



Differentiated HIV Service Delivery: Optimizing Person-Centered HIV Services

Uganda

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BACKGROUND

Uganda launched differentiated service delivery (DSD) in 2017, included DSD in the 2018 consolidated guidelines, and joined CQUIN in 2019. Key priorities for 2024 included monitoring and evaluation (M&E) for integrated services and impact evaluation of DSD across different domains. The integration of HIV, non-communicable disease (NCD) and family planning (FP) services is coordinated through the DSD technical working group (TWG) and sub-national committees with representatives from different Ministry departments and forums of people living with HIV (PLHIV). Following the Integration meeting, Uganda Permanent Secretary commissioned an Integration Working Committee, led by the Program Manager STD/ACP. This committee includes MOH, HIV, TB, Lab, MCH, Planning Departments, CSOs, and development partners including WHO and PEPFAR. Regular meetings are held to draft an integration concept and a consultant is being identified to support the process. Expected outputs include implementation guidelines, roadmaps and advocacy strategies. Integration metrics were developed; the pilot is pending and results are to be shared. National DSD quality standards are in place and assessed using a standard service quality assessment (SQA) tool. The community is well represented in all avenues for DSD. MOH has also developed a standard tool for client satisfaction which is done by health facilities on a quarterly basis.

DART CAPABILITY MATURITY MODEL TRENDS (2022-2024)

Figure 2: DART CMM trends (2022-2024)

