

LARC Malawi

Demand Creation

Isaac Chauwa, M&E Specialist, Diagnostics
2nd November, 2016

Country Team

- Geoffrey Chipungu
- Reuben Mwenda
- Tulipoka Soko
- Isaac Chauwa
- Thokozi Lipato
- Dorothy Ngoma
- Benson Chilima
- Linvell Chirwa Nkhoma
- Mathias Sinjani
- Maxwell Pangani

Name of Facility selected



Project Summary

What are we trying to accomplish?	How will we know if a change is an improvement?	What change will we make that will result in an improvement?
<p>Overarching Goal</p> <ul style="list-style-type: none"> VLT Demand creation 	<p>AIM Statement</p> <ul style="list-style-type: none"> Increase access of eligible ART clients to VLT services at Mitundu Community Hospital from 38% to 80% through awareness and demand creation by September 2017. <p>Metric: Numerator : Number of clients accessing VL testing, Denominator : Number of all eligible ART clients.</p>	<p>Your Intervention</p> <ul style="list-style-type: none"> VLT awareness creation resulting increased demand for VLT

Elevator Speech

This project is about: Increasing awareness in VL testing access for PLHIV in order to create demand for testing.

As a result of these efforts: There will be an increase in the proportion of clients on ART accessing VLT

It's important because we are concerned about:

❖ **Low VLT access for eligible ART clients**

Success will be measured by showing improvement in:

❖ **Number of VL samples collected per week**

❖ **Proportion of eligible clients accessing VLT**

What we need from you

Technical and financial support



- Stakeholder Identification
 - National Association for People Living with HIV and AIDS in Malawi (NAPHAM)
 - Coalition of Women Living with HIV/AIDS
 - Palliative Care Association of Malawi
 - Respective Directorates in the Ministry of Health
 - Lighthouse
 - Riders for Health
 - Mother to Mother
- (List your stakeholders and how you have kept them informed about the project) – Through stakeholder meetings, communication through emails, sharing of the project proposal

Process Mapping

(Share the steps of the portion of the process on which your team is working)

Process Step	What Happens?	Who is responsible?	Duration	Forms/logs	Opportunity for Improvement
Baseline Assessment	Identifying gaps	I. Chauwa	July 2016	EMR	
Project briefing	Facility team buy in and ownership	I. Chauwa, T. Lipato	7, Oct 2016		
Project launching	Facility team buy in and ownership	I. Chauwa, T. Lipato	7, Oct, 2016		
Review facility data tools	Defining data elements and Identifying data sources	I. Chauwa, T. Lipato	Oct 2016	EMR	Data clerk in place
Identification of CSOs	To take lead in VLT awareness campaigns	L. Chirwa, M. Sinjani	Oct 2016		
Support group identification	Support group mapping	L. Chirwa, M. Sinjani	Oct 2016	Database	
Expert clients identification	Recruitment of Expert patients from the support groups	L. Chirwa, M. Sinjani	Oct 2016	EMR	
Orientation of support groups and expert clients	Knowledge and skills transfer for them to perform their roles well	L. Chirwa, M. Sinjani	Nov 2016		
Conduct monthly data review	Measuring progress and identifying gaps	I. Chauwa, T. Lipato	From Nov 2016	Sample collection registers, EMR	
Monthly teen meetings	VLT Awareness to teens on ART	L. Chirwa, M. Sinjani	Second week Nov 2016	EMR, Attendance registers	



- **Gap Identified**

- Despite some VL knowledge in facility staff, there are challenges that are preventing eligible ART clients from being identified and VL samples being collected.
 - Inadequate awareness in VLT access.

- **Aim Statement:**

- Increase access of eligible ART clients to VLT services at Mitundu Community Hospital from 38% to 80% through awareness and demand creation by September 2017.

Define

Measure

Analyze

Improve

Control

Baseline Data

Indicator	Baseline	Target
Number of adults and pediatrics current on ART.	5000	5500
Proportion of ART clients accessing VLT	38%	80%
Number of VL samples collected per week	40	84
Percent of ART clients with at least 95% adherence	95%	100%

Define**Measure****Analyze****Improve****Control**

- Data Collection Plan**

Indicator	Baseline	Target	When	Who	Source
Number of adults and pediatrics current on ART.	5000	5500	Monthly	Linvell (facility Coordinator)	ART EDS
Proportion of ART clients accessing VLT	38%	80%	Quarterly	Linvell	VL LIMS, ART EDS
Number of VL samples collected per week	40	84	Monthly	Mathias	VL sample collection register
Percent of ART clients with at least 95% adherence.	95%	100%	Quarterly	Linvell	ART EDS

Define

Measure

Analyze

Improve

Control

People

- ART clients

Process

- VLT awareness
- Sample collection
- Data mgt

Materials / Supplies

- IEC materials
- DBS bundles
- Training Materials

Problem

- Low VLT access (38%)

Environment

- ART Clinic
- Community

Policy / Procedure

- VLT Algorithm
- National VLT strategic plan
- National HIV scale up plan

Equipment



(Action Plan)

