

# Sierra Leone Country Updates

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# Presentation Outline

- **Where are we now?**

- Progress towards 95:95:95 targets
- Treatment: capability maturity model (CMM) self-staging results
- DART model mix and MMD
- AHD: CMM self-staging results
- dHTS: CMM self-staging results

- **How did we get here?**

- Stakeholder coordination and prioritization processes
- Engagement with CQUIN
- Update on Country Action Plans
- Update on Integrating Non-HIV and HIV Services
- Program sustainability efforts and opportunities
- Successes and Challenges
- **2025 Priorities**

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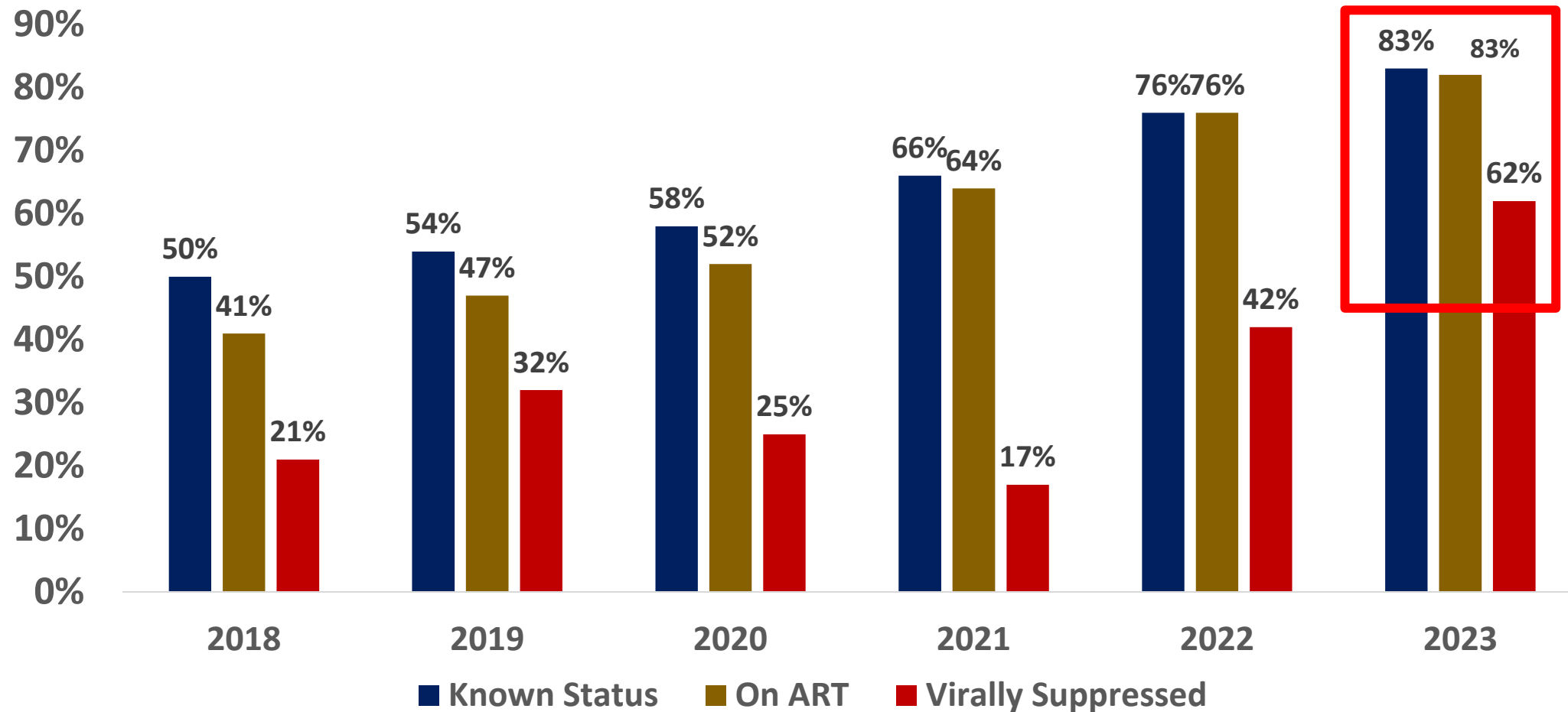
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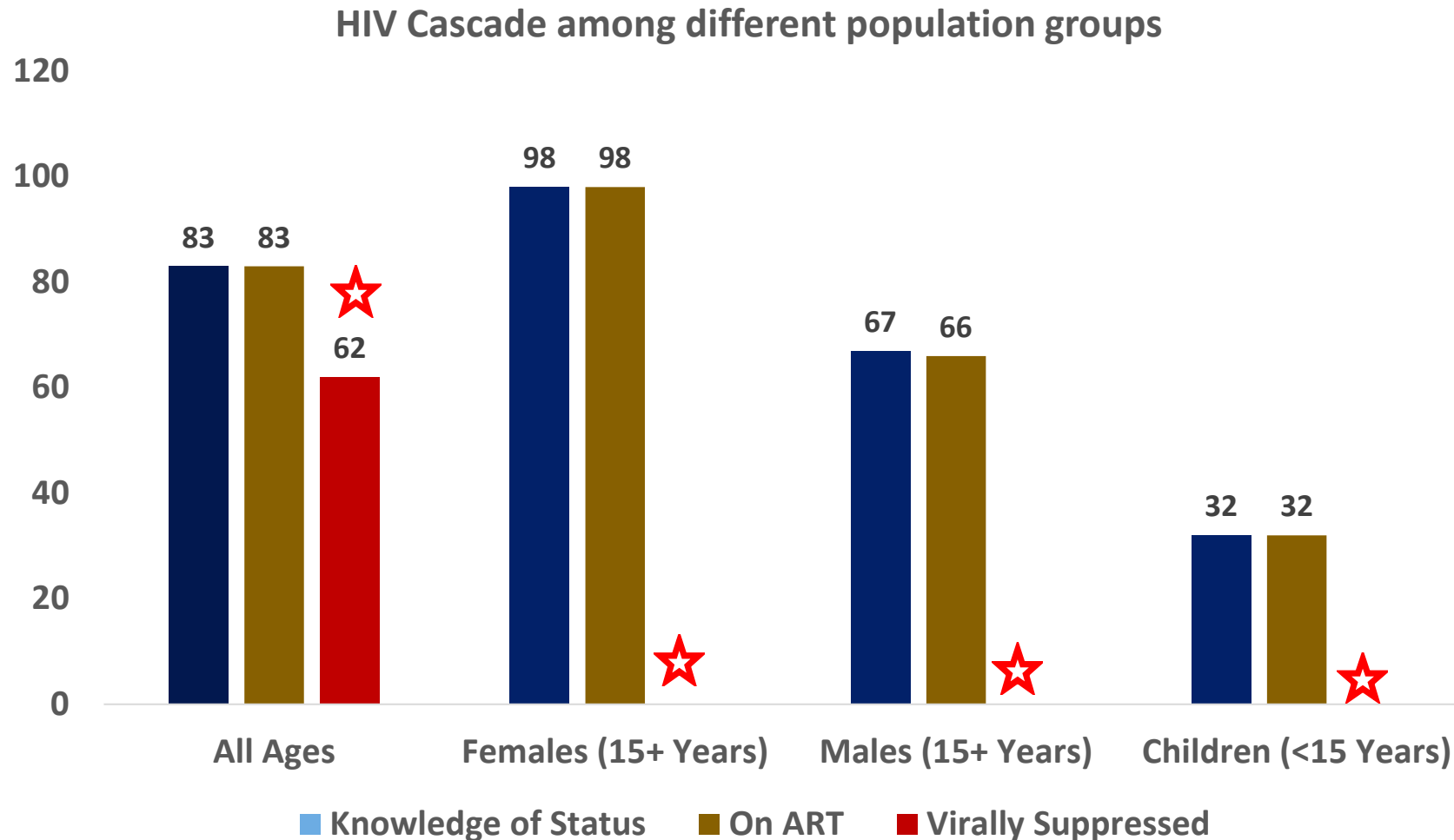
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# Progress Towards the 95:95:95 Targets (Spectrum 2024) - 1



