

LE MARATHON DE L'OUEST

Vers un contrôle de l'épidémie dans la Région de l'OUEST

HIV FREE WEST REGION IMPROVES ON RETENTION



In this Edition:

- * **HIGHLIGHT:** as major highlight, the HIV-FREE WEST Region trained clinical mentors who implemented the SIMS activities in all 25 Health Facilities.
- * **STRIDE:** Worth noting is the great improvement of all 25 sites in Dec 2019, as they all turn green in retention.

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PRODUCTION TEAM



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Website

www.cbchealthservices.org

Email

hivfdoc.team@yahoo.com

Executive Editor

Prof. Tih Pius Muffih

Managing Editor

Esther KUNI

Editor in Chief

Alphonse ABANDA

Walters KUM

Deputy Managing Editor

Delphine FRI

Ismaila ESA

Associate Editors

Williet AKUCHU

Photo Editor/Design

Williet AKUCHU



WELCOME



PROJECT OBJECTIVES

- To increase the number of PLHIV with known HIV status by 4,818 individuals across all populations, with 30% (1,445) of individuals identified through high yield targeted (index) testing.
- To increase the number of PLHIV who access ART by 4,818(100% all cases identified) individuals through evidence informed rapid linkage strategies, & attain a 95% same day initiation rate.
- To increase 12 & 24-month ART retention across all populations to 95%(25,548 alive and on treatment by October 2020) and 90%(24,203 alive & on TX by October 2010???), by implementing differentiated models of ART delivery.
- To increase viral load coverage among PLHIV on treatment to 90% (24,203 patients have Viral load done by October 2020), and VL suppression rate to 90%(21,783 patients have suppressed VL results by October 2020).
- To increase ANC1 uptake to 80% in the region, PMTCT uptake to 100% and EID uptake to 95%.
- To scale up TB/HIV integration services to 100% of PLHIV and patients on TB treatment
- To improve health systems performance through increased
 - ⇒ Training and mentoring
 - ⇒ Supplementary clinical staff in health facilities; Doctors, Nurses, Case managers, Index testers, HTS counselors, Data/DAMA clerks (based on file)
 - ⇒ Implement the electronic data management system (DAMA) for data capture, quality assurance and reporting to GTR/RDPH
 - ⇒ Regular coordination meetings (monthly review meetings at health facilities/District level, quarterly at regional
 - ⇒ Quarterly supervision with RTG/RDPD



EXECUTIVE SUMMARY



The month of November to date, turned out to be a very practical and busy month in the lifespan of the HIVFREE West Region Project as the team brought all hands on deck to ensure that the road map laid on the ground was followed meticulously. The team continued to train, monitor, supervise, and attend key stakeholder meetings in a bid to enhance a smooth implementation of the project activities.

On November 1 and 2, 2019, a strategic two days M&E workshop was held at the Bafoussam HIV-FREE project office to educate staff on the new MER Guide. This was followed by a supply chain coordination meeting organized in Yaoundé at the CDC Conference hall, from November 26, 2019. In attendance were CDC, USAID, CBCHB, ICAP, GHSS, METABIOTA, EGPAF and GU

With Index testing introduced and adopted as a joker in identifying more positive cases in the community, more service providers were capacitated on its effective implementation. This saw the trainings and workshops on Efficient Case identification, New guidelines of HIV Care and Treatment, INH Prophylactic Treatment, supportive supervision using the SIMS Tool, viral load sample collection, conservation and transportation AND hiring and training of Bikers for Health on sample transport and documentation. Hence approximately 350 Health Care Providers (HCP) drawn from the 14 health districts and 25 project supported sites were trained. Other key project activities including onsite mentorships and capacity buildings, outreach activities, activity review and coordination meetings were executed

Key Population (KP) friendly services were also introduced by making initial contacts with some CBOs working with KPs out of Mifi District and mapping out KP hotspots in the Region. PMTCT Cohort Monitoring activities were equally introduced during this period. The project also provided funding for User Fees and advanced diseases from November to date.