Action Item	By whom?	By When?
Project launch	Isaac Chauwa, Thoko Lipato	First week of Oct 16
Identify Support groups and CSOs	Linvell	Mid week of Oct 16
Orient Support groups	Linvell	First Week of Nov 16
Identify Expert Clients	Linvell	Mid week of Oct 16
Orient Expert Clients	Linvell	First week of Nov16
Conduct group and individual counseling sessions	ART officer	From Second week of Nov 16 – on going
Develop IEC materials in VLT awareness	HEU	End Nov 16
Place IEC materials in ART clinic strategic areas	ART officer	First week Dec 16
Source national VLT SOPs and place in the ART clinic	Mwenda	First week Nov
Conduct refresher training for clinicians, nurses and lab staff	Sinjani	Jan 17
Coordinate monthly teen meetings	Linvell	From Mid Nov - monthly
Review data tools	Isaac, Thoko	First Week Nov 16
Conduct monthly data reviews	Isaac, Thoko	Mid Nov - Monthly

Define

Measure

Analyze

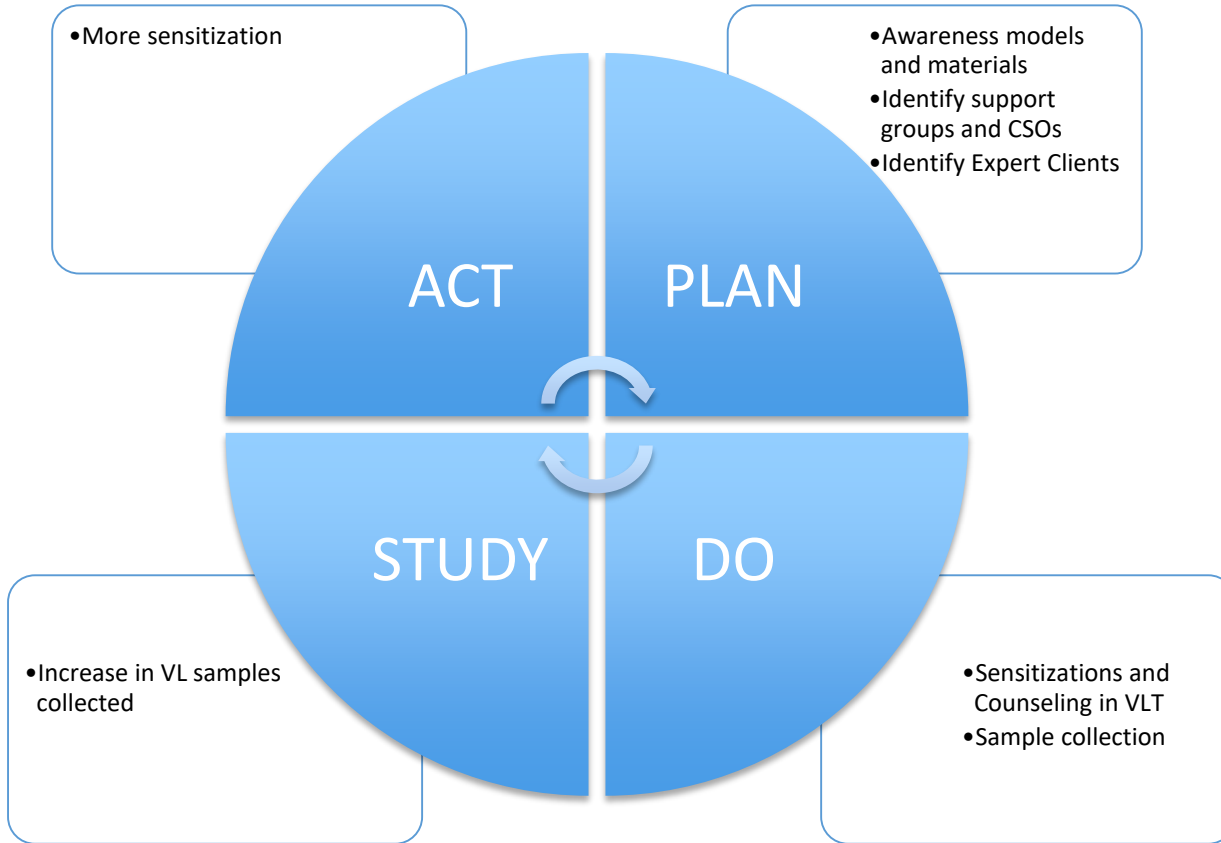
Improve

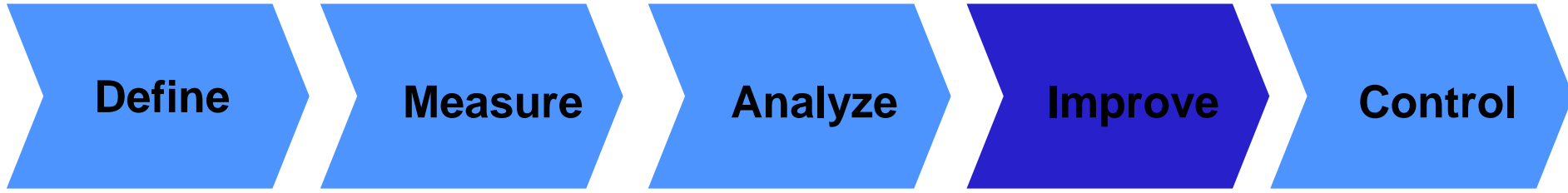
Control

- **Just Do Its** (Share some things that you were able to do right away)
- Project launch
- Review of available SOPs
 - Sample Collection
 - Sample Storage and Packaging
 - Sample Transportation
 - Receiving of Results
 - Results interpretation
- Identification of support groups and CSOs
 - 3 CSOs and 84 Support groups
- Identification of expert clients
 - ART patients with good adherence