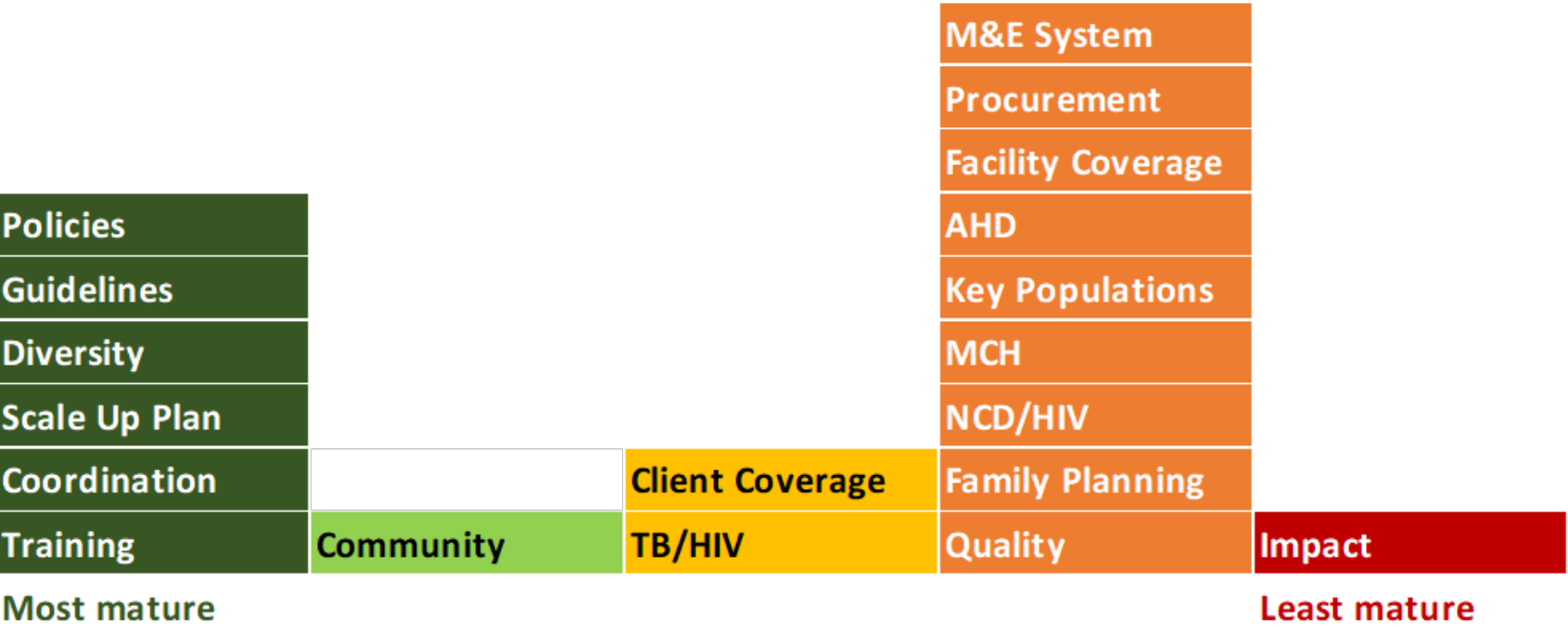
# Progress towards the 95:95:95 Targets (Spectrum 2024) - 2



