

COTE D'IVOIRE CONTRIBUTING TO THE PROVISION OF PMTCT SERVICES, OPTION B + AND QUALITY PEDIATRIC CARE AND TREATMENT

SUMMATIVE CONGRESS

Final Project Results

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ARC-CI PROJECT TEAM



HISTORY (1)

Cote d'Ivoire

- **1985:** Discovery of the first case of AIDS
- **1987:** Commitment of the state of Cote d'Ivoire through the creation of the National Program for the Fight against AIDS, Tuberculosis, and Malaria
- **2004:** Decentralisation and deconcentration of care activities with the launch of the first pilot phase of HAART (highly active antiretroviral therapy)
- **2013:** Introduction of the care module of HIV to the National Training Institute for Health Professionals

HISTORY (2)

- **2014:** Adoption of Law 430/2014 (14 July 2014) on the prevention and control of HIV and AIDS
- **2015:** Circular No: 0001/MSHP/PLNS/DC on task-sharing of care and treatment to nurses and midwives in Cote d'Ivoire
- **2017:** Circular No: 0001/MSHP/DGS/PNLS/DC (7 February 2017) on adoption of 'Test and Treat All' approach

CONTEXT OF THE ARC PROJECT

National HIV and AIDS prevalence: 3.5% (EDSIII 2012)

National coverage of antiretroviral therapy (ART):

The number of children placed on ARVs increased from 1,711 to 4,571 from 2013 to 2014, ie a 5% to 11% increase in new participants.

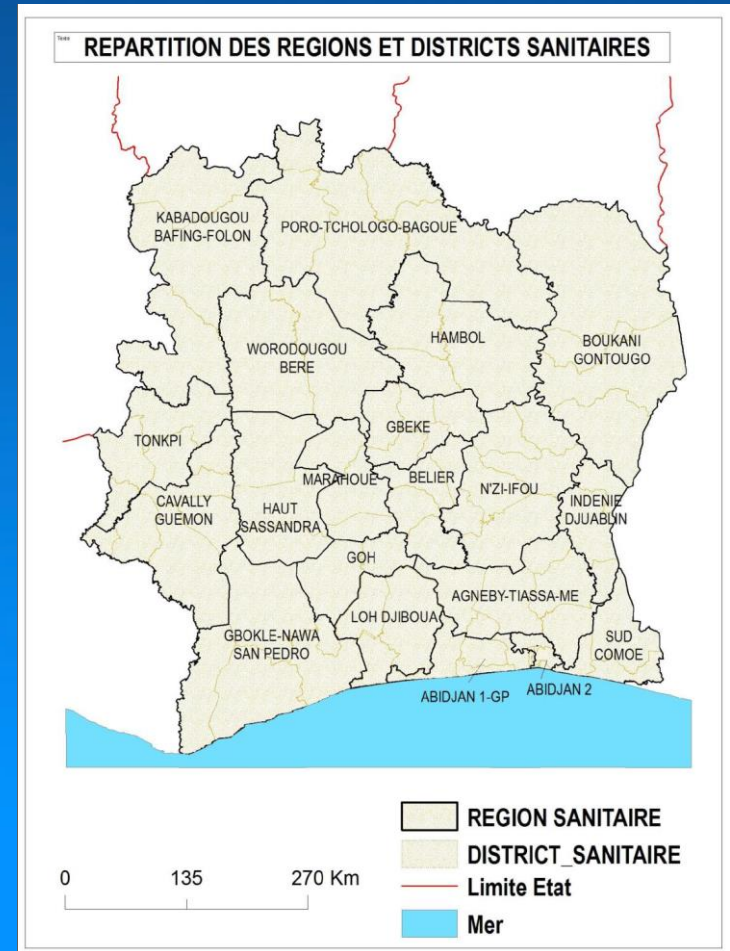
Number nurses : 10.430

Number of midwives : 5.700

Partners active at the health facilities: Elisabeth Glaser Pédatrique Aids Fund

PROJECT SITES

- Hôpital Général de Port bouet
Health Region of **d'Abidjan II**
- Hôpital Général de Koumassi
Health Region of **d'Abidjan II**
- Hôpital Général d'Abobo-sud
Health Region of **Abidjan I Grand-Pont**



