

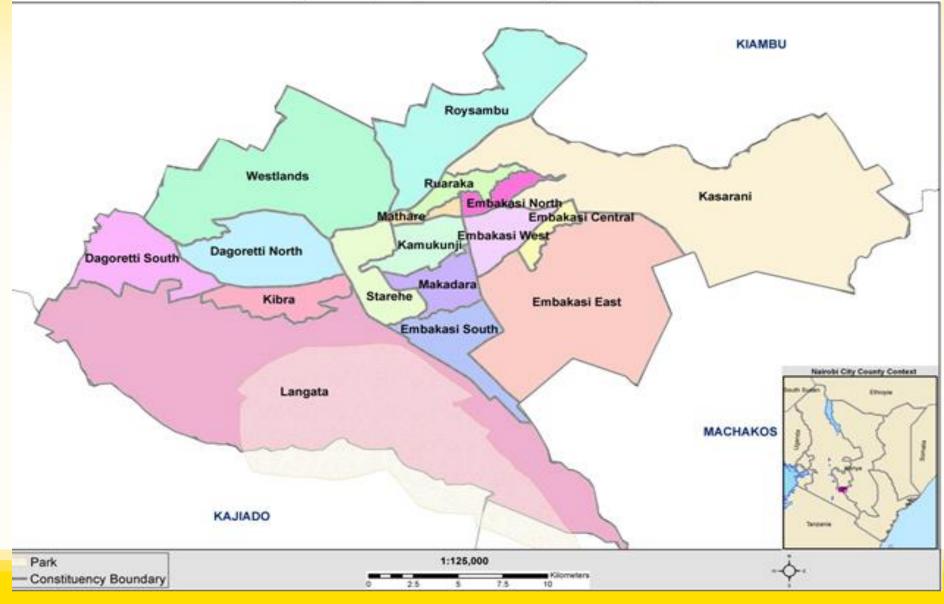
# Our Journey in Achieving Universal Test and Treat, Towards the 2<sup>nd</sup> 90



### Outline of Presentation

- 1. County Background
- 2. ART Scale up in Kenya
- 3. Nairobi 90-90-90 Cascade
- 4. Strategies Adopted
- 5. Challenges
- 6. Next Steps

#### Nairobi City County Map - Constituency Boundary



Background

Description	Kenya		Nairobi City	
Total Population	47,848,479		4,941,708 (10.3%)	
HIV Prevalence	4.8%		6.1%	
People living with HIV/AIDs	Overall	1,493,382	190,993 (12.8%)	
	0-14 Years	105,213	8,137 (7.7%)	
	10-19 Years(Adolescents)	105,230	10,604(10%)	
	Adults	1,388,169	182,856(13.2%)	
New Infections	Overall	52,767	7,159 (13.6%)	
	0-14 years	7,978	660(8.3%)	
	10-19 Years(Adolescents)	8177	1222(14.9%)	
	Adults	44789	6499(14.5%)	
Mother-to-child transmission	11.5%		8.5%	
HIV related Deaths	28,214		2,612	

### Health Care Facilities Inventory

Services	No of Sites					
	Public	Private	FBO	NGO	TOTAL	
HTS	99	202	64	16	381	
C.C.C	62	71	48	10	191	
Paediatric ART	63	50	48	11	172	
PMTCT	84	. 99	55	6	244	
VMMC	18	3	13	0	34	
IDU(Drop In Centers)	0	5	1	1	7	
Methadone	2	0	0	0	2	
MSM	0	5	3	1	9	
Sex Workers	1	5	2	6	14	
TB/HIV	77	68	55	10	210	
PrEP Services	34	12	23	10	79	
EMR	42	8	30	8	88	
HIVST Services	C	0	0	0	0	
HTS training	0	6	0	0	6	
SGBV	2	0	5	0	7	
EID	79	50	51	8	188	

