD only but applies to all program areas including HIV/TB
- Facility based documentational journals are used to update the database

<https://qidatabaseug.urcchs.com/webapp/v9.2/index.html#/>





# Examples of QI projects: Regional Level (May-Oct 2024)

MAPS DASHBOARD   LAYERED DASHBOARD   ALL INDICATORS   FILE DOWNLOADS

Treatment-3: Percentage of PLHIV with advanced HIV Disease that received a TB LAM test. Period from May 2024 to Oct 2024  
 Click here to adjust indicator filters

Home

Sub Regions		May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024
		%	%	%	%	%	%
Jinja		100%	100%	40%	0%	70%	100%
Kabale		100%	129%	79%	78%	45%	73%
Mbale		100%			100%	100%	100%
Moroto		80%	67%	89%	0%	100%	0%
UPMB/LSDA		70%	57%	76%	66%	57%	64%

<https://qidatabaseug.urc-chs.com/webapp/v9.2/index.html#/>)

# Examples of Health Facility QI Projects (May-Oct 2024)

<https://qidatabaseug.urchs.com/webapp/v9.2/index.html#/> )

← Multi Indicator



## Treatment-3: Percentage of PLHIV with advanced HIV Disease that received a TB LAM test



	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024
Treatment-3-N: Number of new & non-suppressed PLHIV with advanced disease that received a TB LAM test during the month (N) Include all PLHIV that received a TB LAM test. Source: Daily Activity &/or TB Laboratory register	1	5	1	0	0	0
Treatment-3-D: Number of new & non-suppressed PLHIV with advanced disease during the month (D) Include all new & non-suppressed PLHIV with a CD4<200, or WHO clinical stage 3 or 4, or seriously ill (respiratory rate >30b/min, temperature >390C, heart rate >120b/min, unable to walk or breastfeed), or < 5-years-old. Source: ART register	1	5	1	0	0	0
Treatment-3: Percentage of PLHIV with advanced HIV Disease that received a TB LAM test (%)	100%	100%	100%			

## GeneXpert for all TB patients QI Collaborative

### Percentage of presumptive TB patients tested using mWRD (GeneXpert & Truenat) in the reporting the month



	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024
GN1: Number of presumptive TB clients tested using mWRD during the month (N)	84	103	76	276	185	35
GD2: Number of clients with presumptive TB during the month (D)	84	103	76	276	185	35
G11: Percentage of presumptive TB patients tested using mWRD (GeneXpert & Truenat) in the reporting the month (%)	100	100	100	100	100	100

### Percentage of presumptive TB children (0-14 years) tested using mWRD (GeneXpert & Truenat) in the reporting month



	May 2024	Jun 2024	Jul 2024	Aug 2024	Sep 2024	Oct 2024
GXN2: Number of presumptive TB children (0-14 years) tested using mWRD during the month (N)	14	11	23	25	56	14
GXD2: Number of presumptive TB children (0-14 years) during the month (D)	14	11	23	25	56	14
GXI2: Percentage of presumptive TB children (0-14 years) tested using mWRD (GeneXpert & Truenat) in the reporting month (%)	100	100	100	100	100	100

# Quality Gaps Identified for DSD Programs in Uganda



Competing CQI requests from the different sections for HIV care & Management (e.g. need a Journal on VLS, Retention, CaCX, HTN,DM, PMTCT, TB at the facility.)



Clinicians resistant to acknowledge RoC eligibility to community models



Sub-optimal patients' viral load monitoring for RoC long term refills (6+MMDs)-



Documentation journals not updated on time (at times) hindering performance tracking

## 2025 Next Steps

- Review and update the DSD quality assessment tool in relation to the 2022 guidelines (Pending roll out of the new HMIS tools)
- Integrate other services included in DSD into the SQA tool
- Continue bi-annual assessments to cover the whole country- Half the regions each time
- Scale up the tracking system for the CQI projects on DSD at National level