

BIAKUSU

ON S'ACHEMINE

Vers Une Génération Sans SIDA

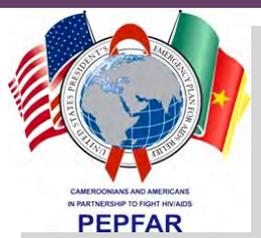


Vol. 002, Issue 008

AUGUST 2018



HIGHLIGHT OF MONTHLY ACTIVITIES





PRODUCTION TEAM

HIV-FREE *BIA KU SU* MAGAZINE

A monthly publication of the HIV-Free Project Team.

Website

www.cbchealthservices.org

Email

hivdoc.team@yahoo.com

Executive Editor

Prof. Tih Pius Muffih

Managing Editor

Kuni Esther

Editor in Chief

Abanda Alphonse

Tshimwanga K. Edouard

Deputy Managing Editor

Fri Delphine

Ismaila Esa

Associate Editors

Akuchu Ngwe Williet

Fotabong Nyachu Syntia

Photo Editor/Design

Fotabong Nyachu Syntia



WELCOME



PROJECT OBJECTIVES

Objective 1: Increase the proportion of People Living with HIV (PLHIV) with known HIV status in the Center Region from 237,035 to 346,781 by March 31, 2018.

Objective 2: Increase the proportion of PLHIV who access ART from 70% to 85.9% in the Center Region by March 31, 2018.

Objective 3: Achieve 90% of all PLHIV on ART having viral load suppression from 80% (70% in children and 80% in adults) by March 31, 2018.

Objective 4: Health System Strengthening and Governance.



EXECUTIVE SUMMARY

The month of August revealed a range of activities as the team maintained a meticulous spirit to ensure that targets are met in every way possible, and the HIV FREE Ce project continued to implement strategies in a bid to meet up with the set goals.

A High Level Visit to Cameroon by Dr. Tedd Ellerbrock, Chief of HIV Care and Treatment Branch, Division of Global HIV and TB CDC at Atlanta took place in the month of August. During this visit Dr. Ellerbrock introduced the concept of Granular Site Management (GSM), which is aimed to identify site-level problem, using site-level data, and generate site-level solutions in order to achieve excellence.

A staff coordination meeting was organized by the HIV FREE Centre project management to review achievement and challenges of Q3, and draft a way forward to meet the set target within the last six weeks of FY18 on one hand, and to keep project staff abreast with goals and expectations of FY19, which will effectively start on October 1st 2018 on the other hand.

Index Testing (IT) continues to prove effective in the identification of new HIV positive cases and this edition presents a weekly summary of DATA since July 2018.

Site leads, Focal Points and district mentors continued to follow up activities to ensure respect of standards in all 147 sites supported with PEPFAR Funds.

Happy reading!



HIGHLIGHTS

HIV-Free CE project equip staff with skills to increase output in FY3



HIV FREE CeR Manager Addressing staff during coordination meeting in Guiko Hotel

The HIV-Free CE project management organized a coordination meeting to review Q3 achievements and challenges, and draft a way forward to meet the set target within the last six weeks of FY18. The meeting which was organized on the 18th of August created a favorable environment for participants from the various program areas to review the performance of their sites in FY3. They also enumerated their challenges and together with other team members, they crafted suitable strategies to improve yield.

The meeting also had as aim to keep project staff abreast with goals, and expectations of FY19, which will effectively start on October 1st 2018. Key strategies to be implemented in FY19 were

highlighted for effective acceleration of HIV case finding, treatment and retention in order to accelerate epidemic control in the new financial year. The meeting was attended by 71 HIV-FREE Center Region Project staff.





