

PEPFAR PMTCT-Early Infant Diagnosis FY18 Q1 Performance

Summary of Key EID indicators

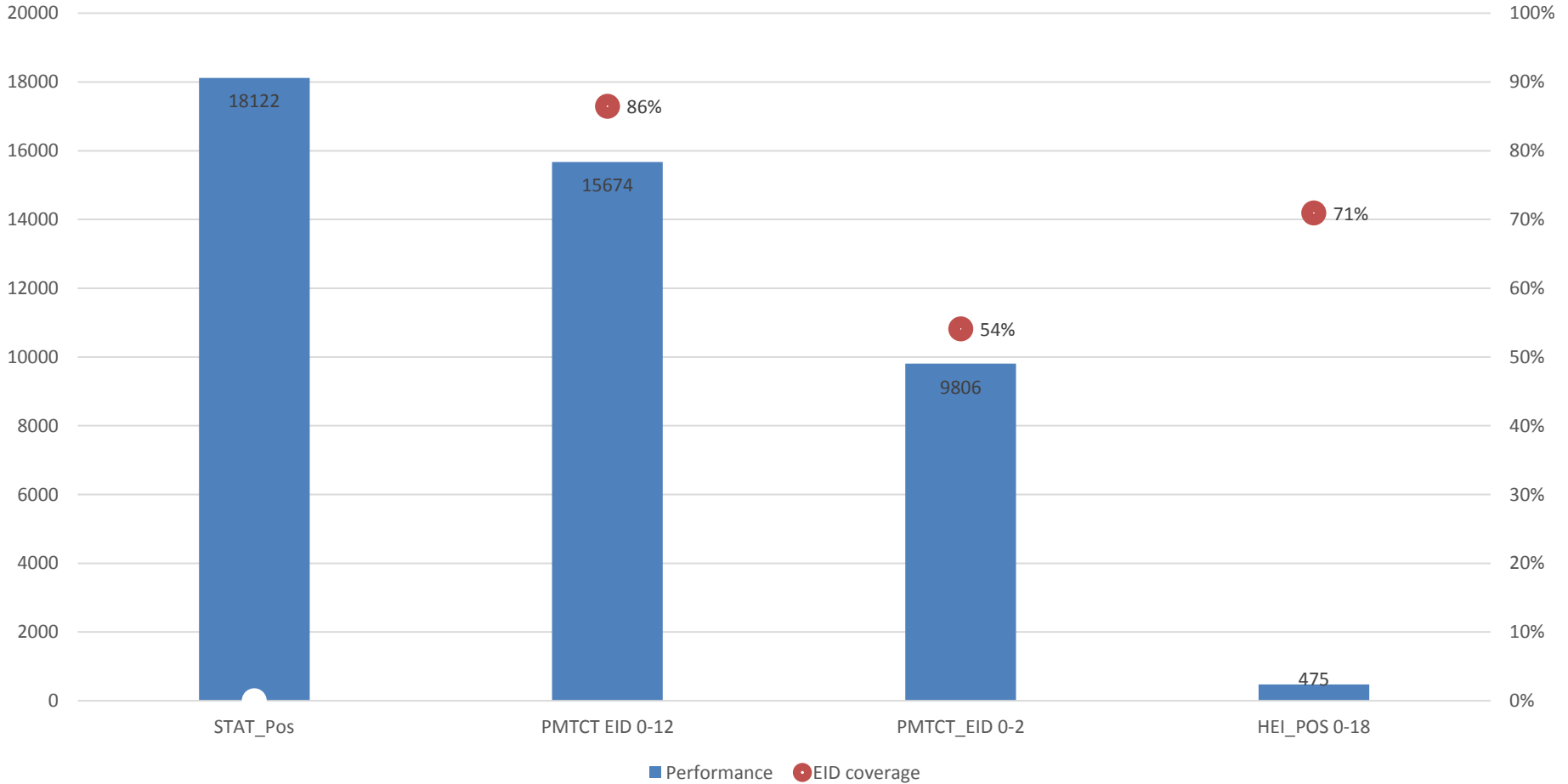


VL-EID-TB Integration Meeting, March 23, 2018



PEPFAR FY18 Q1 PMTCT-EID PERFORMANCE

PEPFAR FY18 Q1 EID CASCADE





HEI partner performance demonstrates variances in ART linkage for identified HIV positive infants: Need to improve ART initiation rates at ALL sites. Target 100%