Summary of ARC Project

BUT	OBJECTIFS	INTERVENTIONS
<p>Contribute to the provision of PMTCT services, Option B + and quality pediatric care and treatment</p>	<ol style="list-style-type: none"> 1. Strengthen the capacity of 25 members of the QUAD, professional organizations, nurses and midwives in PMTCT, Option B+ and quality paediatric care and treatment. 2. Encourage the key actors of the three sites (management) to join the project's goal through quarterly awareness sessions. 3. Advocate for capacity building for all key project stakeholders and the QUAD+. 4. Sensitize key players to compliance with standards and procedure guidelines at the three sites. 5. To ensure the nurses and midwives of the three pilot sites use the quality indicators related to PMTCT, Option B+, and paediatric care through biannual supervision. 	<ol style="list-style-type: none"> 1) Training of 25 leaders of professional organizations and QUAD members in PMTCT, Option B + and pediatric care and treatment Achievement of objective to 100% 2) Organization of three orientation sessions for 120 providers of the three sites for their effective involvement in PMTCT activities Achievement of objective to 100% 3) Organization of five advocacy meetings with the leaders of the three sites, the implementation partner (EGPAF) and the leaders of professional organizations Achievement of objective: 90% 4) Organization of three workshops on: (i) data collection tools (availability and filling) (ii) PMTCT guidelines and standards Achievement of objective to 100% 5) Organization of supervision visit of providers of the three sites Achievement of Objective: 50%