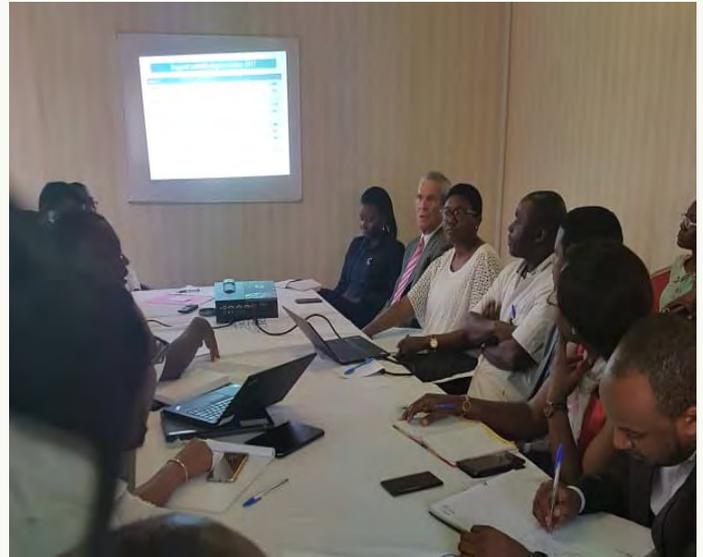
HIGHLIGHTS

High Level Visit to Cameroon by Dr. Tedd Ellerbrock, Chief of HIV Care and Treatment Branch, Division of Global HIV and TB CDC Atlanta

Dr. Tedd Ellerbrock, Chief of HIV Care and Treatment Branch, Division of Global HIV and TB at CDC Atlanta visited Cameroon in August 2018. During his visit, he held a high level technical meeting with staff from Ministry of Public Health (MOH), that is: Directorate of Family Health, Directorate for the Fight against Disease, Epidemics and Pandemics), National AIDS Control Committee, and Implementing Partners (CBCHB and EGPAF) to present the concept of Granular site management. In this meeting he said in contrast to SIMS, GSM goes beyond partner management to site management as there is shared accountability for site-level performance among all actors; Site staff, Implementing Partners, MOH, and CDC. Using site-level data, problems are identified together by all actors, there is a collaborative decision making to generate site-level solutions with the implication of all actors. According to Dr Ellerbrock, GSM is a better way to monitor sites and improve performance as the strategy has been proven to work in some other countries like Uganda, Nigeria, Haiti, Malawi, South Africa and Zambia, with excellent results.

Dr Ellerbrock, presented the essential program components to achieve excellence that can help reach Epidemic Control in all subpopulations. These components consist of 1) People, 2) Data, 3) Plan, 4) Goals and 5) Funds, and 6) GSM which is the newly added component.

The key components of GSM include: 1) Focus-
ing on a limited number of the largest sites in the



initial phase of its implementation, 2) Going beyond partner management to site management, 3) Using site-level data to identify site-level problems and generate site-level solutions, 4) Assigning responsibility for performance of each selected site to a CDC staff point of contact (POC), 5) Capacitating POCs in site-level quality improvement, 6) Sharing of responsibility of CDC leadership in site-level performance and generating site-level solutions.

The first ever GSM visits were organized from the 23th to 25th of August in 5 high volume sites including: Hopital Jamot Yaoundé (HJY), Hopital Centrale Yaoundé (HCY). Hopital District d'Efoulan (HDE), Saint Martin de Porres (SMP) and Hopital District de Cite Verte (HD Cite Verte). Feedback of this visit is awaited in weeks ahead.



HIGHLIGHTS

PMTCT CONCERTATION MEETING REVEALS IMPACT OF STRATEGIES IM-



PMTCT Stakeholders Regional Concertation Meeting

In a bid to improve the region's performance in the prevention of mother-to-child transmission of HIV (PMTCT), Pediatric HIV care and treatment, a-second Concertation meeting was organized . The two days session had 83 health actors from World Health Organization, regional, district and health facility level under the leader-

ship of the department of family health of the Ministry of Public Health.

This concertation meeting aimed to evaluate the level of implementation done in respect to the recommendations of the meeting of 08 June 2018. The performance of the Centre Region in PMTCT and Pediatric Uptake from January to June 2018 was reviewed and measures were taken to ensure better performance.