All Project staff worked relentlessly to support activities in the domains of Index testing, PMTCT, adult Care and treatment, Pediatric care and treatment, PITC, HIV-TB integration, differentiated Models of Care in CBOs/Support groups, and Supply Chain in their respective health facilities. These joint efforts lead to the Project fully gaining grounds in the Region with palpable results, towards epidemic control in the West Region. This edition of Le Marathon de l'Ouest will provide details on key project activities for November and December 2019.

Enjoy reading!



ABOVE SITE LEVEL ACTIVITIES



M&E Team sets the ball rolling for proper documentation



M&E Coordinator presenting new indicators

According to the Principal investigator in his address to M&E staff, at program level, the purpose of monitoring and evaluation is to track implementation and outputs systematically, and measure the effectiveness of programs. It serves as a pivot to determine exactly when a program is on track and when changes may be needed. Monitoring and evaluation forms the basis for modification of interventions and assessing the quality of activities being conducted. These declarations were made during a strategic two days M&E workshop held at the Bafoussam HIV-FREE project office from November 1-2, 2019.

The main aim of the workshop was to update 19 M&E officers on the new MER guide and how to harmonize weekly reports across the three regions of zone-1. Within these two days, M&E officers were drilled on major changes in MER indicators. Here, the principles supporting this revision were

explained. Key changes in the MER 2.4 guide were presented, among which; new indicators, new disaggregation, reporting frequency, modifications to existing indicators and retired indicators. Participants also reviewed and harmonized the weekly excel & power-point reporting templates, data analysis at site level, methods of tracking lost patients and DQA strategies & tools. For better functioning, the M&E organizational structure and their job description was explained to them.

The HIV Free West project Manager closed the workshop with a word of encouragement for all the M&Es to continue to work hard because they are the eye of the project. He added that we should continue to strengthen collaboration with our partners of FHI 360, CHP and MOH so that we can together work as a team towards achieving our targets.



ABOVE SITE LEVEL ACTIVITIES



Doctors and Nurses trained on efficient HIV Case Identification



Principal Investigator in session 2 encouraging participants on new HIV Management guidelines & TLD Transition

The HIV FREE West project, organized a two session training on HIV case identification with session one in October and session two from 5th to 7th November, 2019. This training had as objective to educate Doctors and Nurses in the region on the effective strategies for efficient HIV case identification without necessarily screening a whole community.

In attendance were a total of 80 participants, 15 medical Doctors and 65 Nurses. In order to achieve the training’s objective, participants were drilled on HIV testing & the differentiated models of HIV testing, principles of HIV testing, partner & family based index case testing, standard operating procedures & principles of partner family-based index

case testing, steps of partner index testing, case presentation in ICT with Q&A, health education approach in ICT, ethics in HIV testing and data collection.



Index testing revealed in detail to participants session 1



ABOVE SITE LEVEL ACTIVITIES



HIV Free West staff cautioned for better performance in Situation Room



Project manager addressing staff cautiously

Considering the results-oriented nature of the HIV Free West Project, it is important to ensure staff do the right things in the right way to produce expected results. A situation room meeting to this effect was organized on Saturday 16th November, 2019 at the HIV FREE West Office to review the projects data. This meeting equally served as an opportunity to identify data lapses, employee challenges at sites, and to establish all necessary set of rules to ensure staff efficiency.

In attendance were 52 participants from all 25 sites (the clinical team and finance team and management). The meeting handled staff presence at site as it was established that every staff is compelled to sign-in and sign-out on a daily basis at their work station, test kit challenges were addressed, communication between staff was facilitated by establishing a ZOOM call system and

issues surrounding advanced diseases were sorted out and thrashed.

Data related issues like case identification were addressed with suggestions for site teams to step up with the active test of Pregnant Women, Index Case Testing be reinforced with keen interest centered around newly initiated and patients with High Viral load. Also, Multi Month Dispensation (MMD) needed to be strengthened.