★ The country has not conducted enough VL testing to estimate the level of suppression for the sub-populations

- Current VL coverage is approximately 20%

# Sierra Leone Treatment CMM Results: 2024



Sierra Leone has made progress in implementing high-quality person-centered care

- 1,006 HCW have been trained from the planned 700 (144%) HCW in DSD in 15 of 16 districts
- The revised M&E reporting tools have been rolled out which include key DSD indicators. However, there is need to disaggregate VLS data by DSD model type

# Sierra Leone Treatment CMM Results: Change over Time

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

- Notable improvement with diversity, coordination, community engagement and training domains
- Observable regression with procurement and client coverage domains which is attributed to intermittent commodity supply
- There is stagnation mainly with the M&E system domain and most of the outcome domains which require maturity, first, with the enabling domains

## Challenge:

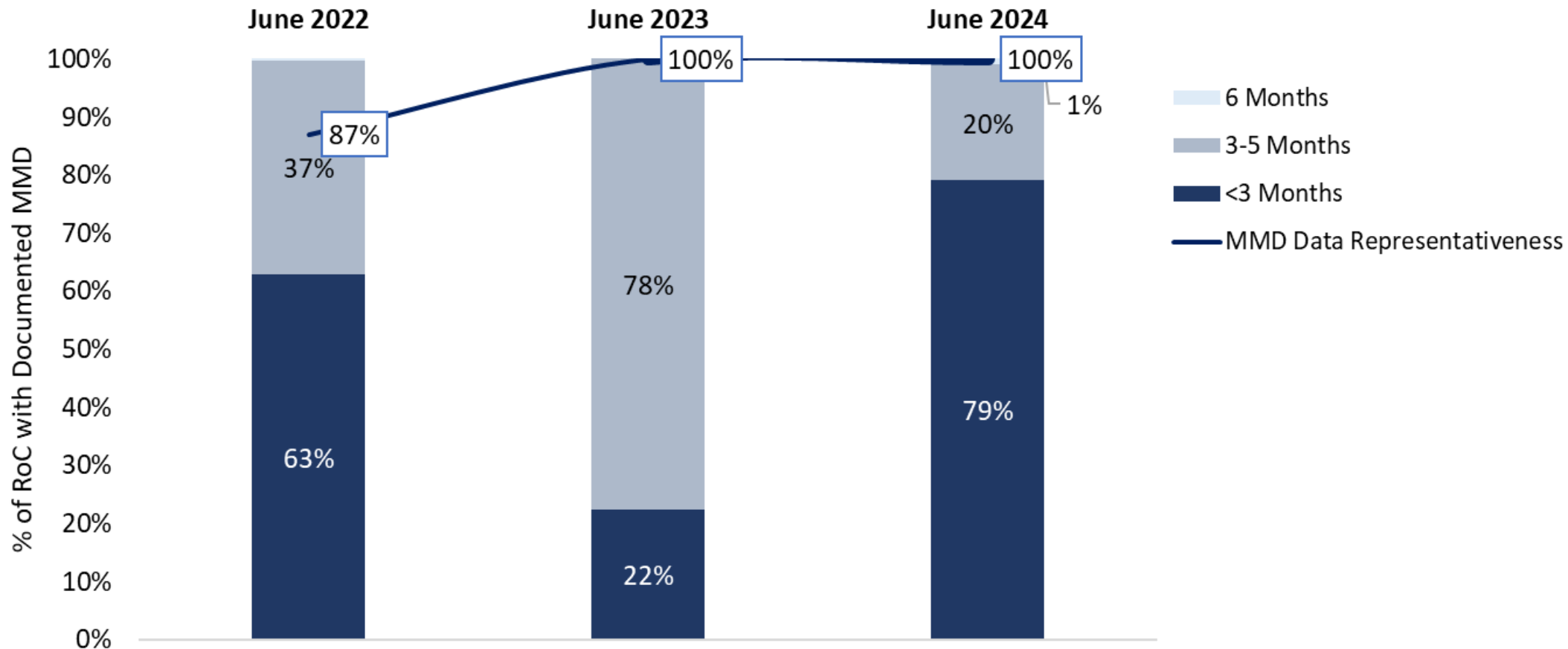
- Sub-optimal laboratory operations for VL/EID testing due to prolonged VL machine breakdown
  - **Action:**
    - ❖ Installation and operationalization of the C5800 equipments
    - ❖ NACP developed VL/EID accelerated response plan to reach 58,000 PLHIV within 1 month of equipment operationalization

# Sierra Leone Differentiated Treatment Model Mix

- Currently, DSD model mix data is unavailable. Model Mix data was still being uploaded into the updated DHIS2 system hence the high proportion [~89%] of the national TX\_CURR under unspecified DSD model
- There is continuous engagement with all district pharmacists and M&E focal persons to support MMS/MMD implementation and enhance reporting
- Shifting the last mile commodity distribution by utilizing the Principal Recipient 2 [World Vision Sierra Leone] to provide technical support in commodity security



# Sierra Leone Differentiated Treatment: Multi-month



- Significant reduction in the roll-out of 3+ MMD was recorded in 2024 [20% in June 2024 as compared to 78% in June 2023] because of delays in last mile distribution necessitating <3MMD
- Only 1% of RoCs received 6+MMD due to late arrival of the 60 to 90 pack-size ARVs

# Sierra Leone AHD CMM Results 2024

		Client Coverage 1	AHD Scale-up Plan	
Policies		Client Coverage 3	Coordination	
Guidelines		Client Coverage 4	Diagnostic Capability 1	Diagnostic Capability 2
SOPs		Supply Chain	Facility Coverage	Client Coverage 2
ROC Engagement	Training	M&E System	Quality	Impact
Most mature			Least mature	

- Policies, guidelines and SOPs on AHD are in place and facility-level trainings are ongoing
- Least maturation is observed in client and facility coverage, diagnostic capability, impact M&E and Quality of AHD services domains
  - Scaling up of facility and client coverage plus diagnostic capability will be of priority in 2025