Implementing Partner	HIV Positive Pregnant Women	EID 0-12 month	HIV positive infants	HIV positive infants initiated ART	EID 0-12 coverage	EID 0-2 coverage	EID Positivity	Proportion HIV positive infants initiated ART
Baylor/SNAPS – WEST	1352	1465	53	46	108.4%	83.1%	3.6%	86.8%
WALTER REED/MUWRP	964	966	30	19	100.2%	51.2%	3.1%	63.3%
TASO/SOROTI Region	477	457	11	5	95.8%	49.7%	2.4%	45.5%
EGPAF/RHITES - SW	2090	1954	45	31	93.5%	63.6%	2.3%	68.9%
IDI W & WN	1691	1542	63	44	91.2%	60.0%	4.1%	69.8%
RHITES-Lango	985	893	24	20	90.7%	48.3%	2.7%	83.3%
RHITES-Acholi	822	743	9	8	90.4%	54.9%	1.2%	88.9%
IDI/Kampala Region	2455	2054	63	38	83.7%	59.3%	3.1%	60.3%
MUSPH/FELLOWS/Rakai	424	352	13	10	83.0%	48.6%	3.7%	76.9%
Mildmay/Mubende Region	1613	1244	42	30	77.1%	48.0%	3.4%	71.4%
Intra Health/RHITES E	749	569	16	8	76.0%	30.2%	2.8%	50.0%
URC/RHITES EC	1349	987	41	31	73.2%	39.7%	4.2%	75.6%
STATE - UNHCR	134	90	2	1	67.2%	48.5%	2.2%	50.0%
Rakai Health Services/Masaka Region	1812	1126	36	24	62.0%	37.7%	3.2%	66.7%
RTI International/UPDF	270	152	3	3	56.3%	13.0%	2.0%	100.0%
HHIWA	69	30	1	1	43.5%	29.0%	3.3%	100.0%
UPS	57	11	0	0	19.3%	10.5%	0.0%	
Grand Total	18122	15674	475	337	86.5%	54.1%	3.0%	70.9%




Glaring sub-optimal 0-2 months EID DNAPCR testing at PEPFAR IP sites: Target 80%


EID Coverage (0 - 2 months) - FY18Q1


UGANDA (116 Districts)

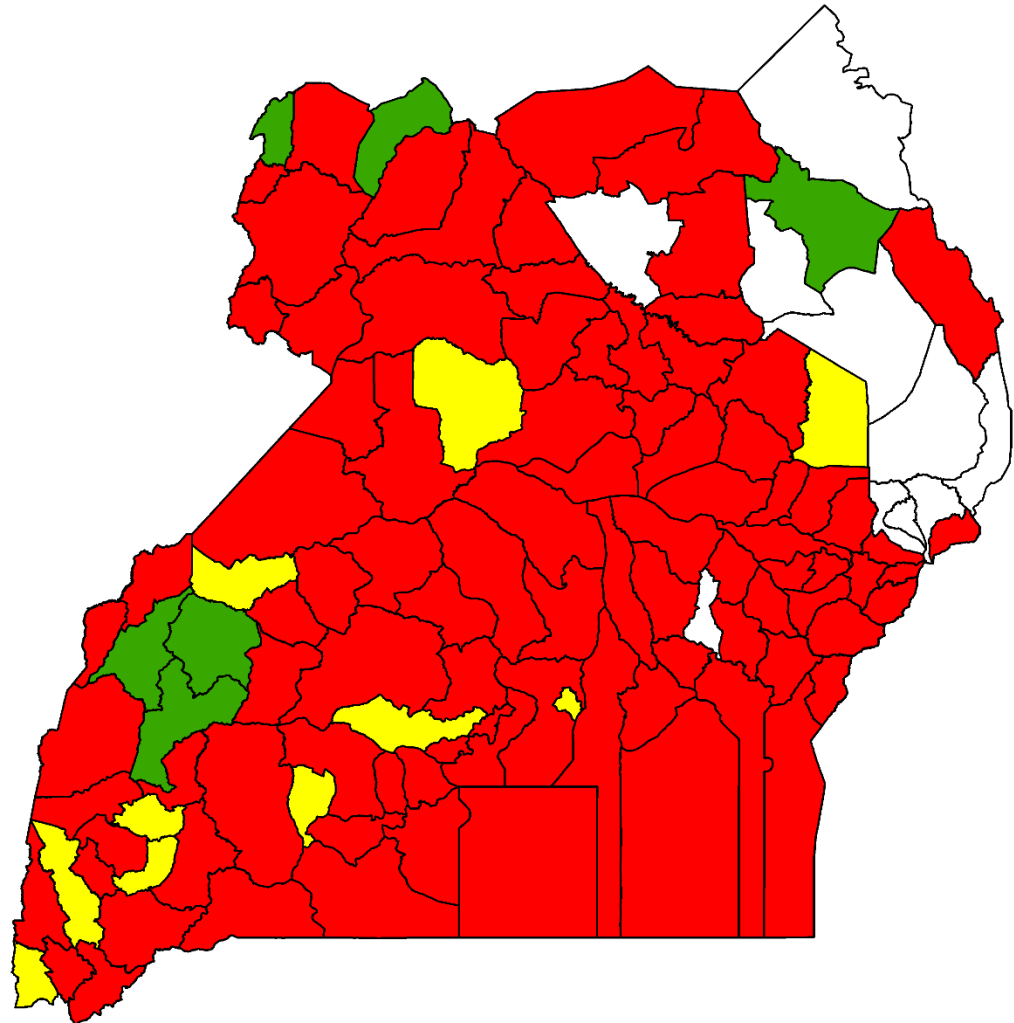
 Centrally Supported (10)