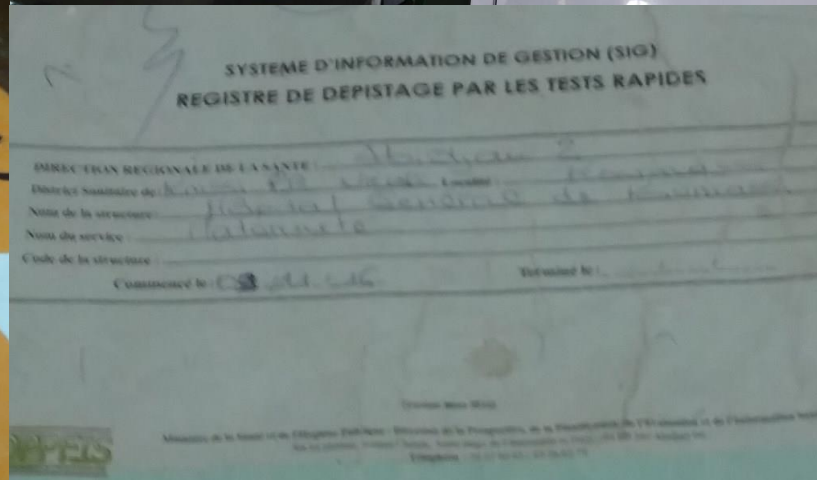
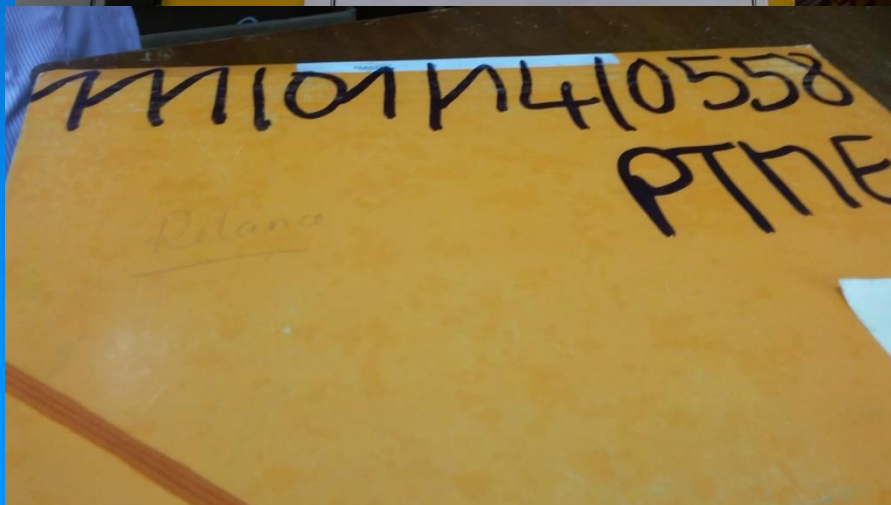
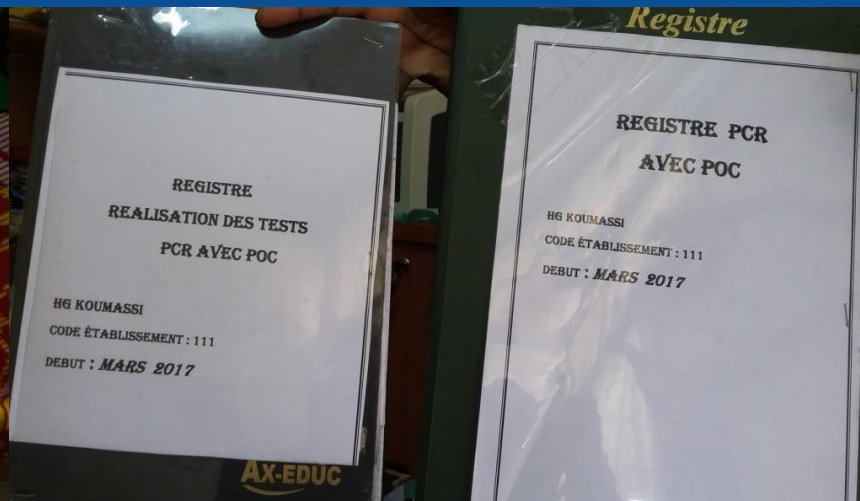
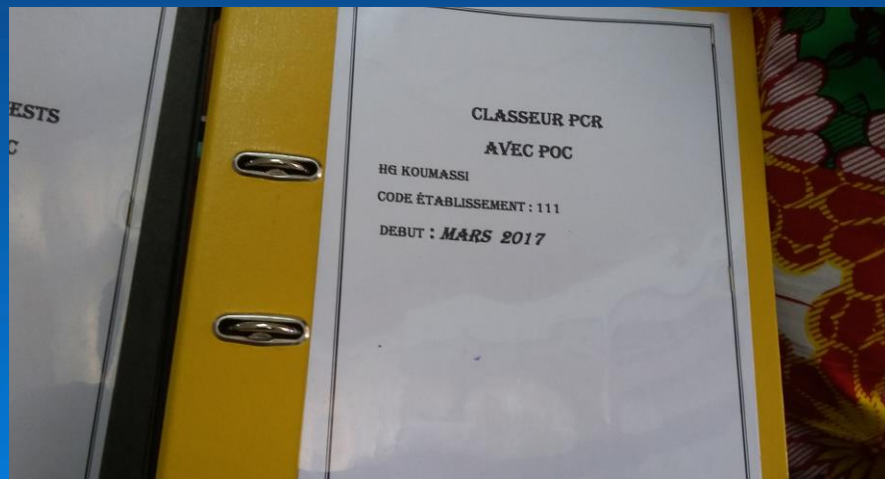
KEY INTERVENTIONS

1. Organization of a training workshop for 25 leaders of midwives and nurses, and QUAD members
2. Organization of one supervision visit of health providers at the three project sites
3. Advocacy to the implementing partner for the reinforcement of equipment at two sites (Abobo and Koumassi)
4. Evaluation of activities of the health providers at the 3 project sites