# Sierra Leone AHD CMM Results – Trend over Time (2022-2024)

Domains	2022	2023	2024
Policies		Yellow	Dark Green
Guidelines		Light Green	Dark Green
AHD Scale-up Plan		Light Orange	Orange
SOPs		Light Green	Dark Green
Coordination		Red	Orange
ROC Engagement		Light Green	Dark Green
Training		Light Green	Light Green
Supply Chain		Yellow	Yellow
M&E System		Yellow	Yellow
Diagnostic Capability 1		Light Orange	Orange
Diagnostic Capability 2		Red	Red
Facility Coverage		Light Orange	Orange
Client Coverage 1		Light Orange	Yellow
Client Coverage 2		Red	Red
Client Coverage 3		Yellow	Yellow
Client Coverage 4		Yellow	Yellow
Quality		Light Orange	Orange
Impact		Red	Red

SL continues to recognize and prioritize the role of AHD management in achieving epidemic control

## Completed and ongoing work to address the gaps:

- Revised and validated national treatment guidelines to the AHD package of care
- Training on AHD as part of the revised national guidelines is ongoing
- Current DSD TWG is expanded to include coordination of AHD interventions
- Plans to improve: Scale-up coverage and fidelity to AHD guidelines' implementation

# Sierra Leone Differentiated Testing CMM – March 2024

	Finance/Resource Allocation			
	Community Engagement		Scale-up Plan	
	Private Sector Engagement	SOPs	Linkage to Tx: Verification	dHTS Training
Policy: Strategic Model Mix	M&E	Coordination	Linkage to Prevention	Clinical Services
Policy: Optimizing HIV Testing <sup>2</sup>	Procurement/Supply Chain	Population Coverage	EQA/IQC	Impact: Knowledge of Status
Policy: Linkage	Linkage to Tx: Timely Linkage	Proficiency Testing	Impact: Linkage to Tx	Impact: Linkage to Prevention
Most mature domains			Least mature domains	

- Low maturation with the M&E domain is mainly attributed to the delays in the roll-out of the new reporting tools
- Budgetary constraints impacted the implementation of EQA/IQC activities
  - Partners conducted EQA/IQC. However, the coverage was not country-wide
  - Delay in the hiring of lab personnel resulted in reprogramming of EQA/IQC funds

dHTS	
Domains	2024
Policy: Strategic Model Mix	Dark Green
Policy: Optimizing HIV Testing	Dark Green
Policy: Linkage	Dark Green
Finance/Resource Allocation	Light Green
SOPs	Yellow
Scale-up Plan	Orange
Community Engagement	Light Green
Private Sector Engagement	Light Green
Coordination	Yellow
dHTS Training	Red
M&E	Light Green
Procurement/Supply Chain	Light Green
Population Coverage	Yellow
Linkage to Tx: Timely Linkage	Light Green
Linkage to Tx: Verification	Orange
Linkage to Prevention	Orange
EQA/IQC	Orange
Proficiency Testing	Yellow
Clinical Services	Red
Impact: Knowledge of Status	Red
Impact: Linkage to Tx	Orange
Impact: Linkage to Prevention	Red

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

AHD	
Domains	2024
Policies	Dark Green
Guidelines	Dark Green
AHD Scale-up Plan	Orange
SOPs	Dark Green
Coordination	Orange
ROC Engagement	Dark Green
Training	Light Green
Supply Chain	Yellow
M&E System	Yellow
Diagnostic Capability 1	Orange
Diagnostic Capability 2	Red
Facility Coverage	Orange
Client Coverage 1	Yellow
Client Coverage 2	Red
Client Coverage 3	Yellow
Client Coverage 4	Yellow
Quality	Orange
Impact	Red

# Overview of HIV Program 2024 CMM Results

- Enabling domains are generally most mature in dHTS and DART CMMs
- Key areas of improvement include M&E systems, quality, facility and client coverage and the impact domains

Outcome domains will be improved by:

- Improving M&E systems to enable metrics on coverage
- Scaling-up client, facility ART and AHD services coverage
- Scaling up community DSD models

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# Stakeholder Coordination and Prioritization Processes

- Held two DSD TWG meetings focused on program implementation and scope expansion (service integration)
  - NETHIPS a CSO held a meeting focusing on DSD implementation and scale up
- Held two engagement meetings with implementing partners to get technical and financial commitment for DSD rollout
  - IPs trained staff from their supported HF to implement DSD
  - IPs supported DSD TWG meetings
- NETHIPS and all KP CSOs actively participated in all coordination and engagement meetings

# Engagement with CQUIN-1

## In the past year

- Sierra Leone continued to improve learning through participation in eight communities of practice including M&E, dHTS, KP, AHD, Quality etc.
- CQUIN staff provided technical assistance to support on-boarding of the new ART Coordinator



