

TANZANIA

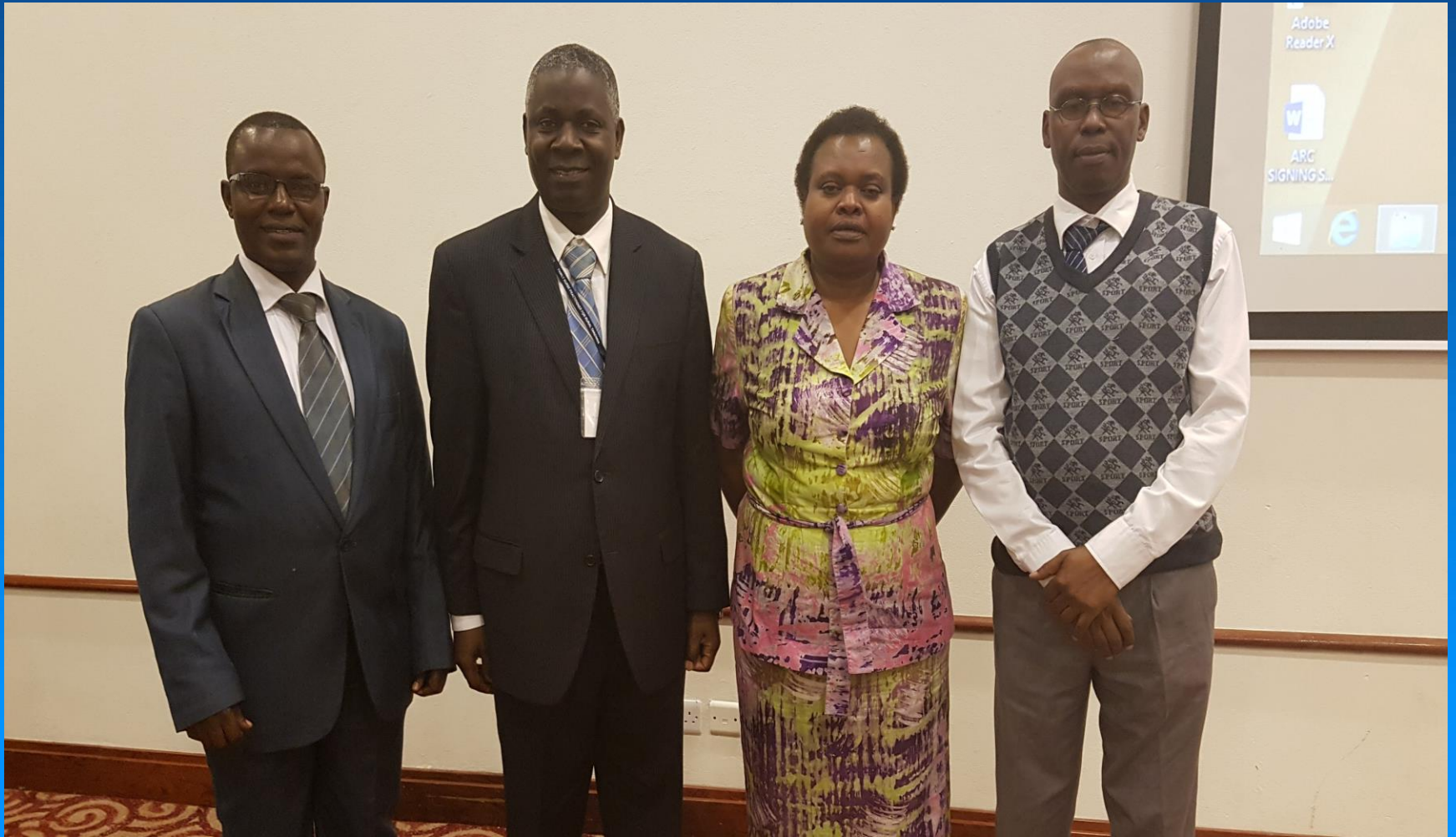
OPERATIONALIZATION OF TASK SHARING POLICY

**ARC Summative Congress:
Final Project Results**

**Paul Magesa
President, Tanzania National Nurses Association**

6th - 8th July, 2017 : Lusaka - Zambia

TANZANIA QUAD



TANZANIA QUAD PLUS TEAM

Members

1. Paul Magesa
2. Ndementria Vermand
3. Lena Mfalila
4. Gustav Moyo
5. Ligmas Samwel



NAME OF THE PROJECT SITE SENGEREMA DESIGNATED DISTRICT HOSPITAL



ARC Project Context ★

- National HIV prevalence rate is 4.7%
- National ART coverage is at 53%
- Number of nurses in the country 23,000
- Current AGPHAI Implementing partners active in the project site