The meeting ended with a few recommendations on upcoming Viral load campaign as site team leads were called to prepare a comprehensive list of eligible clients and start actively calling them for sample collection and documentation. All sites were asked to start adherence support group meeting for clients with high viral load and The Project Accountant reiterated on team collaboration and budgetary scrutiny before engagement of any expenditures.



ABOVE SITE LEVEL ACTIVITIES



Health Care Providers trained on the new guidelines for Global Management



The Regional Delegate in his opening address

The HIV Free West Project organized a two session training on the New guidelines for the Global Management of HIV/AIDS. The first session took place from the 11th to the 15th of November 2019 at Mbatkam Palace Hotel conference Hall in Bafoussam. 34 healthcare providers from 17 health facilities and 2 FHI clinical service consultants were trained. The second session took place from the 18th to the 22nd November 2019 at the conference hall of PESSI Hotel in Bafoussam. 36 healthcare providers from 20 health facilities in 12 health districts were trained. Among the health care providers were doctors most of whom were ART Unit Coordinators, ART Unit Head Nurses, and other clinical staff.

There were 9 facilitators from DLMEP, from RTG West Region, the regional delegation of public health and CBCHS. The modules covered in both sessions were: an overview of HIV with sessions

on; pathogenesis, transmission modes and the natural history of HIV; the epidemiology of HIV; strategies and methods of HIV prevention, HIV testing and linkage with sessions on; HIV testing; linkage; HIV testing algorithm; HEI testing algorithm, flow chart on linkage, follow-up of PLHIV; HIV counselling; therapeutic education; viral load monitoring; management of treatment failure.

Other areas of focus were PMTCT and pediatric HIV care, Nutrition, Co-infections and co-morbidities with sessions on; HIV/TB co-infection and INH/IRIS; Cryptococcus and pneumocystis; cerebral toxoplasmosis; care of other co-infections; comorbidities and HIV; STIs and HIV/Hepatitis co-infection, Stigma and discrimination and Organisation of care and treatment services, monitoring and evaluation; commodity management, HIV/AIDS control committee, organisation of care and treatment services in health facilities; presentation of data collection tools and key indicators.



ABOVE SITE LEVEL ACTIVITIES



Stakeholders meet to strategize on effective Commodity Management



A supply chain coordination meeting was organized in Yaounde at the CDC Conference hall, from November 26, 2019. In attendance were CDC, USAID, CBCHB, ICAP, GHSS, METABIOTA, EGPAF and GU

The meeting had as objectives: to improve coordination, communication and collaboration between agencies, supply chain partner and clinical implementation partner, to define strategies to better commodities logistics (stock on hand, consumption for antiretroviral and rapid test kits, to contribute to the strengthening of the national supply chain: the transformational supply chain project, to review the PEPFAR supported sites supply chain assessment data. Also were objectives to review supply chain procedures and practices in each region(Matrix) and to discuss and review the PEPFAR supported sites number of patients per regimen tool to monitor treatment uptake and anticipate demand.

Discussions were guided by a power point presentation on components of the supply chain system

calling on partners to strategize towards an integrated system.

Key strategies enumerated to improve on the supply chain were: Amongst many, a few are to improve on communication between partners, all stake holders should be involved in the coordination meeting discussions and not only PEPFAR partners, the supply chain partner should follow up requests from the regions and ensure the supplies are sent. Hence the supply partners should have information on these requests from the regions and a monthly Coordination meeting for partners including CENAME and CNLS. Partner's staff in charge of supplies will be trained as trainers so that they can rollout the training in their facilities to improve on supply chain. A tool was presented to be filled quarterly for information on the available stock at sites





ABOVE SITE LEVEL ACTIVITIES



BIKERS for Health recruited to ease VL Sample transportation



Bikers interview HD Bagante

To ensure effective and efficient service provision at site level, there is need for continuous supply of commodities, test kits and timely transportation of patients' samples and results to and from the National Reference laboratories without service interruption.

