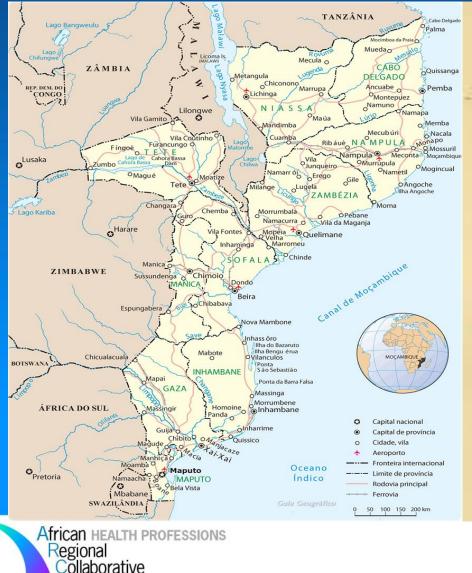


EMORY

WOODRUFF

Matavel, Maria Olga, Nurse, ANEMO Lusaka, Zambia 07/07/2017

### Map of Mozambique and Maputo Province



FOR NURSES AND MIDWIVES











## **ARC Project Team**

- Caetano A. Amela Member of board- secretary
- Maria Olga Matavel Presidente of National Nursing Association
- Norgia Elsa Machava Membber of board-Represent the Academy
- Olga Novela Member of board Chief Nursing Officer at the MOH





## QUAD MEMBERS



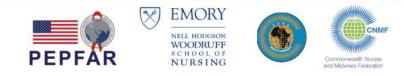




# **ARC Project Context**

- Name of Facilities
  - Boane- Health Facility
  - Ressano Garcia-Health Facility (map showing facility locations)
- National HIV prevalence rate : IMASIDA data
  - 13.2% (15-49 yeas), Urban area 16.8; Rural area 11%:
  - Increased from 11.5% in 2009 to 13.2% in 2015
  - Woman are the most infected in rate of Urban area 15.4%; Rural area 12.6%
  - Man- Urban area 10% ; Rural area 8.6%





# **ARC Project Context**

- National ART coverage 68% =Health Facilities providing HIV treatment
- 892,000 -58%- PLWHIV receiving HIV treatment in the mid of 2016 (UNAIDS)
- 70,138-65% Child receiving HIV treatment
- NURSES AND MIDWIVES
- # of nurses national = 13.177
  - 7,660 (HR Report 2016)
- # of midwives National
  - 5,517 (HR Report 2016)
- Implementing partners active in your project site (ARIEL, JHPIEGO)





Overarching Goal	AIM Statement	Project Intervention
The goals of this project is to develop and improve clinical services that focus on adolescents sexual and reproductive health (SAAJ) to enhance youth engagement and retention to health services, including education,	Reduce from 8 to zero the # of health providers citing a barrier on supplies and equipment needed to provide care effectively for clinical care to HIV+ C & A (at Boane and Ressano Garcia);	Advocate and/or provide Equipment for SAAJ sites TV; video, discs; chairs and Tables, etc
family planning and ARV treatment and care.	Increase from 331 to 380 the # of adolescents living with HIV and in ART being observed at SAAJ (Friendly Service for Adolescente and Youth) sites; ( Numbers of Bagamoio were cut)	Advocacy to Health Facilities (HF) the need to attend all adolescents girls and boys and pregnant girls in SAAJ sites
	ACHIEVEMENT (actual): Pending Assessment Improve (increase, decrease) (metric) from to by (date).	







X





Overarching Goal	AIM Statement	Project Intervention
The goals of this project is to develop and improve clinical services that focus on adolescents sexual and reproductive health (SAAJ) to enhance youth engagement and retention to health services, including education, family planning and ARV treatment and care.	Increase from 4 to 10 the # of Nurses trained on HIV children and adolescents; Increase percentages of HP with confidence in providing HIV services to Children and Adolescent, 40%- Boane 40%-Ressano Garcia Reduce from 6 to 0 the # of Health Providers that cited barrier on training at this facility to prepare with the knowledge and skills needed to provide care effectively as a barrier for clinical care to HIV+ C&A	Advocate and coordinate with partners training for nurses and midwifes providing HIV services to adolescents Advocate and coordinate refresher trainings to HP in the provision of HIV service for children and adolescent
	ACHIEVEMENT (actual): Pending Assessment Improve (increase, decrease) (metric) from to by (date).	