Results as analyzed by the Directorate of Family Health showed that from January to July 2018, 95% of pregnant women were tested out of the 84023 women received for ANC. The HIV positivity rate amongst these pregnant women stood at 4%, 3203 women tested positive and 2941 were put on ART giving a total linkage rate of 92%, and 83% of exposed children started nevirapine at 6-8weeks after delivery. *****

CE REGION MOTHER CASCADE





HIGHLIGHTS

Reinforcing staff and Hospital Directors skills to Effectively Manage KPs

In a bid to reinforce the capacity of Directors of Protestant hospitals as regards healthcare for Lesbians and Trans genders, an advocacy Workshop was organized from August 28 to 29, 2018 at Hotel Residence le Pilotis in Kribi by Affirmative Action. The meeting brought together 13 participants; 6 Church Administrators, 1 Christian Radio Journalist, 2-Representatives from KP Associations, one KP Focal Person from the CBC HS HIV-FREE Center Project, 1-Health Facility Staff and 2-Representative of Affirmative Action.

To ease health access for KPs clients, CBOs like AVAF (Association Pour la Valorization de la Femme) and TRANSAMICAL (Association for Transgender) were given the opportunity to make their needs known. They called on service provid-

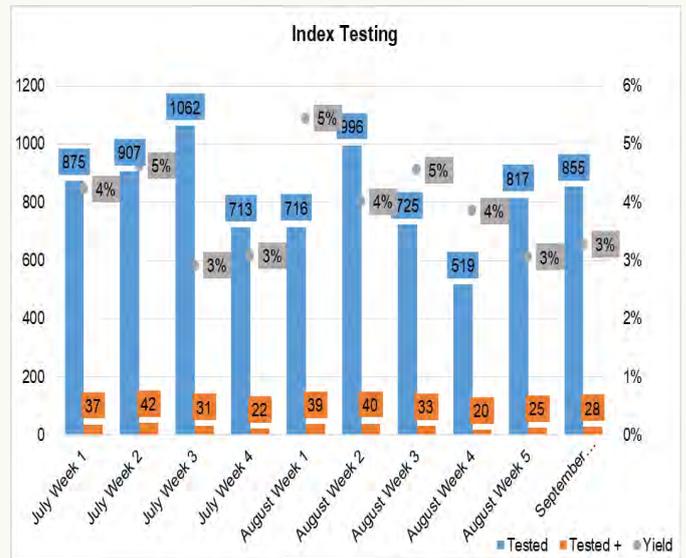
ers to adopt a non-judgmental attitude towards KPs. They also advocated for the need of oral sex protection kits to reduce direct contact.

The two day meeting ended with a couple of recommendations from both participants and facilitators. To mention a few, it was recommended that there be more similar sessions to build skills of care providers and the duration of the workshops should be increased so as to deal in-depth with some very practical measures as regards to KP

INDEX TESTING

INDEX CASE TESTING DEVELOPS

The Index testing team successfully tested sexual contacts, biological children and parents of Index clients identified at the various sites. The team held meetings to brainstorm on strategize to scale up index testing and proper documentation in the region. A remarkable improvement in index testing activities was noted. This can be clearly seen in the weekly analysis from July to September 7, 2018