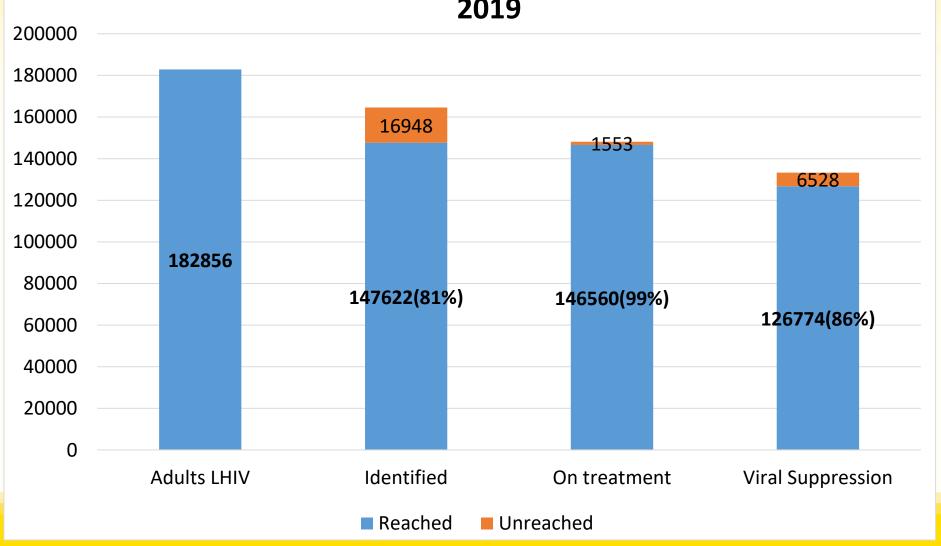
### ART Scale up in Kenya

- In June 2015, WHO recommended treatment initiation for everyone who is HIV-infected, regardless of their immunological status
- Kenyan National ART guidelines revised and launched on 5th July 2016 to make them consistent with the 2015 WHO guidelines on treatment eligibility
- Nairobi City County joint the rest of the counties to implement the new guidelines