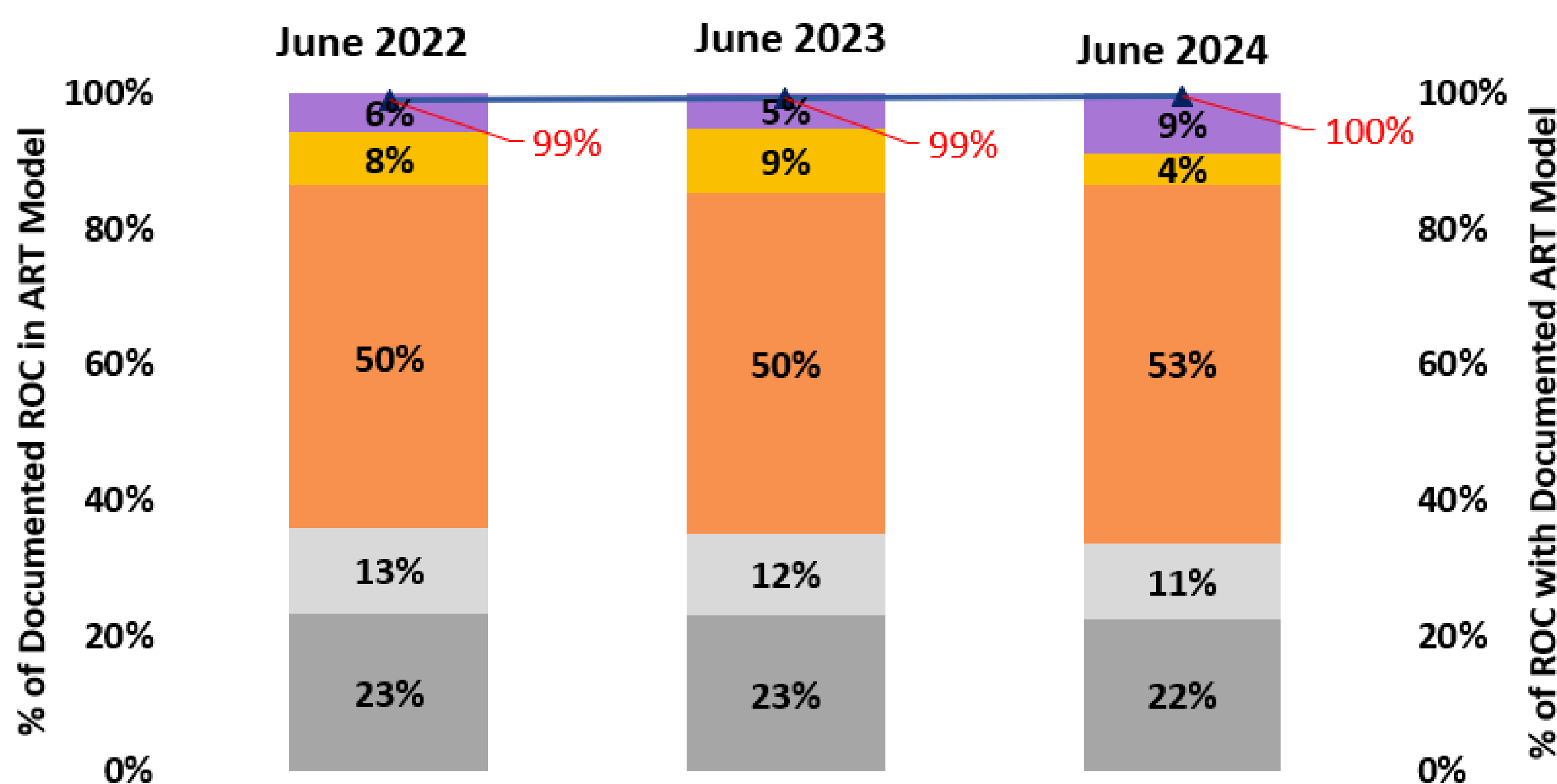
Domains	2022	2023	2024
Policies	Dark Green	Dark Green	Dark Green
Guidelines	Dark Green	Dark Green	Dark Green
Diversity	Light Green	Dark Green	Dark Green
Scale Up Plan	Dark Green	Dark Green	Dark Green
Coordination	Dark Green	Dark Green	Dark Green
Community	Light Green	Yellow	Light Green
Training	Dark Green	Dark Green	Dark Green
M&E System	Orange	Orange	Orange
Procurement	Orange	Dark Green	Dark Green
Facility Coverage	Dark Green	Dark Green	Dark Green
Client Coverage	Light Green	Light Green	Light Green
AHD	Yellow	Light Green	Light Green
Key Populations	Orange	Dark Green	Dark Green
TB/HIV	Orange	Yellow	Yellow
MCH	Red	Orange	Orange
NCD/HIV	Grey	Yellow	Yellow
Family Planning	Orange	Orange	Light Green
Quality	Orange	Dark Green	Dark Green
Impact	Red	Red	Red

Figure 2 shows the results of the country team's recent self-assessment using the CQUIN DART capability maturity model for years 2022, 2023 and 2024. In 2024, Uganda achieved the most mature stage (dark green) in 14 domains, while 5 domains remained in the least mature (red) stage.

- Generally, last year's scores were maintained
- Noticeable improvement in the Family Planning domain, attributed to implementation of action plans from the C3C visit to Mozambique
- The Community Engagement domain bounced back to Light Green, attributed to the continuous inclusion and engagement with MOH team
- Integration domains (TB, NCD, MCH) and M&E are still immature and have been prioritized for 2025
 - M&E interventions: dissemination of revised M&E toolkit and targeted data calls
 - Plan to conduct an impact evaluation for the DSD program

DSD IMPLEMENTATION

Figure 1: DSD Model Mix: Trend Over Time, 2022-2024



- Fast Track remains the most preferred less-intensive model (LIM) approach.
- There are no significant changes in the distribution of recipients of care across various community and facility DSD models.
- The country has updated its M&E tools, enabling the reporting of multi-month dispensing (MMD) data at the national level from next year.

