Outcomes of a Nerve Centre Approach to achieving the 909090 targets in Johannesburg, South Africa

Mpefe E Ketlhapile
Johannesburg Metro Health District

City of Johannesburg Municipality
Gauteng
Introduction and Background

- South Africa is one of the countries still most affected by AIDS; with an estimated disease burden of 7,922,403\(^1\) of the HIV Pandemic and Johannesburg Metro District contributes 9% (727,006) of the disease burden.

- In 2019, Johannesburg Health District adopted the nationally data driven Phuthuma Project Management, structured “war room” approach to derive a solution of achieving the UNAIDS 90-90-90 goals.

- As at December 2021, JHB District including the City of Johannesburg achieved 93-77-89 of the goals.

- In March, 2022 the City augmented the Project Management Rooms with Nerve Centre Approach, a coordinated problem-solving model with enhanced interventions that aimed to drive program improvement.

- This paper describes the outcomes of a phased project management approach in improving the ART program performance from 2019 to 2022 with lessons and recommendations.
Aims and objectives of the Study

• The project aimed to improve the Anti Retroviral Program (ART) performance by addressing poor performing Indicators.

• Continuously, objectives of the ART Program is to ensure:
  i. Increased number of people knowing their HIV status,
  ii. Increased number of those with known status initiated and enrolled in care, and
  iii. Retention in care of persons enrolled into the ART program
Methods and Description

• Through the national project Operation Phuthuma, a focused approach to improve the ART program performance Indicators was implemented and replicated at District, sub-district and health care facility level

• Facets and Core Elements of the Project Management Approach, also termed a War room approach was:

• Strengthening of Management Systems, strengthening reporting frameworks, granular weekly and Monthly data analysis enhanced by performance dashboards, and Treatment Acceleration Plan meetings

• These fora entailed discussions and decisions within the nerve centres, guided by the quality of data

• A Nerve Centre Approach was later implemented as an intervention focused at facility level, where specific non performing indicators were targeted by improvement teams and interventions planned

• Intervention activities constituted health systems strengthening, systems re-design, staffing re-arrangement, training and continuous weekly and monthly information sharing and feedback

• Program performance data was analysed using descriptive statistics
## Methods: Timeline of Implementation of a Multifaceted, Phased Approach to improve UNAIDS 909090 Indicators

<table>
<thead>
<tr>
<th>Year</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>National level Implementation of the Project Management Rooms Model and Phuthuma War Rooms to improve UNAIDS 909090 Indicators (PMRs)</td>
</tr>
<tr>
<td>2020</td>
<td>Response to the COVID19 Pandemic, Restrictions through Health Systems Re-Design</td>
</tr>
<tr>
<td></td>
<td>- Strengthening of Health System to Pre-empt Loss to Follow up, Implement Systems Re Design for Service Delivery and Access within restrictive measures</td>
</tr>
<tr>
<td></td>
<td>- Governmental messaging of Continuity of care</td>
</tr>
<tr>
<td></td>
<td>- Strengthening of the Differentiated Models of Care to address retention in care, review of SOP</td>
</tr>
<tr>
<td></td>
<td>- A 12 month Repeat Prescription Strategy for all ART, TB &amp; NCDs patients to be provided with Medical Packs supplies at 3 months refill</td>
</tr>
<tr>
<td>2021</td>
<td>Province wide development of Catch Up Plans to address Loss to Follow Up, find positive patients, reduce number of patients waiting enrollment to ART</td>
</tr>
<tr>
<td></td>
<td>- Re Engagement, navigation of patients back to care through the Welcome Back Campaign</td>
</tr>
<tr>
<td></td>
<td>- Tracking, Tracing Patients and Referral linkages to care</td>
</tr>
<tr>
<td></td>
<td>- Resumption of Project Management Rooms</td>
</tr>
<tr>
<td></td>
<td>- District wide Quality Improvement training – targeting managers mangers for a better, supportive response to improving performance</td>
</tr>
<tr>
<td></td>
<td>- Monthly program data review, continuous mitigation planning</td>
</tr>
<tr>
<td>2022</td>
<td>Augmentation of Project Management Rooms through the New Phuthuma Nerve Centre Approach</td>
</tr>
<tr>
<td></td>
<td>- Core elements of emphasizing facility level monitoring of program performance looking at data tools (Barometer, Weekly data Charts)</td>
</tr>
<tr>
<td></td>
<td>- Systems Analysis of Service Delivery Processes Flow Systems when patients are provided with care; to identify service delivery gaps for each Indicator</td>
</tr>
<tr>
<td></td>
<td>- Establishment of Huddle Team meetings, led by Champions to review data and plan interventions</td>
</tr>
<tr>
<td></td>
<td>- Week by week charting of performance to analyse – within the service delivery process – which area contribute and lead to non-performance of data</td>
</tr>
<tr>
<td></td>
<td>- Identifying Drivers of program performance using the WHO HSS Building Blocks, thereby engaging management in addressing, planning for improvement</td>
</tr>
</tbody>
</table>
Results: Figure 1: Progress made towards the UNAIDS 90-90-90 targets: City of Johannesburg, Johannesburg Health District
Fig2: Progress with 909090 implementation: 2017-2021