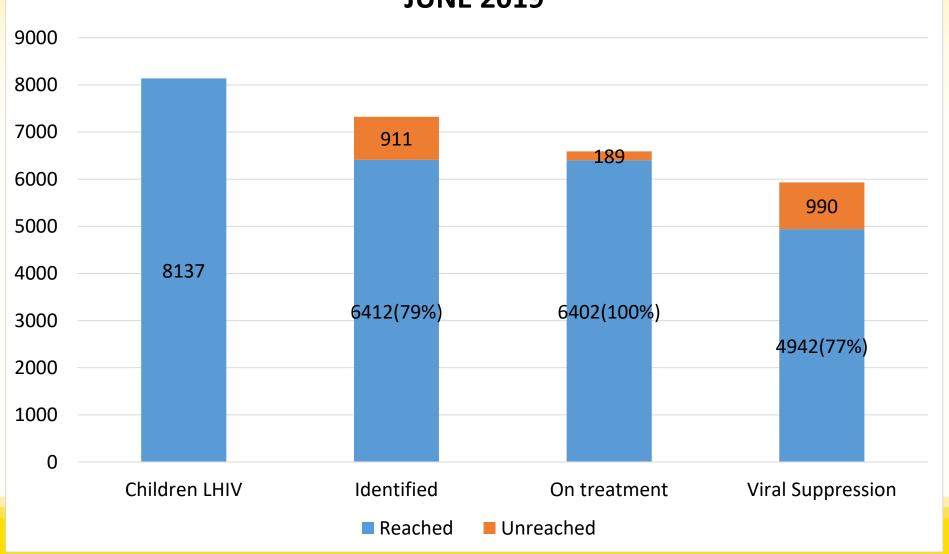
# ART CASCADES AS AT JUNE 2019



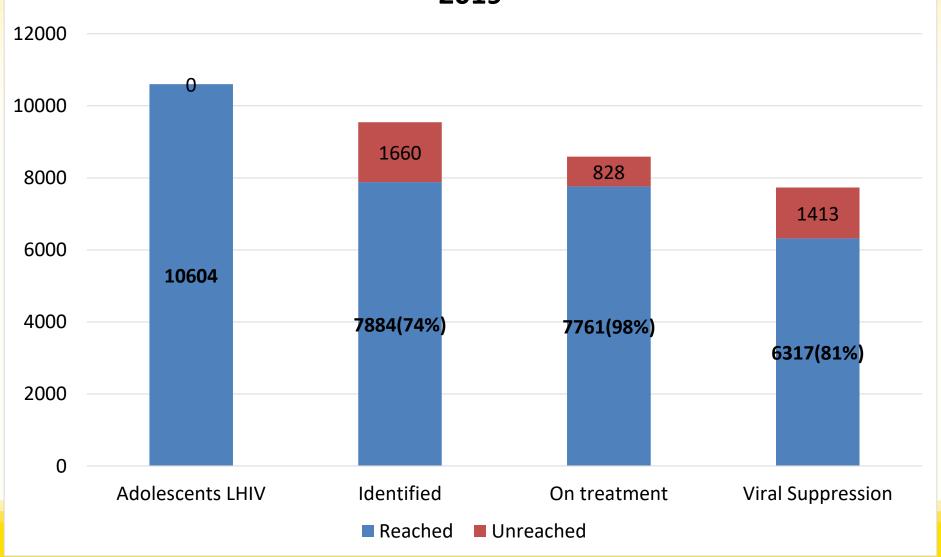
### PROGRESS TOWARD 90-90-90 FOR ADULTS AS AT JUNE 2019



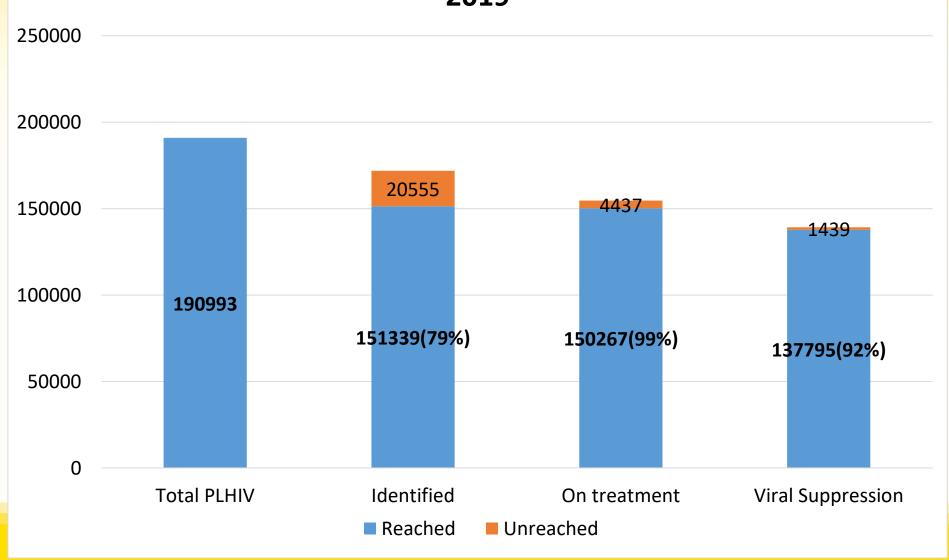
### PROGRESS TOWARD 90-90-90 FOR CHILDREN AS AT JUNE 2019