CQUIN ENGAGEMENT AND ACHIEVEMENTS

Uganda joined and participates in the following Communities of Practice (CoP):

- Differentiated TB/HIV, DSD for key populations, Community Engagement, DSD Coordinators, Advanced HIV Disease (AHD), Differentiated HIV Testing Services (HTS), Differentiated M&E
- Participating in CoP calls and webinars which has shaped DSD implementation
- Uganda participated in a country-to-country visit on FP integration in Mozambique which provided insight on how to integrate and monitor FP services into different community models.
- Key lessons learned from CQUIN meetings include innovations on integration of other services into HIV management and tapping into the private sector for improved service provision to PLHIV.
- Integration of FP and other services into the community pharmacy is being piloted.
- Through increased engagement with the private sector on cost-sharing services to PLHIV, Uganda is now able to provide NCD drugs at reduced prices through the pharmacies.

AHD CAPABILITY MATURITY MODEL SELF-STAGING

Figure 3: AHD CMM results, 2024

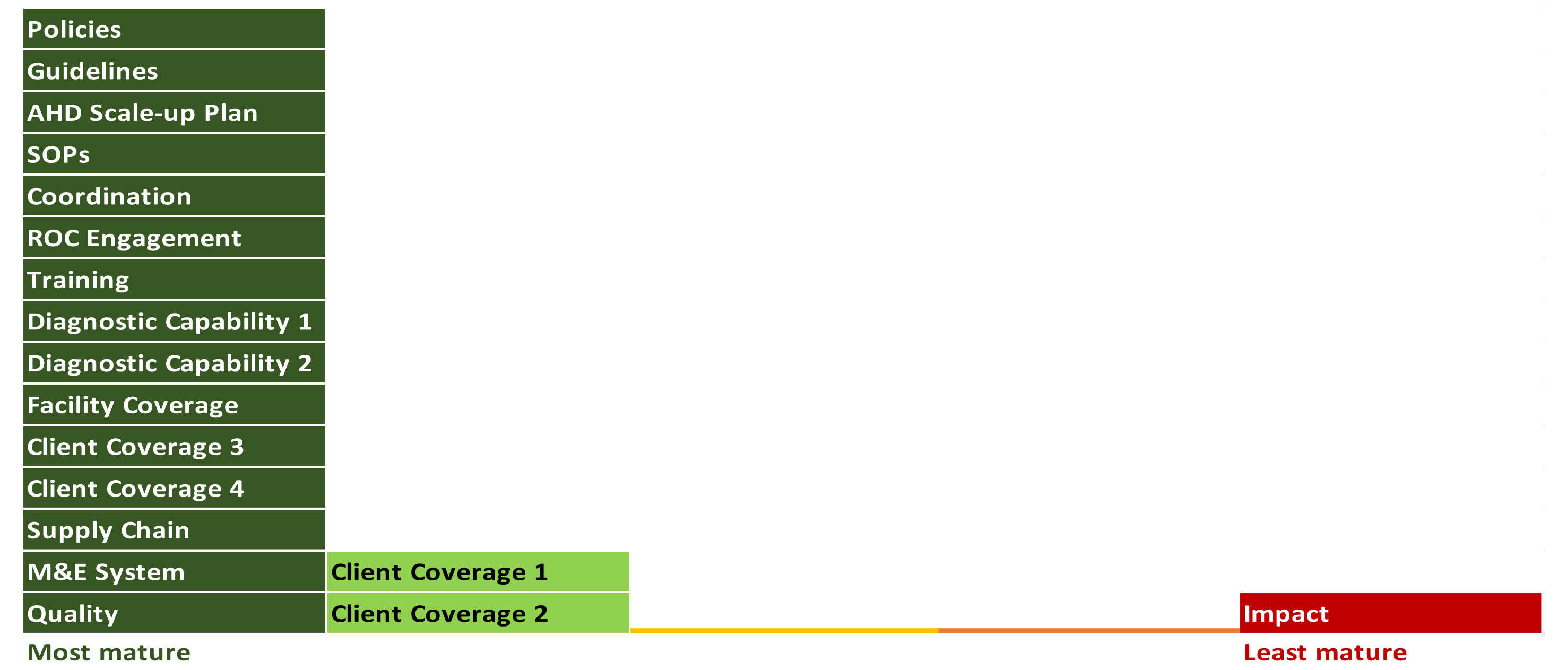


Figure 3 shows the results of the country team's recent self-assessment using the CQUIN AHD capability maturity model. In 2024, Uganda achieved the most mature stage (dark green) in 18 domains, while 1 domains remained in the least mature (red) stage.