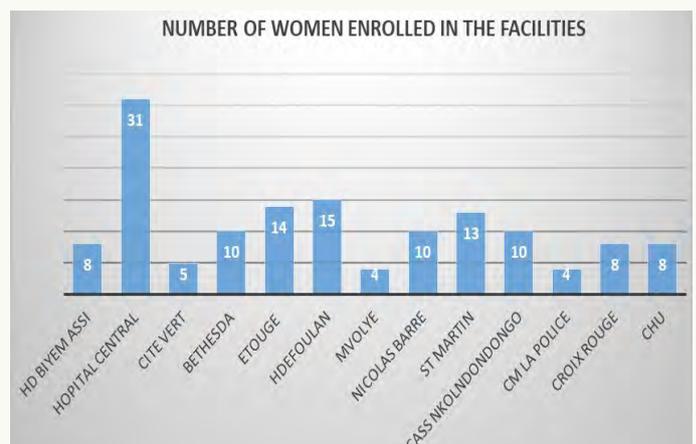
PMTCT

PMTCT COHORT MONITORING CONTINUES AT SITES

During the period of August, the HIV-free CE Project team developed a series of strategies to increase ANC/PMTCT uptake in the region. ANC outreach campaigns were intensified to actively search for pregnant women in all 23 supported health District by CDC/ PEPFAR.

The team started up CDC pilot sites for PMTCT Cohort Monitoring in July 2018 with training session held to pilot this strategy to improve uptake and retention for both mother and baby pairs in CM la Police, CHUY, CM Henri Dunant La Croix Rouge. During site visits, the team held a supervision session with PMTCT supervisors, Clinical Focal Persons and M&E mentors to evaluate the usability and understanding of Cohort Monitoring tools and data

Similarly to effectively follow up the implementation of PMTCT Cohort monitoring in some PEPFAR supported facilities, a review meeting was organized on August 14th at Guiko Palace, Yaounde. The meeting was geared at evaluating the performance of PMTCT Cohort Monitoring in ten health facilities that has been implementing PMTCT Cohort monitoring since Q2 and Q3 of FY18 and sites with best practices shared their experience for others to emulate.



MALE AS PARTNERS

Baseline assessment done in ten selected sites to improve male involvement in the HIV treatment cascade

According to the work plan of October 1st 2017-September 30th 2018, men uptake and involvement in the HIV treatment cascade is one of the priority activities. So far many strategies have been implemented to increase men uptake and involvement in HIV, notably Men as Partner Strategy in ANC/PMTCT services, and Index testing etc. A survey was planned recently by the HIV free Centre project management team to assess the uptake and involvement of vulnerable men to HIV in the HIV treatment cascade. Questionnaires were designed to capture the required information and data collection, the exercise which

begun on August 23rd, kicked off with the printing of 3500 questionnaires which were distributed at sites selected for this survey.

The sites involved in this survey are: Hopital Central de Yaounde, Hopital Jamot de Yaounde, Hopital de Districte de la Cite Verte, Hopital de Districte d'Efoulan, Etoug Ebe Baptist Hospital Yaoundé, Hopital de Districte Biyem assi, Hopital Presbyterien de Djoungolo, Cass Nkoldongo, Infirmierie Prison Centrale and Centre Dominicain et Hospitalier St Martin de Porres.

GENDER BASED VIOLENCE

Extending HIV services to the vulnerable population through the GBV strategy

Within the framework of extending HIV services to the vulnerable population in the region, the HIV-free CE project in line with the gender based violence response (GBV) sorted out persons who have been exposed to all forms of violence including rape and provided them with various forms of support.

In the month of August 2018, a total of 12 persons with violence related cases of rape, physical, psychological, judicial and economic exposure were

identified. Twelve were tested for HIV with none identified HIV positive. In the days ahead, the team is focusing to identify and provide required services.

KEY POPULATIONS

Maintaining and improving KP Services at sites

In order to enhance KP services in all HIV-Free project supported sites, the team met with KP implementing partners: CHAMP, GHSS, Horizon Femmes, Humanity First and RENATA on August 8 at the CHAMP conference hall. The main objective of this meeting was to improve collaboration between Drop In Centers (DICs) and health facilities index testing focal persons so as to increase HIV case identification and follow up. Also the meeting served as a platform to review the performance of each DIC in the month of July. After a meticulous analysis, it was realized that the overall linkage to care was satisfactory, For instance, Horizon Femmes recorded 100% linkage rate.