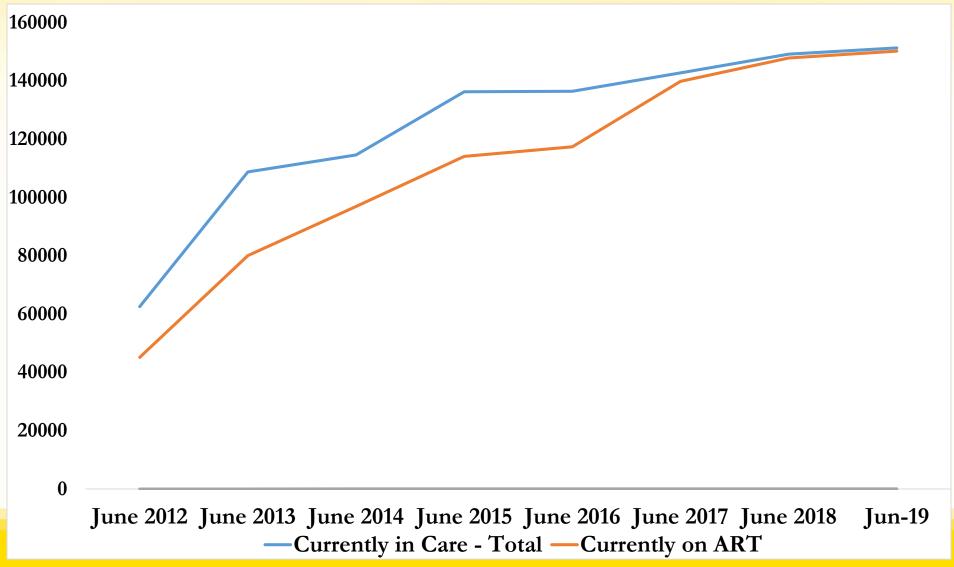
### PROGRESS TOWARD 90-90-90 FOR ADOLESCENTS JUNE 2019



### PROGRESS TOWARD 90-90-90 FOR ALL PLHIVS JUNE 2019

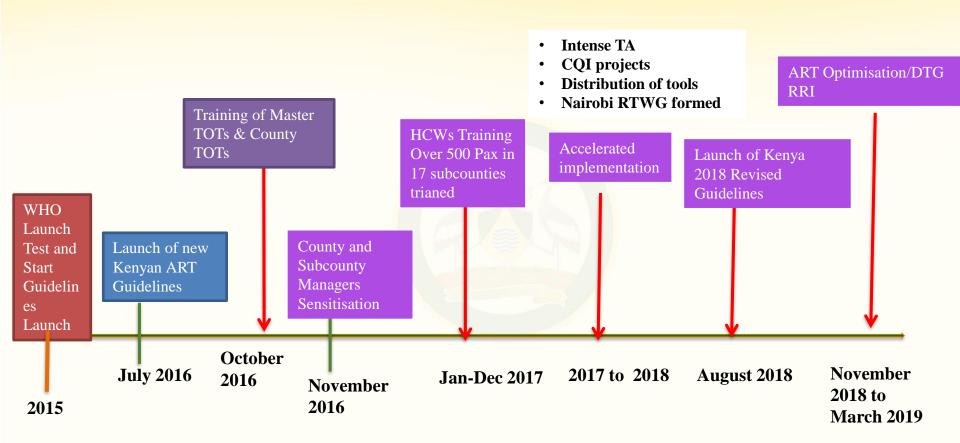


### Our Journey Achieving the 2<sup>nd</sup> 90



How did we achieve this?

### Implementation Road Map



Continued on site mentorship and review of strategy based on lessons learned

### Test And Start Process and Strategy

- Line listing of patients on care but not on ART
- Sensitisation of peer educators and case managers
- Patient Education. **Treatment Literacy** materials adopted
- Community Tracing using case managers
- Adopted appointment and defaulter tracing registers/phones
- SMS reminders

Known positive patients on Care But not on ART

**Newly Identified Positive** Patient.

- Escorting of newly identified patients to the clinician
- Follow up of patients not showing up for their clinic visit
- Adoption of Treatment literacy materials
- Case management for all newly identified HIV
- Patient support groups and peer mentors

#### **PROVIDER**

Competence of providers

> Increased Workload

Fear of patients getting lost

Fear of patients eloping IRIS

Commodity Security and Reporting

 Training and Retrainin of Health Care Provider

- Routine Mentorship and Support supervision
- Test and Start adopted as a QI initiative
- Differentiated Care models to decongest clinics
- Clinical Support Centre

 Setting up of Commodity Security TWG

- Training on forecasting and quantification
- Monthly ART and **Quarterly RTK** forecasting

