

The CQUIN Learning Network

Partnering to Advance Differentiated Service Delivery

Annual Meeting
February 12-15, 2018

Swaziland Action Plan



HIV LEARNING NETWORK
The CQUIN Project for Differentiated Service Delivery



Swaziland Team



NO Activities Dropped 😊.

2 activities under yellow in the dashboard-None of the activities will be dropped, but the implementation approach will be revised

1. The scale up plan-More facilities offering more than one model and set targets for each of the models

- Fast track in the community to be scaled up
- Which models do we want to maintain and those we want to add
- Revising the language on DSD as for SD it caters for Com ART and yet its overall models
- Piloting DSD for Key populations

2. The quality assurance for DSD to define how to measure quality;

- The QA/QI interventions-submitted to the national QA office for adoption and inclusion into the national QA plan
- Increasing coverage for quality of services; focusing on provider standard in a patient centered model
- Client satisfaction integrated into PLHIV forums

3.Rebranding Demand creation to engagement and sensitization

PLHIV engagement for treatment literacy

Activities completed

- Defining package for P@HR groups(late presenters, children, KP's, Pregnant and Lactating women)-to be rolled out with the new guidelines
- DSD M&E tools completed and integrated into EMR ready for print
- Development of IEC materials complete-require funding to support printing
- DSD Core team establishment

Activities prioritized

- PLHIV engagement once in 3 months to review progress and get feedback
- In country experience sharing networks using the ReHSAR and/or NaHSAR forums
- Printing and distribution of the M&E tools to all IP's and Facilities
- Printing of IEC materials to sensitize on models
- Special days for children
- Patient and HCW's feedback survey tools developement

Activities learnt in the forum

- Plan to do client satisfaction surveys: Collect data on client satisfaction and present it in the next forum
- DSD full integration into service delivery and strengthen linkages between HIV and SRH programs for ALHIV
- Integrated fully the ALHIV transition package in the new HIV guidelines

DSD Coverage

- % of facilities implementing DSD
 - 80 % high volume facilities (>1000 Patients) implement Fast Track and Teen clubs
 - Proportion of stable ART clients enrolled in DSD model-(TBD: Pending Baseline assessment findings)
 - Average number of clinic visits per clients per year: 2
Visits for stable clients

Learning Network Priorities

- What do you want to learn?
 - PLHIV engagement for successful community DSD implementation
 - Implementation of community M&E
- From which countries?
 - Taso Uganda
 - Any country with experience
- How?
 - South to South exchange visit
- When?
 - Next quarter
 - In the next 6 months