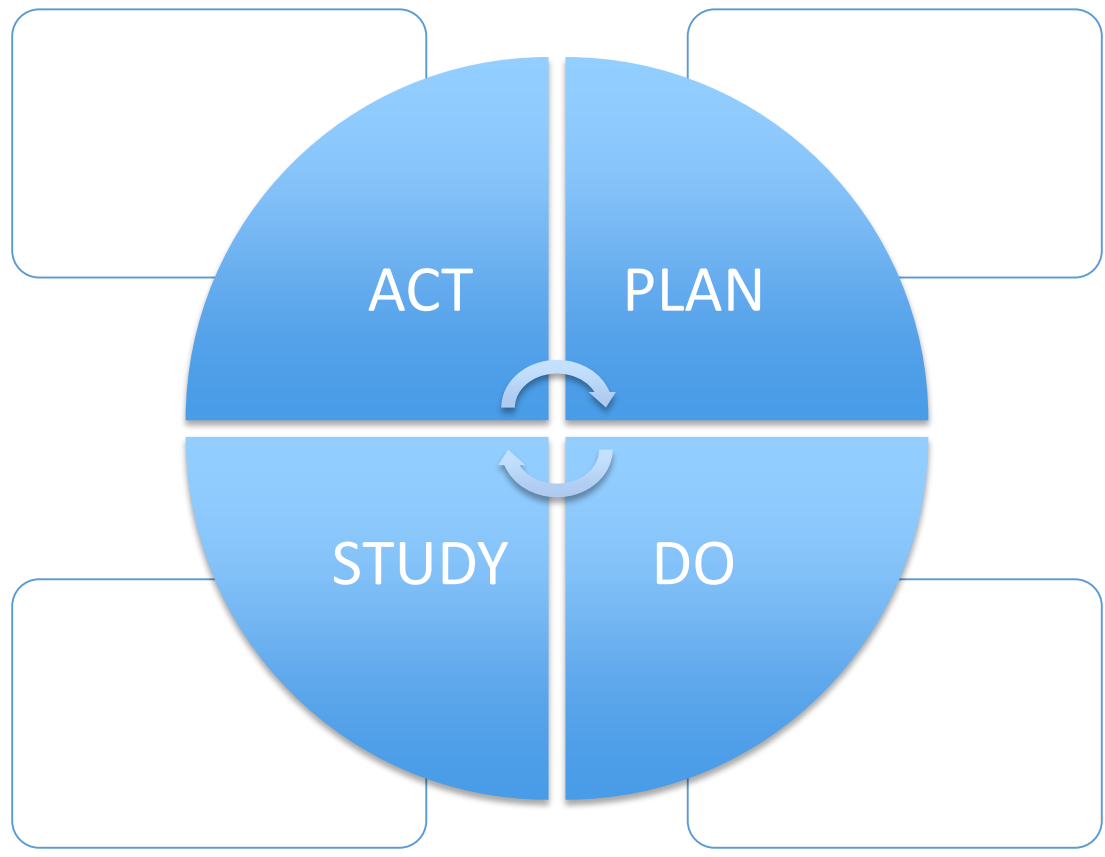


PDSA #1





PDSA #2



Results

- (Share results in graph form) To monitor progress based on increase in sample collection and proportion of eligible clients accessing VLT

5S or Visual Management

BEFORE

AFTER

Questions for Thought

- How have you facilitated continuous inter-cadre collaboration (e.g., lab-nurse collaboration) Meetings, Facility task force that includes all relevant cadres
- How does your project leverage existing VL in-country initiatives and/or ARC, resources, tools? Lighthouse supporting VL sample collection, Riders for Health supporting Sample Transportation, We are supporting demand creation

Challenges / Lessons Learned

Challenges

- Inadequate funding for support groups
- Support groups only active with project funding
 - To link support groups with Income Generating Activities programs.
- Inadequate HDAs (currently 2)
 - To lobby for one more
- Currently only one Rider for ST for the catchment area
 - To lobby for 2 more

Lessons Learned

- Are there lessons learned?
- What would you do differently in the future?

Way Forward

- Continued collaboration with implementing partners.
- Strengthen awareness country wide in reference to the national VL scale up plan
- Carry out annual national stakeholder VL dissemination workshops.

Acknowledgements

- LARC
- CDC
- Emory
- PEPFAR
- Malawi Ministry of Health