During this meeting, data on Tx-New and Active Files revealed that 916 KP patients are on treatment and 36 New cases were identified in the month of August



Monthly KP Partners Meeting in CHAMP; August 8th 2018

PEDIATRIC CARE AND TREATMENT

Improving paediatric and adolescent services in the CE

As the month of August unfolded, the project team continued with the implementation of set objectives. Key project activities included: onsite supervision of pediatric and adolescent care and activities, data monitoring of child/ adolescent testing and initiation of ART. The team also implemented strategies to ensure active monitoring of linkage to care and assisted in child/ adolescent friendly corner activities.

More so, three new child/adolescent clinics were created; at Infirmierie Prison Central, Centre Medical Nicolas Barre and Centre de Santé Catholique de Mvolye. The team achieved a great success in the

course of executing pediatric and adolescent activities.



VIRAL LOAD

Ensuring Proper patient follow up and documentation in VL registers



VL team assisting by cross checking registers at site

In the month of August, the viral load team carried out some activities along the viral load testing cascade in various sites. In this wise, the team worked with all DSD and TA sites to ensure that a favorable system is put in place to sort out eligible patients for viral load testing at the different health facilities; enhance demands of viral load test by eligible clients; and effective documentation of all ordered viral load tests.

The team equally ensured that all requested viral load tests were carried out and proper follow up of patients with unsuppressed viral load test results done in all sites. More so, the viral load team verified documentation of viral load test results, and traced all HIV positive children identified through

EID that have not been initiated on treatment since June.

As a result, a total of 1,875 VL test results were collected from 22 health facilities in the month of August, with 1675 suppressed viral load and 200 unsuppressed results giving a suppression rate of 89.54%.

SITE INFORMATION AND MONITORING SYSTEMS

SERVICES IMPROVE AT SITES AS SIMS INDICATE CHANGES

The Site Improvement Monitoring System (SIMS) is aimed at providing standardized review of service quality. It also seeks to highlight program areas that need further improvement and ensure data quality is the key component of program planning and implementation.

It's on this standpoint that the SIMS team showcased the activities and strides through SIMS reporting tools in the month of August. In this light, the team presented an overview of SIMS activities across the years in some sites: with main focus on monitoring progress of each site in line with set tar-

get and key program area evolution across project years.

The table below analyses the correlation between SIMS and data quality with a clear indication that Red needs urgent remediation, Yellow needs improvement, light green meets standard and dark green exceeds standard elements in 22 sites.

Correlation between SIMS and Data Quality

District	Health Facility	Mechanism	Date of SIMS visit	Linkage		Patient Tracking ART		ART Monitoring		Index testing				Quality Improvement	
				SIMS	Q3 Data	SIMS	Q3 Data	SIMS	Q3 Data	SIMS		Q3 Data			
Biyem Assi	EBHY	DSD	Apr-18	Green	114%	Green	50	Green	25%	Red	25%	Light Green	75%	Grey	Green
Biyem Assi	CHDSMP	DSD	May-18	Green	81%	Red	13	Green	22%	Grey	Grey	Grey	Grey	Grey	Yellow
Djoungolo	HGOPY	DSD	May-18	Grey	93%	Light Green	50	Red	9%	Grey	Grey	Grey	Grey	Grey	Grey
Nkoldongo	INFIMERIE PRISON CENTRAL	DSD	Jun-18	Yellow	94%	Green	52	Red	14%	Grey	Grey	Grey	Grey	Grey	Yellow
Efoulan	CS MVOLYE	DSD	Apr-18	Green	103%	Red	30	Red	17%	Grey	Grey	Grey	Grey	Grey	Light Green
Efoulan	HD EFOULAN	DSD	Apr-18	Light Green	117%	Light Green	104%	Red	17%	50%	50%	Grey	Grey	Grey	Yellow
Biyem Assi	HCY	DSD	Apr-18	Grey	84%	Light Green	-45%	Yellow	11%	Grey	Grey	Grey	Grey	Grey	Yellow
Cite Verte	HD CITE VERTE	DSD	Apr-18	Grey	94%	Light Green	76%	Red	20%	50%	25%	25%	Grey	Grey	Yellow
Ebebda	HD EBEBDA	TA	Jul-18	Light Green	100%	Green		Grey	Grey	100%	Grey	Grey	Grey	Grey	Red
Mbalmbayo	HD MBALMBAYO	TA	Jul-18	Yellow	243%	Light Green		Red	Grey	50%	50%	Grey	Grey	Grey	Red
Monatele	HD MONATELE	TA	Jul-18	Yellow	62%	Yellow		Grey	Grey	50%	50%	Grey	Grey	Grey	Grey
Bafia	HD BAFIA	TA	May-18	Red	148%	Yellow		Red	Grey	50%	Grey	50%	Grey	Grey	Yellow
Obala	HD OBALA	TA	Jun-18	Red	59%	Yellow		Grey	Grey	50%	50%	Grey	Grey	Grey	Red
Nkoldongo	CMA ODZA	TA	Apr-18	Grey	62%	Green		Red	Grey	25%	Grey	25%	25%	Grey	Red
Biyem Assi	CMC NOTRE DAME	TA	Jun-18	Red	80%	Green		Red	Grey	50%	50%	Grey	Grey	Grey	Red