0-2 months EID Coverage (106)

 $\geq 80\%$ (6)

 71% - 79% (10)

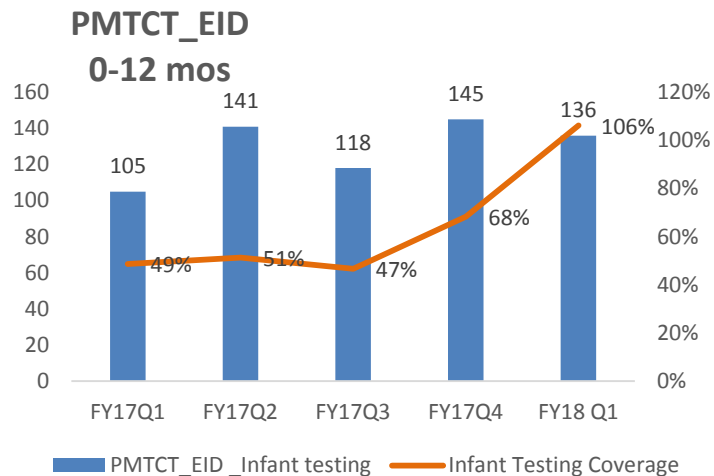
 $\leq 70\%$ (90)



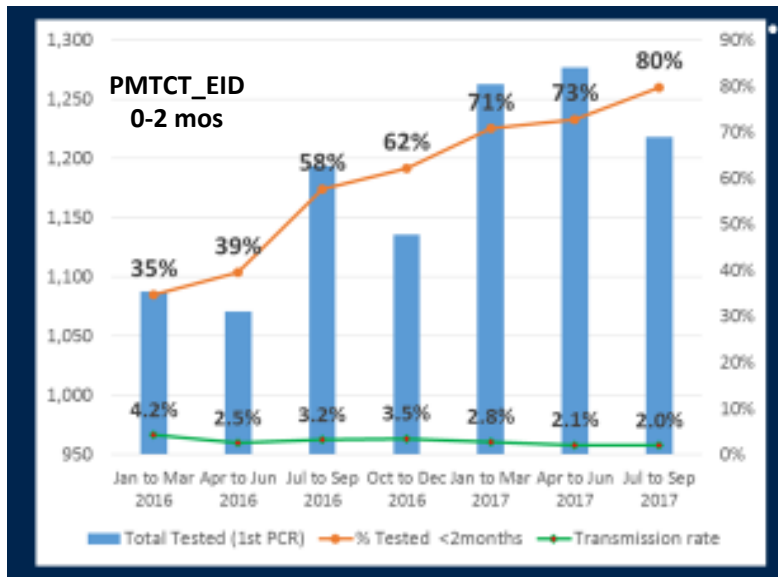


EID coverage trends at two high performing sites

Mukono
HC IV
MUWRP



Kyenjojo
HCIV
Baylor
SNAPS



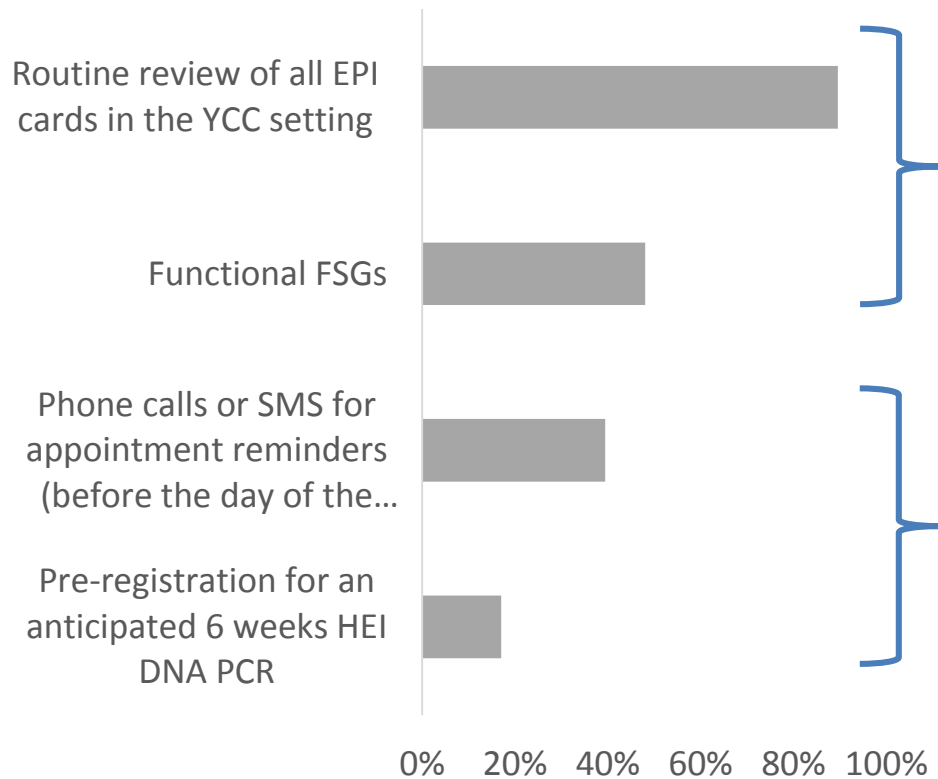
Successful practices

- Use of **1st PCR tracking tool/pre-appointment log and physical locator form from ANC1**
- **Proactive identification of all HEIs at all HF entry points**
 - Sensitization of IPD and OPD
 - Screening for HIV exposure in YCC
 - Same-day linkage to MCBP from maternity
- **Routine review of EID data:**
 - **EID focal person generates weekly list of missed appointments for follow-up by peer mother**
 - **PMTCT focal person updates EID cascade for HEI cohorts monthly**
- **Monthly mentorship by IP**



Approaches to scale with fidelity

HIV exposed infant interventions



Improve quality:

- EID/EPI integration screening ALL child health cards in YCC*
- Family support groups

Take to scale:

- Pre-appointment reminders**
- Pre-registration at MCHB from ANC and maternity
- Fast track all HIV identified infants for early receipt of results and same day linkage to ART
- Weekly tracking of LTFU and monthly review of birth cohorts
- Institutionalize birth cohort monitoring

*Wang PC, et al. (2015) A Cluster Randomised Trial on the Impact of Integrating Early Infant HIV Diagnosis with the Expanded Programme on Immunization on Immunization and HIV Testing Rates in Rural Health Facilities in Southern Zambia. *PLOS ONE* 10(10): e0141455.

**Ambia, J. and Mandala, J. (2016), A systematic review of interventions to improve prevention of mother-to-child HIV transmission service delivery and promote retention. *Journal of the International AIDS Society*, 19: n/a, 20309. doi:10.7448/IAS.19.1.20309