It was at the back drop of this that the HIV FREE WEST REGION Project in collaboration with the West Regional Delegation of Public Health, the RTG for West Region and the PEPFAR-supported Health Districts in the Region thought of putting in place a sound sample transport system. To this effect, a joint team composed of the above mentioned stakeholders conducted interviews of 3 Bikers each per health district, with the aim to retain the most qualified. The interviews ran from November 25th to 30th, 2019.

A district approach was used wherein, the district team identified three different Bikers who have been

assisting them in one way or the other, especially during public health activities like vaccination campaigns. A joint team then made a planned visit to the various districts, conducted interviews and the most qualified and reliable biker was retained. The target was one biker per health district. The Biker retained is expected to cover the transport system for all the supported facilities under that district. All the Fourteen supported health districts were involved in the exercise to cover all our 25 supported sites. Selection criteria ranged from being nominated by the District team, owning a functional bike with all its documents, having a driver's license if possible, being motivated and available to work at all times, be able to read and write, to owning a functional phone for communication and being a responsible person.



ABOVE SITE LEVEL ACTIVITIES



Introduction of Index Testing in the West Region Yields results

FICHE D'INFORMATION INDIVIDUELLE DU DÉPISTAGE DE CONTACTS DE CAS INDEX
(Statut VIH des Partenaires/Contacts Sexuels, Enfants et Soeur/Frères Biologiques de la Personne Index)

Statut de TX du Cas Index (Nouveau/Ancien)*:

| Date | Contacts (Contact #/ Enfant #) | Age | Sexe | Relation avec de Cas Index* | Même Adresse* | Statut VIH | Date du Test | Résultat du Test VIH | Date D'Initiation Sur ARV | Commentaires |
|----------|-----------------------------------|-----|--|--|--|--|--------------|--|---------------------------|--------------|
| __/__/__ | | | <input type="checkbox"/> M <input type="checkbox"/> F | <input type="checkbox"/> Epoux(se) <input type="checkbox"/> Partenaire sexuel <input type="checkbox"/> Parent biologique <input type="checkbox"/> Enfant bioloe. (<15) <input type="checkbox"/> Frères / soeurs bioloe. (<15) <input type="checkbox"/> Autres | <input type="checkbox"/> Oui <input type="checkbox"/> Non | <input type="checkbox"/> Inconnu <input type="checkbox"/> Négatif <input type="checkbox"/> Pos., Inconnu statut TX <input type="checkbox"/> Pos. sur TX <input type="checkbox"/> Pos. PAS sur TX | __/__/__ | <input type="checkbox"/> Positif <input type="checkbox"/> Négatif <input type="checkbox"/> Indeterminé | __/__/__ | |
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Statut du Cas Index **

N= Nouveau: Cas Index nouvellement initié sur TX || (Tx_New) ≤ 6 mos

Même Adresse* (Personne contact habit à la même adresse du cas index?)

Insérer ce document dans le FICHE DU PATIENT

Nom du conseiller:

Index testing tool

Following the trainings on efficient HIV Case identification which paid attention to effective screening and index testing, the participants immediately introduced at their sites the tracking of sexual contacts, biological children of those living with HIV and people suspected for HIV were tested for HIV. Onsite orientation meetings were organized to further build the capacity of service providers on the different testing strategies with emphasis on index testing. HIV Test kits were placed at entry points to facilitate testing.

Quantitatively, this led to an increase in case identification given that in October only 56 Sexual contacts were tested, 9 identified positive with a yield of 16.1%. Cumulative data for October and

November, revealed that a total of 741 sexual contacts were tested for HIV with 97 identified HIV positive with a yield of 13.1% against 20% target. Testing of sexual contacts of known HIV+ KPs, pre-ART clients, clients newly diagnosed or initiated on ART, virally unsuppressed clients, TB/ HIV patients and biologic parents of index children also started in November and will be intensified in Dec 2019.