### Investing in People

May-July-2019 Total **Facilities** 

visited 25

Mentors 28

Mentees 50

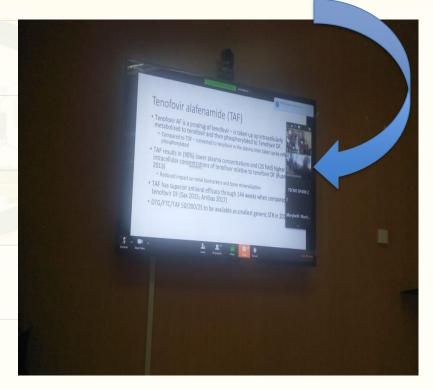
- Trained HCWs on ART, KP, Adolescents
- Trained on New ART tools
- Mentorship and Clinical Support Centre



### Clinical Support Center Attendance Oct 2017-Jul 2019

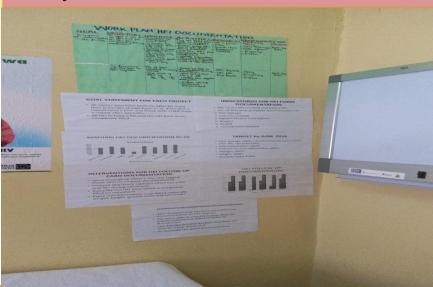


CME Slides on the Screen at the Central Hub, through ECHO is viewed by the SPOKEs (Seen on the Right-Hand Corner of the screen)



### CQI Approach

#### Facility QI Plan



**Performance Monitoring Charts** 



#### Mentorship at Site Level



Joint Supervision Chart Abstraction



### Support for Adolescents and PMTCT

**INNOVATIONS** 

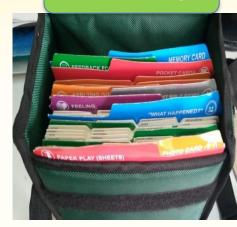


#### OTZ certification





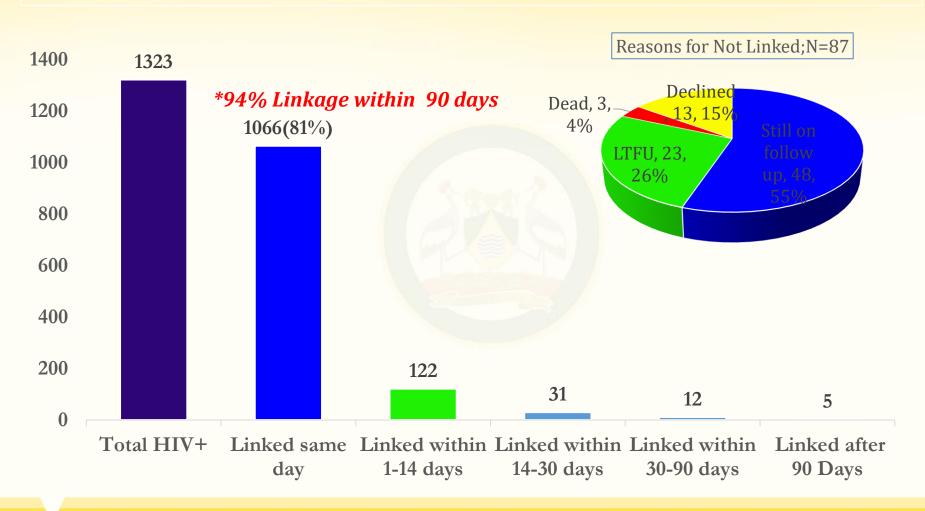
#### Green bag





### Increased Linkage to ART within 90 days

(April-June 2018 Cohort as at end of Sep 2018;N= 1323; n= 33 Facilities)



<sup>\*</sup>Case management model and Follow up of patients not enrolling the same day has resulted to improved linkage to care