# Engagement with CQUIN-2

## Key lessons learned and impact on country DSD implementation plans

Through strong collaboration with implementing partners, the NACP has accelerated DSD implementation through:

- Revision and roll-out of M&E of DSD reporting tools since January 2024
- Decentralized DSD capacity-building at the district level with district teams taking lead in DSD trainings
- In collaboration with IPs, accelerated DSD capacity building across all districts
- Riding on eMTCT to integrate aspects of DSD into RMNCH, TB and nutrition platforms

# DSD Performance Reviews: Main Findings

- Sierra Leone did not conduct a DPR during the period under review. However, the updated DHIS2 will be able to report on RoC DSD model type
- TB/HIV data was integrated into the national HMIS and TB/HIV joint supportive supervision has been strengthened
  - DQA was conducted in November 2024

# Update on Country Action Plans Implementation Progress - 1

## Activities that have been successfully completed include:

- Customization of the DHIS2
- Revised national data collection tools have been rolled out to all HF
- Commenced and completed data entry into the DHIS2 using the updated national HMIS reports
- Sensitized the DSD TWG on integration of non-HIV services including FP/HIV, MCH/HIV and TB/HIV
- Completed training of all KP service providers on DSD data entry into the HMIS
- DSD service implementation among KP has been scaled-up in 21 Drop-In-Centers

# Update on Country Action Plans Implementation Progress - 2

## Activities that are still underway include:

- DSD Performance Review (DPR)
- Integration of DSD into CHW SOW and DSD quarterly meetings at the district level
- Framework for AHD diagnosis and national AHD training

## Activities that were dropped include:

- Quality Improvement project implementation
- Strengthen existing adolescent youth-friendly centers to promote the integration of non-HIV services including FP/MCH and TB/HIV into DSD
- Co-creation/co-adaptation of RoC exit interviews/satisfaction survey

# Update on Integrating Non-HIV and HIV Services

Sierra Leone has integrated the screening and management of NCDs including mental health into the national consolidated HIV guidelines

- **Defining integration:**

- The country has developed an integrated work plan for HIV, TB and NCDs led by the Directorate of Disease Prevention and Control of the MoH

- **Community Engagement:**

- The community is always part of all service implementation and NETHIPS is leading the community lead monitoring component

- **Defining integration metrics**

- The integrated work plan is costed with targets

# Program sustainability efforts and opportunities

## Sustainability of DSD activities

- The position of DSD advisor is now occupied by a MoH paid staff
- NETHIPS (a CSO) is also following up and monitoring DSD service provision
- The MoH is developing a national sustainability road map which will capture DSD
  - Plans are underway to have DSD focal persons in the 16 DHMTs
- **National sustainability roadmap**
  - DSD will be fully factored into the on-going national sustainability road map
  - Integrated service delivery will be factored into the ongoing national road map

# DSD Implementation Successes in 2024

- DSD indicators have been included into the updated HMIS
- ~25% of clients are now in the LIM DSD model
- Health care workers have been trained on AHD from 162 (25%) HF
- AHD indicators have been included in the HMIS

# Challenges in DSD Implementation in 2024

- Competing activities make it difficult to secure TWG meeting dates and to implement planned activities
- Inadequate resources for printing of adequate data collection and reporting tools
- Up to 21% of the national TX\_CURR received >3 MMD
- Staff attrition from HIV service sites to non-HIV services sites
- DSD Advisor position took 5 months to fill
- Delayed replacement of a new ART Coordinator



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# DSD Priorities for 2025

## DSD-related goals for 2025

- Roll-out of DSD services to all ART sites
- Roll-out AHD services to all high-volume HF
- Finalize retrospective DSD data entry into the DHIS2 and conduct continuous mentorship for service providers on DSD reporting

## Priority areas for 2025

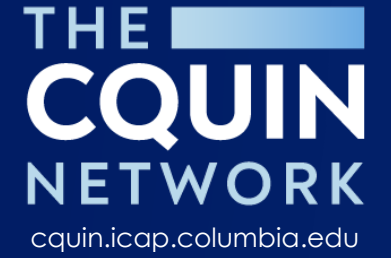
- Adoption of an electronic data collection system that is utilised in Malawi (the Scanform technology)
- AHD service implementation

# Acknowledgements

The NACP acknowledges all the funders of HIV in Sierra Leone including GoSL, GF PEPFAR, UN family, CQUIN and all others.

The support of the below mentioned IPs is highly appreciated

1. JHPIEGO
2. SOLTHIS
3. AHF
4. PIH
5. ICAP



Thank You!