ABOVE SITE LEVEL ACTIVITIES



The HIV Free West project works to strengthen PMTCT activities and meet targets



Site supervision to ensure effect cohort monitoring

With objectives to Increase ANC/ PMTCT uptake from 64% to 80%, PMTCT to 100% and EID uptake to 95% in the west Region, a number of strategies were employed. Consultations at HFs, active search for pregnant women by Community partner CHP and ANC fees subsidy.

In total 3,198 women were received with 2,895 were tested for HIV, 104 tested Positive for HIV, 102 Positive placed on ART with PMTCT uptake of 91%. Out of the 1,688 PW received at HFs, 523 were identified in the community through CHP and referred to HFs. They all received transport and ANC booking fees subsidies. 8 Positive PW were received from the community and all initiated on ART.

In total in the region, 37 PW receive ANC subsidies. EID services were provided to 81 children (39 in October and 42 November) two (2) tested HIV-positive and all of them were placed on ART.



SITE LEVEL ACTIVITY



Senior Management team and FHI360 conduct site visits for site mentorship to boost performance



HD Mbouda actively engages to ensure better performance under the mentorship of the Technical Director

As a means to boost performance in the West Region Senior managed visited the HIV Free West Region to provide technical assistance. In a brief meeting prior to site visits and onsite Orientation, the technical director of the HIV Free project cautioned the management team to work hard towards attaining the region’s targets as a lot is expected from the west.

Sites were shared to the Senior management team members where they were expected to assess all key program areas, identify lapses and provide recommendations to improve overall performance

A total of 20 supported sites were visited by FHI360 and the HIV Free Projects Senior Management team to review implementation of project

activities and provide support to enhance case identification, Tests & Treat and TB uptake. Service providers at the sites visited were educated on screening tools, index testing, active linkage, national testing algorithm, viral load algorithm and TB services. A comprehensive feedback report was compiled of the site visits and share with the team leads.



ABOVE SITE LEVEL ACTIVITIES



Targeted Community testing effected in the West Region



Sample collection for testing

In line with activities to celebrate World AIDS Day 2019, the HIV Free West project carried out venue-based and targeted community testing for HIV. This was done in collaboration with community stakeholders, the MOH mobile teams, health facilities multi-disciplinary teams, and the community partner, the project mapped out community venues housing displaced population from the SW and NW regions identified as high risk and

high transmission communities and HIV testing services were offered as outreach from November 27 to December 4, 2019. A total of 1388 were tested by December 4, 2019. 44 identified HIV positive, 40 placed on ART.



ABOVE SITE LEVEL ACTIVITIES



Laboratory personnel Trained on effective VL Sample collection and documentation



Practical session following guidelines

Following the low coverage of HIV viral load test in the West Region and to optimize its uptake and utilization for proper management of patients on ART, a viral load campaign was scheduled to run from the 17th of November to the 31st of December 2019.

To ensure its effective and hitch-free kick off, a training was organized to capacitate laboratory personnel from all the 25 PEPFAR-supported sites in the Region on Viral load sample collection, preparation, packaging, conditioning and transportation to the reference laboratories. The workshop which held at the Conference room of the HIV FREE WEST REGION PROJECT ran from the 14th to the 15th of November 2019 and involved a cross section of facilitators; the supervisor of NEIDRL Mutengene, Head of Dreams Reference laboratory Dschang, head of the molecular biology laboratory of Bafoussam Regional hospital and the viral load focal point of the HIV FREE West Region Project. The training was done under the supervision and

watchful eyes of the Program analyst for the HIV FREE PROJECTS and the Regional coordinator of the project in the West region. 34 participants answered present out of the 37 invited because some sites could not send more than one person due to shortage of staff at the facility (percentage participation of 92%).