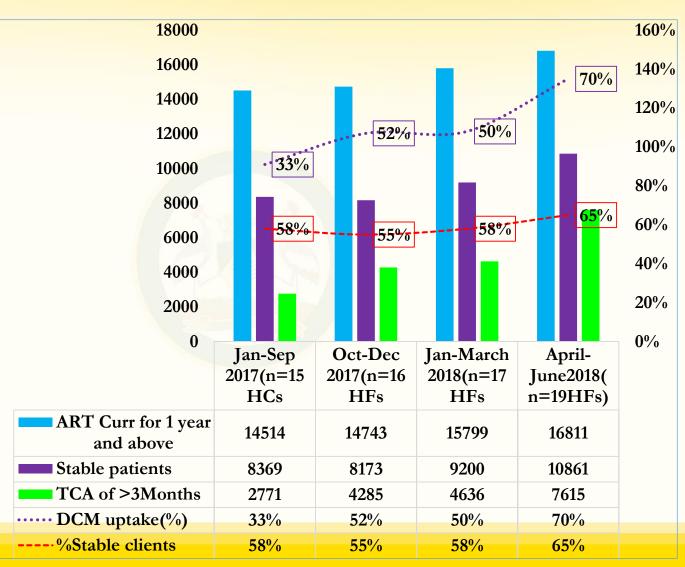
### Addressing the Challenge of Increased Workload



### Days

Differentiated Service Delivery Models

- Fast Track for Stable Patients
- ART Groups



\*Adoption of DCM models has led to decongestion of clinics

## Strengthening Health Information Systems

- DQAs done quarterly on all HIV related data
- Scaled up EMR for HIV services
- Biannual performance reviews held
- HIV dashboard online
- New tools received and facilities sensitized
- HIV Granulated Report Developed



#### Leadership and Governance

- Political good will and strong leadership (First Lady, Governor and CEC) with specific commitments for increased domestic HIV resource allocation
- Dissemination and Implementation of the Nairobi city county AIDS strategic plan aligned to the Kenya AIDS Strategic Framework
- Development of MTEF for HIV 2018 to 2021

#### **Partners Coordination**

- Strong partnership and coordination of stakeholders with increased private sector involvement
- Establishment of the County Multi-sectoral HIV and AIDS committee that meets quarterly to review progress by the various technical working groups(Adolescent/C&T,KP,M&E,EMTCT,VMMC,PREP)
- Coordinated Trainings and Supervision

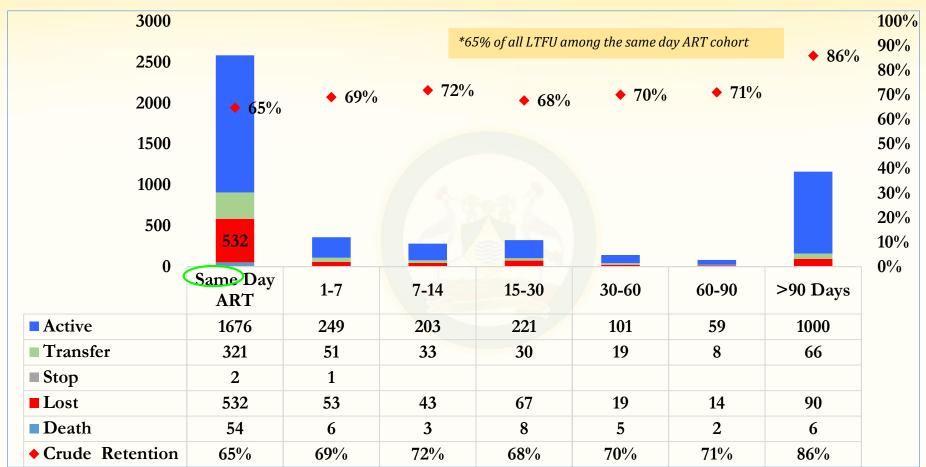




### Challenges

#### Test and Start 12 months ART Retention:

(Cohort Reviewed: Oct.2016-Sep.2017,n=4,942)



\*Majority of patients LTFU amongst patients started on Same Day ART. The county has strengthened its case management model and Treatment Literacy preparation to address this

### Acknowledgements

- Governor-Nairobi City County
- Ministry of Health
- UNAIDS
- IAPAC
- UMB
- AFYA JIJINI
- All Other Partners and Stakeholders

# ARVS SAVED OUR LIVES

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THANK YOU