QUALITY INDICATORS

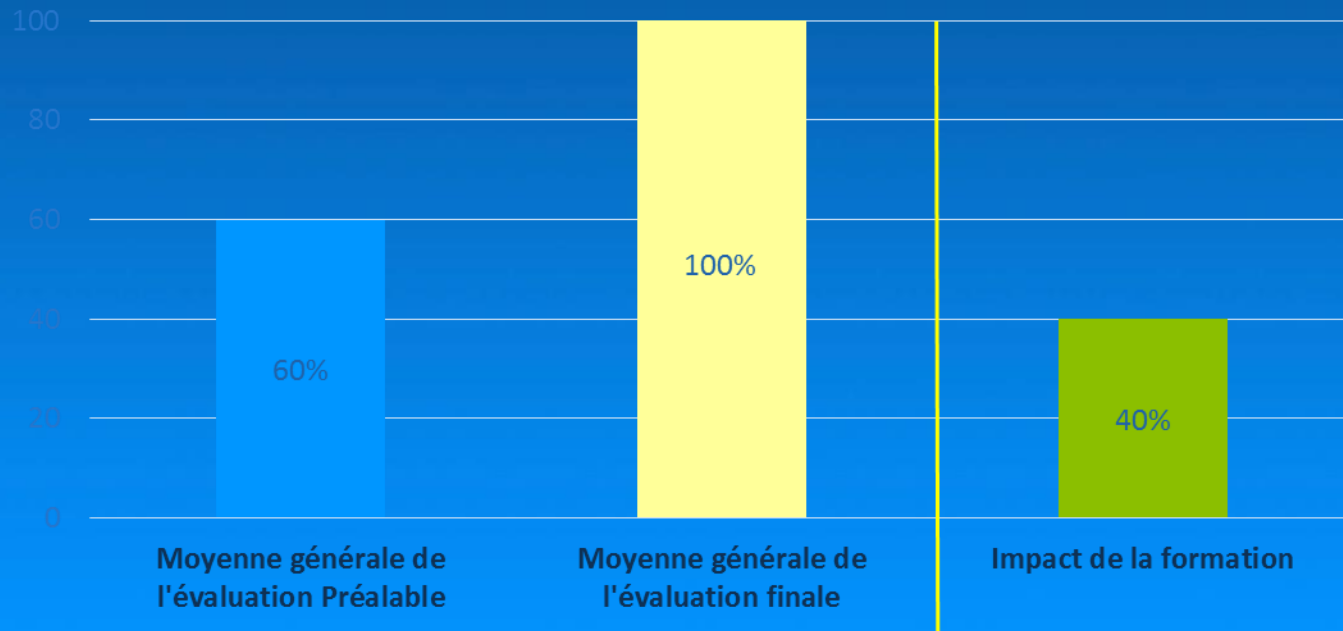
1. Number of pregnant women attending Prenatal consultation 1 services
2. Percentage of pregnant women admitted to Prenatal consultation 1 services who were tested for HIV at first contact
3. Number of HIV-positive pregnant women who delivered at the facility
4. Number of HIV-positive mothers who came to the first postnatal contact
5. Number of children born to HIV-positive mothers tested between 2 months and 12 months