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Overarching Goal	AIM Statement	Project Intervention
The goals of this project is to develop and improve clinical services that focus on adolescents sexual and reproductive health (SAAJ) to enhance youth engagement and retention to health services, including education, family planning and ARV treatment and care.	<ul> <li>100% of HP with ability to initiate ARV in children with HIV/TB co-infection;</li> <li># of individuals who received HIV Testing and Canceling (HTC) services for HIV and received their test results during the PEPFAR reporting period</li> <li># of (adults) and children newly enrolled on antiretroviral therapy (ART) (10-14) (15-19)</li> <li># of (adults) and children currently receiving antiretroviral therapy (ART). (10-14) (15-19)</li> </ul>	Coordinate with partners Refresher trainings for HP to initiate ARV in children with HIV/TB co-infection Advocacy and coordination with Health facilities and partners to provide HIV testing and counselling and antiretroviral therapy (ART) at SAAJ sites
	ACHIEVEMENT (actual): Pending Assessment Improve (increase, decrease) (metric) from to by (date).	











Overarching Goal	AIM Statement	Project Intervention
The goals of this project is to develop and improve clinical services that focus on adolescents sexual and reproductive health (SAAJ) to enhance youth engagement and retention to health services, including education, family planning and ARV treatment and care.	Reduce from 2 to 0 the # of Health providers citing access to clinical supervision and support as a barrier for clinical care to HIV+ C &A 100% of facilities with a written policy for disclosure of HIV status & 100% with a written policy for consent for HIV testing and treatment for adolescents (<16 yrs.) youths (>16 yrs.)	Coordinate with partners Refresher trainings for HP on Viral load and TB/HIV co- infection, including viral load Advocacy and coordination with Health facilities and partners to provide HIV testing and counselling and antiretroviral therapy (ART) at SAAJ sites
	ACHIEVEMENT (actual): Pending Assessment Improve (increase, decrease) (metric) from to by (date).	Advocate and coordinate with partners training for nurses and midwifes providing HIV services to adolescents







X











# **Key Activities/Intervention**

List the 5 major activities of your quality improvement project. Rather than listing details, summarize into 5 key categories of activities. List the most strategic activities.

- 1. Equipped 2 Health Facilities with TV and Video for SAAJ (Boane and Ressano Garcia)
- 2. Trained 20 nurses on HIV care and treatment for adolescents (ie:Fill the protocols )
- 3. 2 HF provided with a disclosure & consent policy for HIV /testing for adolescents (<16 yrs.) youths (>16 yrs.)





### **Output Indicator Matrix Describe your monitoring activities**

Output Indicator	Frequency of monitoring	Comments – How was the experience?
Health Facilities provided with equipment for SAAJ	Once a month	One facility has not started using the material to provide SAAJ.
Providers trained in provision of HIV treatment and care for adolescents	Once a month	Nurses with different education level backgrounds turn difficult the perception of some sessions of the training
Refresher training provided to Health workers on Viral load trained	Once a month	Health providers are overloaded do not concentrate completely on training
Health Facilities provided with written policy on disclosure for HIV status and consent for HIV testing	Once a month	Health providers did not take a time to explain the need to use the policy they just ask patients to sign however adjustments were made to address this issue
Collaborative		PEPFAR WOODRUFF school of NURSING

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13

# Present a graphic (i.e. graph, chart, table) that shows your activities and the resulting change

### Pending Assessment





## Lessons Learned

• What 1 thing are you most proud of?

Equipped Health centers we have made the environment comfortable and attractive for the adolescent

Nurses trained to better serve the adolescent

- What were the top 2 lessons learned in implementing your QI project?
   With little resources and good will it is possible to improve the provision of care and quality of life.
- What 1 thing do you think you should have done differently?
   We should have done a permanent monitoring and evaluation
- What 2 capacities does your team feel it has developed this year?
- 1 capacity for nurses and midwives

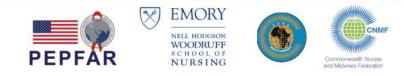




# Way Forward

- How will you build on what you've learned this year? New partners? Continuing with good relation with the actual partners and We will try to find out the others partners to continue working with the health facility.
- Share 2 dissemination targets to present your results. The results will be shared with the Health facilities, partners, MOH
- How will the quad remain in contact?
   In the presentation of results will coordinate the next activities with the partners
- Share 1 advice to ARC Faculty on how to improve future support.
   ARC should allocate the funds taking into account the reality of each country, so that the same project can be expanded across the country.





• OBRIGADO

### • THANK YOU

#### • KHANIMAMBO