Training methods included lectures, discussions, demonstrations, video projections and practical exercises. Training materials were projectors, ball markers, flipcharts, A4 papers, ball pens, DBS collection kits, and a host of other materials brought from the national EID reference laboratory Mutengene for the practical sessions. At the end of the training, all participants received consumables for sample collection for their sites and were asked to work with project staff onsite to offer viral load services to all eligible clients.



Principal Investigator in his launching address



ABOVE SITE LEVEL ACTIVITIES



The HIV FREE WEST Project Trains 14 Bikers for Health



Viral Load Focal point presenting on sample transportation

To ensure the continuous supply of commodities, test kits and timely transportation of clients' samples and results to and from the National Reference laboratories without site service interruptions, 14 Bikers for Health were hired to cover all 14 Health Districts supported by the HIV FREE WEST Project

Hence a two-day training was organized to capacitate these bikers on effective sample transportation and commodity supplies to facilities in their various districts.

The training which started on December 04, 2019 at the HIV FREE West office, has modules to help participants understand the Generalities on HIV/AIDS, manipulations and transportation of samples, precautions and safety of bikers, timing and itinerary, rejection and acceptance criteria of Viral Load Samples and documentation. The Bikers left

satisfied and promised to contribute their best to the region attaining its objectives in the fight against HIV/AIDS. They were provided working material and went operational immediately after the training. As a result, as at December 2019, about 6500 samples were collected and shared to three Laboratories; DREAMS Nkolondom, National EID Reference Laboratory Mutengene and DREAMS Dschang.





ABOVE SITE LEVEL ACTIVITIES



West Regional Clinical Mentors trained on SIMS Tool Administration



Mastering the SIMS Tool with FGI360

The HIV FREE West Project trains 30 Regional Clinical Mentors on effective Site supervision using the Site Improvement through Monitoring System(SIMS) tool.

The general objective of this training was to capacitate a pool of regional clinical mentors on the administration of the SIMS tool for improvement of services offered to people living with HIV/AIDS by healthcare providers. Specific objectives were to brief participants on the notion of supervision, for participants to be able to differentiate between control and supportive supervision and the training sought to review pre and post-supervision activities

Hence, experienced Regional stakeholders from the Regional Delegation, RTG West, DMOs Hospital Directors, ART Coordinators and PMTCT Focal Points gathered at PESSI Hotel Bafoussam, from Dec 12-13, 2019 to be drilled on the use of the SIMS tool to supervise and monitor HIV program activities. This team will constitute the regional

pool of persons to monitor and ensure effective and quality HIV service delivery in all sites of the region, hence falls in line with system strengthening and sustainability of project activities.

Modules covered during this training educated participants on the Overview of supervision, Supportive supervision approaches, Introduction to and study of the SIMS tool. CBCHS staff shared experiences on the use of the SIMS tool in improving the quality of service delivery in the fight against HIV/AIDS in the Centre and Littoral Regions. These Capacitated participants were later on grouped in a total of 8 teams made of 3 to 4 members to effectively cover all 25 sites from Dec 18 to Dec 20, 2019. The feedback was scheduled for December 27, 2019.

A feedback meeting was held on December 27, 2019. every group presented their findings and recommendations on how to improve service delivery at sites were given.



ABOVE SITE LEVEL ACTIVITIES



HIV Service Providers trained on the implementation of Isoniazid preventive therapy



Participants learning on the importance of patient follow-up and documentation

Because of their weakened immune system, people living with HIV are less able to fight TB infection and are more likely to develop active TB which can be deadly and can spread to others. According to WHO, in some communities, up to 80% of people with TB test positive for HIV and of the nearly two million AIDS-related deaths each year, a quarter of them are associated with TB.