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> <p>To operationalize task sharing policy to enable Nurses /Midwives to provide NIMART services to people living with HIV&AIDS by July 2017.</p>	<p>AIM Statement</p> <p>Increase percentage of HIV + clients enrolled in HIV clinic initiated on ART from 45% to 70% by July 2017.</p> <p>Metric: Number of HIV+ clients on ART/ Total number of HIV+ clients enrolled in HIV&AIDS care Clinic in a month</p> <p>ACHIEVEMENT:</p> <p>Increased percentage of HIV+ clients enrolled in HIV clinic initiated on ART from 45% to</p>	<p>Intervention</p> <ul style="list-style-type: none">•Developed job descriptions for Nurses/Midwives to provide NIMART services according expanded roles in Task Sharing Policy by November 2016•Oriented CTC staff and Hospital management on Task Sharing Policy by December 2016•Trained Nurses/Midwives on expanded roles to provide NIMART services by December, 2016•Conducted mentorship and supportive supervision By

Key Activities/Intervention

1. Oriented Nurses/Midwives and other clinicians on expanded roles and responsibilities of NM according to task sharing policy
1. Trained 18 facility staff including Nurses/Midwives on expanded roles of NM to provide NIMART services
1. Conducted Mentorship and Supportive Supervision to four NM at the facility
2. Developed job descriptions for Nurses/Midwives to provide NIMART services according expanded roles in Task Sharing Policy

Output Indicator Matrix

Describe your monitoring activities

Output Indicator	Frequency of monitoring	Comments – How was the experience?
NIMART training modules developed	Once	Facility had no modules to train NM on NIMART
Refresher training on ART and Task sharing policy conducted	Once	Nurses had to be capacitated on NIMART
Task sharing aligned Job descriptions for NM developed	Once	Nurses had no clear Job descriptions Nurses had no authority to initiate ART before Task Sharing Policy
Conducted Mentorship and Supportive supervision to four Nurses at the facility	Quarterly	NM needed continued support for effective provision of NIMART services, identification and addressing gaps.

Outcome Indicator Matrix

Describe the impact of activities

Outcome Indicator	Impact
Nurses and Midwives initiating NIMART services	Increased percentage of HIV + patients on ART
NM are competently providing NIMART services	
NM using new job descriptions to provide NIMART services	
Nurses and Midwives are aware on new job descriptions	Increased confidence and competence of NM in providing NIMART services

Intervention Graphic

ACTIVITIES

Oriented Nurses/ Midwives and other clinicians on expanded roles and responsibilities of NM according to task sharing policy

Trained 18 facility staff including Nurses/Midwives on expanded roles of NM to provide NIMART services

Conducted Mentorship and Supportive supervision to four Nurses at the facility

Developed job descriptions for Nurses/Midwives to provide NIMART services according expanded roles in task sharing Policy

Change

Provision of NIMART

Increased # of staff to initiate ART

Improved competences in NIMART

Expanded scope of NM to provide NIMART services

Result Chart

ARC Project Implementation at Sengerema DDH

Indicator	Action 1	%	Action 2	%	Action 3	%
No. of HIV+ Clients Live in Care	5167	45	5254	49	4949	62
No. of HIV+ Clients on ART	2336		2563		3068	
Number of NM Providing ART	0	0	4	100	4	100
Number of NM at CTC	4		4		4	
% of HIV+ Clients Newly initiated on ART by NM	0	0	50	39	70	50
Cumulative No. of HIV+ Clients Newly initiated on ART	28		128		140	

Lessons Learned

- We have succeeded by 89% to hit our target which has resulted to 62% of HIV+ patients initiated on ART
- The top 2 lessons learned in implementing our QI project are:
 - Nurses can accelerate achievement of 90/90/90 HIV&AIDS goals by 2020 when are capacitated to provide NIMART services
 - Mentorship and supportive supervision are key in better health services provision

Lessons Learned

- The selection of the site, we would have had selected a nearby site
- Capacities developed by our team this year;
 - Development and implementation of project M&E plan
 - Utilizing the Business Mapping Process Model and Capability Maturity Model.

Way Forward

- Developing concept note and submit to PEPFAR implementing partners for scaling up this initiatives
- Dissemination targets to present our results include;
 - MOHCDGEC, CDC and PEPFAR implementing partners
 - Nurses during the upcoming AGM and International conference
- The quad remain in contact by working in collaboration through quarterly meeting for moving forward the Nursing agenda
- ARC Faculty can improve future support by increasing budget and frequent technical assistance

Acknowledgement

- PEPFAR
- MOHCDGEC
- ARC Faculty Team
- CDC
- Sengerema District Designated Hospital
- Sengerema District Council

END

- THANKS FOR LISTENING
 - ASANTENI SANA
 - ZIKOMO
 - SIYABONGA