dHTS CAPABILITY MATURITY MODEL SELF-STAGING

Figure 4: dHTS CMM results, 2024

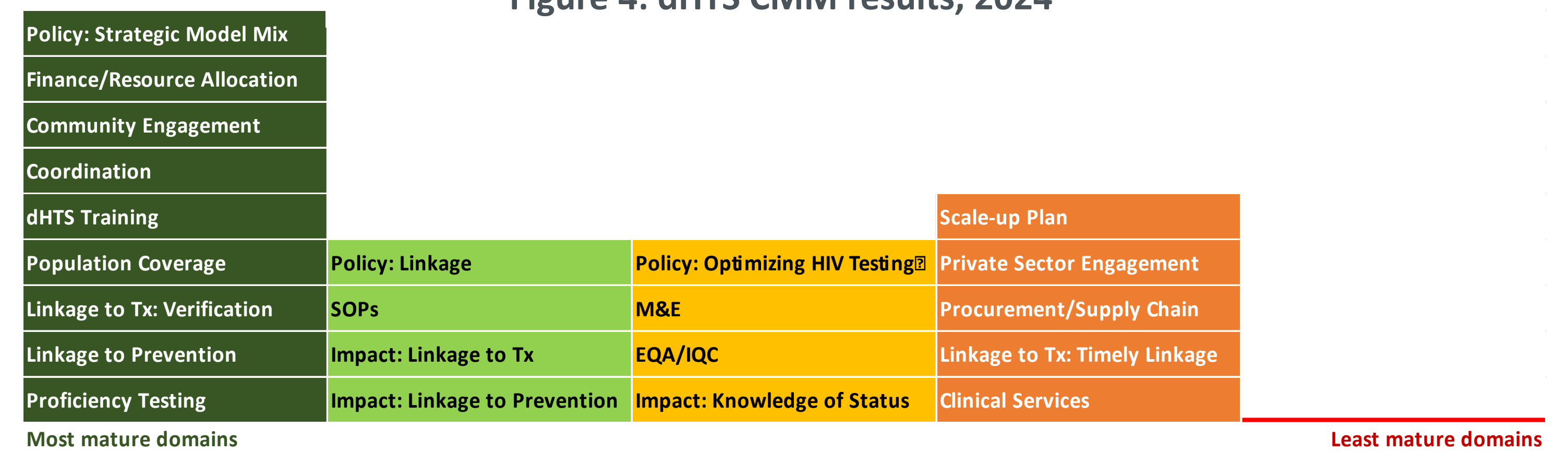


Figure 4: shows the results of the country team's recent self-assessment using the CQUIN dHTS capability maturity model. In 2024, Uganda achieved the most mature stage (dark green) in 13 domains, while 8 domains remained in the least mature (red) stage.

NEXT STEPS / WAY FORWARD

The enabling domains across the three CMMs are more mature than the outcome domains. M&E and the supply chain are two areas to be prioritized. The identified integrated approach to address outcome domains includes finalization of the integration guidelines and creating a road map, advocacy strategy, and M&E framework including integrated SQA tools for service. The plans for person-centered services include implementing guidelines for integration, scaling up the use of the CQI audit tool to improve clinical outcomes through reduction in missed opportunities at site-level, addressing gaps in uptake of NCD/TB/FP services in the HIV setting, scaling up the implementation of client satisfaction surveys, and ensuring community engagement in service delivery.