IMAGES OF DATA COLLECTING TOOLS INTRODUCED AT SITES



RESULTS

RESULTS OF THE EVALUATION OF THE TRAINING OF PROFESSIONAL ORGANIZATIONS

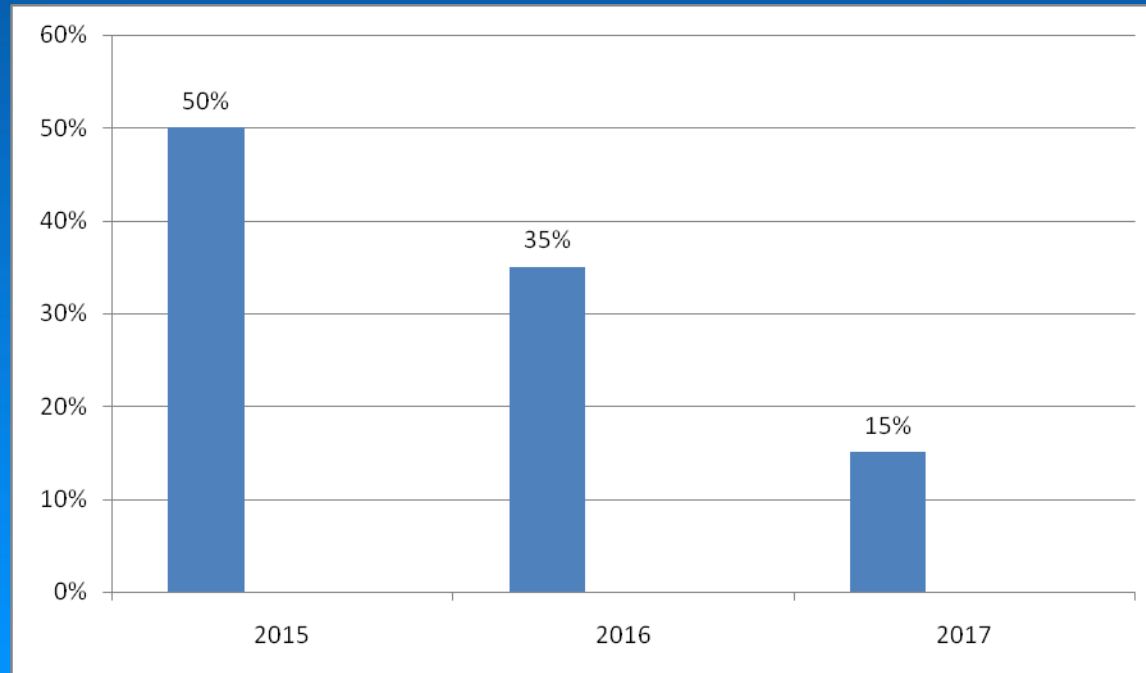


Evaluation of the training workshop of the 27 leaders of professional organisations and QUAD members

Pre-test: : class average : 18/30 soit 60%

- Post-test: class average: 30/30 soit 100%
- Knowledge Gain across all participants :40%

POST-TRAINING REDUCTION OF PERCENTAGE OF PREGNANT WOMEN ON ARV LOST TO FOLLOW-UP AT KOU MASSI GENERAL HOSPITAL



HG PORT-BOUET

Following the advocacy of the QUAD the site was provided (endowed) with:

A computer for monitoring and evaluation for data management

Storage cabinet

Wall thermometer

HG ABOBO(1)

- Increase in the number of PCR's tests made by the midwives after the establishment of the quality team and the (Point of Care) POC

INDICATORS	PERIODE	
	Avril-Juin 2016	Avril-Juin 2017
1. Number of children born to HIV-positive mothers tested between 2 months and 12 months	23	30
2. Number of children born to HIV-positive mothers tested between 2 months and 12 months with results	05	30

HG ABOBO(2)

➤ GREATER INVOLVEMENT OF NURSES IN HIV and AIDS ACTIVITIES

INDICATORS	PERIODE	
	Avril-Juin 2016	Avril-Juin 2017
1. Number of nurses involved in medical services (primary care)	0/10 soit 0%	10/10 soit 100%
2. Number of nurses involved in pediatric services	0 /9 soit 0 %	9/9 100% soit

LESSONS LEARNED (1)

What is the 1 thing of which you are most proud?

Our advocacy which resulted in the reinforcement of the equipment at two of our sites (Port-Bouet General Hospital and Abobo General Hospital)

What are the two key lessons learned in the implementation of your project?

1. The implementation of the QUAD project has boosted task sharing.
2. The involvement of the site managers facilitated the implementation of the project

LESSON LEARNED (2)

What is the one thing which you would have done differently?

Greater involvement in monitoring activities

What were two of the skills that your team believes to have developed this year?

The implementation of the Quad project enabled the group to:

1. Strengthen the spirit of teamwork
2. Strengthening its advocacy capacity

THE WAY FORWARD

How will you build on what you learned this year to move forward?

1. Scaling up of the initial project
2. Development of a new project
3. Search for support partners

Please introduce two dissemination targets to present your findings:

1. The Minister of Health and Public Hygiene
2. The QUAD Plus

How will the QUAD members stay in touch?

By putting in place a networking system.

Please share one suggestion with the ARC Faculty to enable it to improve its support in the future.

Continue the support

Merci



25/05/2017

Mme N'guessan Affoué formateur
formateurs consultante indépendante

Merci

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