It was on this note that the HIV Free west project organized a two days training on the implementation of Isoniazid preventive therapy in the west region from December 5 – 6, 2019 at the HIV Free West office. This first session of the training brought together participants from all 25 project supported sites, essentially project staff who support and coordinate HIV/TB integration services. They were drilled on the importance of

taking the anti-TB drug isoniazid as it is a simple and cost-effective way to prevent the TB myco-bacterium from becoming active if it is present in the body. Known as Isoniazid Preventive Therapy (IPT), the treatment approach is not new, but for a variety of reasons it is underused.

Following the new WHO guidelines for TB prevention for people with HIV participants were made to understand that all children and adults living with HIV, including pregnant women and those receiving antiretroviral treatment, should receive isoniazid prevention therapy, Isoniazid should be provided for six to 36 months, or as a life-long treatment in settings with high HIV and TB prevalence. And People living with HIV who may have TB symptoms should be further screened for active TB or other conditions so that



ABOVE SITE LEVEL ACTIVITIES



Staff strife towards better Retention



Patient follow up for DAMA entry

To improve regional performance and attain targets as scheduled for the first quarter of the HIV FREE West Project, activities were launched to actively and effectively trace all missed appointments, defaulters and lost to follow ups. To turn all sites green and scale up retention data a hosts of activities were executed from November to December 2019.

DAMA was our magic spindle in attaining this objective as it was able to generate timely information and data for decision making. Information on clients' appointment, their ARV refills, missed appointments, defaulter and LTFU was readily available giving room for reminder and follow up

calls for those who failed to come. Based on these, activities like home visits and community dispensation were carried out. Daily monitoring of performance per site and feedback was also very helpful as it created some positive competition between sites, with no one wanting to be left behind.

The target was retention greater than 90%. Following data on DAMA, as of the 28th of December 2019, ALL project supported sites in the West Region had turned GREEN, thus meeting their retention targets.