QUALITY IMPROVEMENT

QUALITY IMPROVEMENT INTERVENTIONS YIELDING RESULTS IN CER

Quality Improvement (QI) Interventions seeks to examine and improve retention, LTFU, Index Testing, Pediatric viral load testing, linkage rates. Thus, to ensure the achievement of set target in DSD sites, Quality Improvement (QI) site coaching visit and data collection elements activities were carried out. This was with the aim to track quality improvement interventions.

During this visit, the district mentors conducted over 62 QI working sessions in 45 sites with the support of the regional QI focal person. The team also reviewed and analyzed QI projects and QI data. On this note, retention rates were drawn from December 2017 to September 2018. CSC Mvolye

for example, witnessed a retention rate of 100% (above target) as can be seen below.



COMMUNITY INTERVENTIONS

SUPPORT GROUPS ON THE RISE TO BOOST RETENTION AND ART UPTAKE

To ensure the efficacy in the implementation of support group in the CER, a total of 42 support group meetings were held. Attended by over 954 participants, these sessions had as aim to boost the uptake of ART and encourage adherence in all sites. During these meetings ART was refilled to the afore mentioned participants during the month.

Working in collaboration with the HIV-Free CE project, the Community Health Program (CHP) also supported ART dispensation in 13 CBOs. The CHP team also identified 280 HIV positive cases and linked them to treatment.

The month faded out with a series of successes recorded in the domain of HIV testing, linkage and follow up of positive clients on ART. The most outstanding of this success is the creation of 3 new

SG; at Etoug- Ebe Baptist Hospital, CM Police- Yaounde and AD Lucem, making a total of over 43 SG in the region

N *	CBO	Treatment Site	CBO Co-horte	Nber of ART distribut-ed during the month	Nber of patients on ART during the month
1	AFASO	CHUY	278	66	278
2	AFASO	HCY	149	89	149
3	AFSU	HCY	144	42	144
4	CEAM	HCY	184	26	184
5	ANNO UR	HCY	56	06	56
6	NOLFOWAP	HD Byiem Assi	86	43	86
7	CHI MIS-SIONS	HD Byiem Assi	158	158	158
8	ALECO	HGOPY	187	56	187
9	RECAP+	HD Cité Verte	95	37	95
10	RENATA	HGOPY	105	35	105
11	TRAUMA CENTER	HD Biyem Assi	96	71	96
12	ARIPIA	HGY	70	45	70
13	ESPOIR ET VIE	HGOPY	65	15	65
TOTAL Distributed			2317	689	1673

SUR LE CHEMIN DU 90-90-90



CBC HEALTH BOARD

HIV-FREE CE PROJECT

Phone: (+237) 679405849 (CE)

E-mail: hivdoc.team@yahoo.co