HIV Cascade

![Graph showing progress with 909090 implementation from 2017 to 2021 for the City of Johannesburg Metropolitan Municipality. The graph includes data for living with HIV cascade, viral load done at 12 months cascade, living with HIV known status cascade, and living with HIV on ART cascade.](image)
Substantive achievement in HTS, With 90.7% of PLHIVs knowing their status

69.9% of persons knowing their status were enrolled into care in Jan to March, 2022

For Viral Load Done; performance is between 78% & 67% for the period Jul-Sep 2021, to Jan-Mar 2022

Viral Load Suppression was achieved at 91% in Jul-Sept 2021, 93% in Oct-Dec 2021 and Jan-March 2022
Fig 3: Tracking TROA Performance in Johannesburg Health District: comparative analysis 2020-2022

Total Remaining on ART in Johannesburg Health District: Apr2020/Mar2021, and Apr2021/Mar2022
Results Summary

- Johannesburg Health District has achieved 91% off the 1st UNAIDS target of 90% of people living with HIV (PLHIVs) who know their status.

- Progress is slow with enrolment of the PLHIV population into ART care, with achievement at 69.9% in the period Jan-March 2022.

- A significant upward trend has been marked for Total remaining on ART (TROA), with performance at 449,568 in March 2022 (Target 514,115).
Lessons Learnt

- It is critical to follow a structured Model, framework and approach to improve the ART program performance.

- Implementing a Project Management Approach and the Nerve Centre Approach illustrated that process improvement, granular data reviews, working with both Management and facility, Sub District Teams can rapidly improve service delivery and program performance.

- The multifaceted phased approach demonstrated core elements that drive outcomes, that can be replicated.

- The Nerve Centre model enforced rapid solutions development, continuous monitoring, quality improvement and information dissemination.
Lessons Learnt

- Training of managers in quality improvement, use of standardized tools, systems re-design and rapid data analysis to identify nonperforming indicators ensures accountability of health services teams in program monitoring.

- Even though the data shows that by the end of the financial year 20/21 90.1% of the population knew their status.

- Challenges are still seen where not all patients, and a high number are not initiated on ART.

- Also, our total patients remaining on ART target of 90% was achieved, showing impact of interventions such as the Nerve Centre approach in driving interventions.
Recommendations

- We recommend that a Nerve Centre Approach be continued and expand. In particular, this approach allowed stakeholder engagement and enhanced accountability.

- Interventions implemented drove outcomes and allowed for the rapid identification and management of health system factors impeding performance.

- When we put the approach in place, the Johannesburg Health District achieved 90.1% of progress for the 1st 90 of UNAIDS goals, and an impactful, upward trend for Total Remaining on ART.

- Through the approach with its core elements, overall service delivery improvements were seen, and JHB is progressing towards achieving the 909090 UNAIDS goals.
Thank you!
Re a leboha!
Siyabonga!
Gracie!
Gracia!