ABOVE SITE LEVEL ACTIVITIES



Staff strife towards better Retention

| FACILITY | OVERALL | | | | | | | | | | | | | | | | | |
|----------------------------------|---------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | RETENTION EVOLUTION | | | | | | | | | | | | | | | | | |
| | 02-12-19 | 03-12-19 | 04-12-19 | 05-12-19 | 06-12-19 | 09-12-19 | 10-12-19 | 11-12-19 | 12-12-19 | 13-12-19 | 16-12-19 | 17-12-19 | 18-12-19 | 19-12-19 | 23-12-19 | 26-12-19 | 27-12-19 | 28-12-19 |
| TOTAL | -150% | -56% | -33% | -3% | -2% | 25% | 33% | 44% | 53% | 63% | 73% | 86% | 89% | 95% | 103% | 105% | 106% | 111% |
| Hôpital EEC Bangoua | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Hôpital Ad Lucem Mbouda | 120% | 118% | 118% | 118% | 118% | 118% | 123% | 123% | 125% | 127% | 130% | 129% | 130% | 133% | 135% | 135% | 135% | 135% |
| CBC Bamendzi | 7% | 111% | 114% | 118% | 118% | 124% | 130% | 127% | 131% | 133% | 130% | 130% | 124% | 126% | 132% | 132% | 132% | 133% |
| Hôpital de District Fouban | -312% | -167% | -116% | -80% | -84% | -32% | -11% | 12% | 23% | 44% | 76% | 98% | 102% | 108% | 122% | 128% | 128% | 127% |
| HD Bafang | 56% | 56% | 56% | 85% | 85% | 93% | 93% | 93% | 100% | 113% | 116% | 116% | 114% | 114% | 120% | 120% | 120% | 120% |
| Hopital De District Massangam | -267% | -150% | -133% | -133% | -117% | -117% | -117% | -117% | -117% | -117% | -117% | 0% | 17% | 17% | 117% | 117% | 117% | 117% |
| Hôpital de District de Bangangté | 36% | 23% | -45% | 27% | 27% | 74% | 74% | 96% | 118% | 118% | 120% | 127% | 127% | 130% | 112% | 114% | 114% | 117% |
| CMA Magba | 57% | 78% | 85% | 89% | 89% | 96% | 96% | 104% | 104% | 107% | 107% | 107% | 114% | 114% | 114% | 113% | 113% | 116% |
| Hopital de District Kou-optamo | 53% | 67% | 88% | 88% | 89% | 94% | 94% | 94% | 100% | 100% | 100% | 100% | 100% | 105% | 110% | 110% | 114% | 113% |
| HD Dschang | 48% | 56% | 56% | 56% | 56% | 56% | 56% | 72% | 82% | 82% | 89% | 89% | 92% | 98% | 112% | 111% | 111% | 111% |
| HD Bangourain | -167% | 33% | 60% | 60% | 60% | 73% | 73% | 75% | 75% | 75% | 75% | 75% | 75% | 83% | 85% | 85% | 85% | 107% |
| ACHA Annexe TAMDJIA | 4% | 32% | 42% | 42% | 42% | 43% | 43% | 48% | 55% | 55% | 55% | 63% | 70% | 70% | 73% | 73% | 90% | 107% |
| Hôpital de District Foubot | -11% | 8% | 20% | 33% | 39% | 41% | 56% | 65% | 67% | 69% | 80% | 90% | 94% | 94% | 102% | 102% | 103% | 106% |
| CMA Djeleng | 41% | 50% | 50% | 50% | 56% | 58% | 58% | 58% | 58% | 63% | 63% | 70% | 70% | 90% | 95% | 100% | 100% | 105% |
| Hopital de District de Bandjoun | 100% | 106% | 106% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 95% | 100% | 100% | 105% | 104% | 104% | 104% | 104% |
| Hôpital Ad lucem Ban-ka-Bafang | -543% | -507% | -400% | -394% | -394% | -300% | -217% | -183% | -115% | -50% | -25% | 24% | 33% | 83% | 100% | 104% | 104% | 104% |
| HD MIFI (FAMLA) | 53% | 53% | 75% | 78% | 83% | 83% | 85% | 89% | 89% | 97% | 97% | 100% | 100% | 100% | 103% | 103% | 103% | 103% |
| Hôpital de La Police Bafoussam | 88% | 88% | 88% | 75% | 75% | 88% | 89% | 89% | 89% | 89% | 89% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| CMA Lafe-Baleng | -263% | -263% | -263% | 44% | 44% | 50% | 50% | 53% | 53% | 53% | 53% | 53% | 55% | 60% | 67% | 78% | 78% | 100% |
| Hôpital de District Santchou | -43% | 57% | 57% | 57% | 57% | 67% | 67% | 78% | 78% | 90% | 90% | 90% | 90% | 90% | 90% | 90% | 90% | 100% |
| Hopital St Vincent de Paul | -165% | 19% | 29% | 33% | 33% | 45% | 45% | 45% | 45% | 45% | 70% | 71% | 72% | 64% | 85% | 89% | 89% | 100% |
| HR Bafoussam | -268% | -204% | -204% | -112% | -112% | -47% | -38% | -13% | 3% | 26% | 48% | 75% | 81% | 94% | 98% | 99% | 99% | 99% |
| HD Mbouda | -320% | -320% | -118% | -75% | -75% | -67% | -55% | -41% | -13% | 0% | 38% | 46% | 54% | 59% | 63% | 81% | 81% | 96% |
| HD Galim | -6% | 18% | 24% | 24% | 24% | 24% | 29% | 44% | 47% | 47% | 50% | 65% | 65% | 70% | 83% | 91% | 91% | 96% |
| HD Malantouen | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | 1344% | -242% | -217% | -217% | -192% | -185% | -185% | -185% | -162% | -107% | -107% | 18% | 18% | 41% | 94% | 94% | 94% | 94% |

Retention Data and site progress in DEC, 2019

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CBC HEALTH BOARD

HIV-FREE WEST PROJECT

Phone: (+237) 679405849 (CE)

E-mail: hivfdoc.team@yahoo.co