



DISTRICT MUNICIPALITY UMKHANDLU WESIFUNDA

PROVINCIAL COUNCIL ON AIDS (PCA)

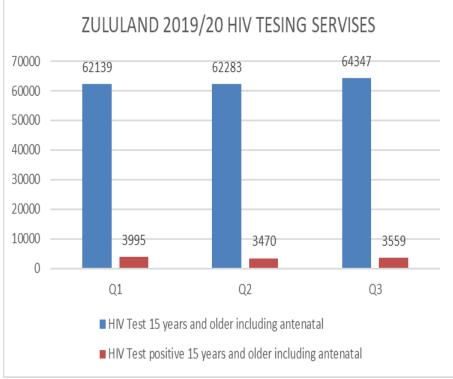
PRESENTER : CLLR TD BUTHELEZI

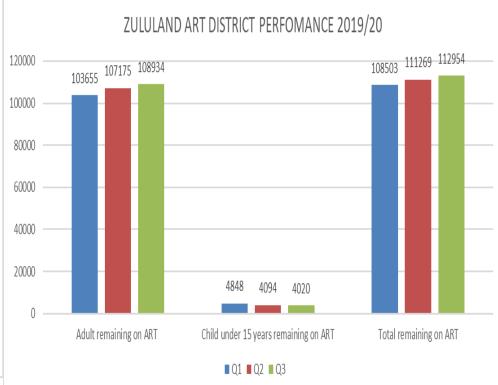
DATE : 11 MARCH 2020

VENUE : GREY'S HOSPITAL RECREATIONAL HALL

QUARTER 3 (OCT-DEC 2019/20) HIV PERFORMANCE UPDATE

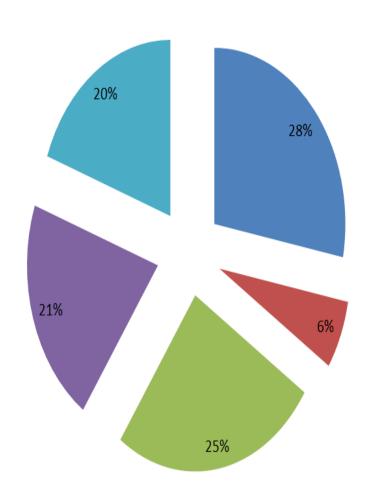
	Baseline	Target	Q1	Q2	Q3
HIV Test 15 years and older including antenatal	187 693	239 200	62139	62283	64347
HIV Test positive 15 years and older including antenatal	14 194	18 064	3995	3470	3559
Adult remaining on ART	96298	111648	103655	107175	108934
Child under 15 years remaining on ART	4577	5173	4848	4094	4020





QUARTER 3 (OCT-DEC 2019/20) TB PERFOMANCE UPDATE

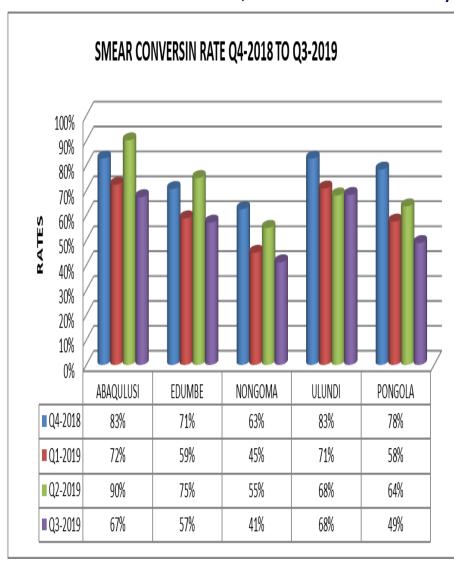
TB BURDEN PER SUB DISTRICT

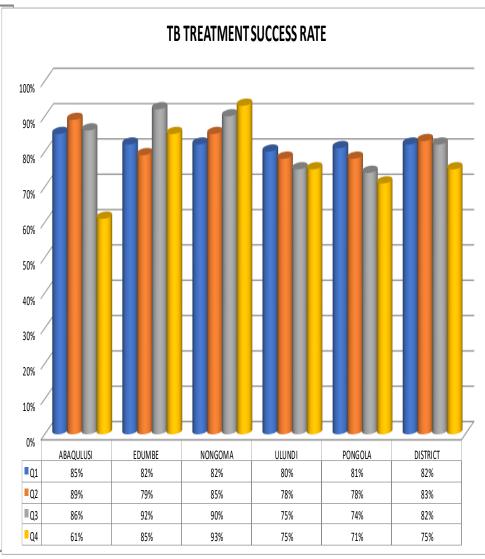


■ ABAQULUSI ■ EDUMBE ■ NONGOMA ■ ULUNDI ■ PONGOLA

		TB symptom 5 years and older screened in facility rate										
Organisation unit/Period	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19
AbaQulusi	83.6	86.8	81.8	86.5	89.2	87.5	93.5	93.5	88.9	97	94.8	95.4
eDumbe	70.8	65.8	75.1	69	74.2	77.7	78.1	79.6	78.4	81.3	80.6	73.9
Nongoma	106.4	106.5	84.6	99.6	100.8	106.8	102.7	102.5	104.2	104.4	98.4	102.2
Ulundi Local M	81.3	85.5	87.2	83.4	82.5	78.5	84.9	81.3	81.8	81	81.8	80.1
uPhongolo	97.8	95.7	94.8	99.3	93	94.3	102.9	90.4	93.4	103.7	101.5	93.6
Zululand District	88.9	90	85	88.8	89.2	89.6	93.3	90.6	90.2	93.8	92	90.5

QUARTER 3 (OCT-DEC 2019/20) TB PERFOMANCE UPDATE





QUARTER 3 (OCT-DEC 2019/20) NARRATIVES

INDICATOR	CHALLENGES	KEY INTERVENTIONS	Progress Report
1. Low HIV Positivity Yield 4-6%	Minimal implementation of comprehensive care	Strengthen door to door testing (Alignment of DOH and DSP activity program)	-Community based testing is conducted through door to door testing, Qoqoqo Sikhulekile ekhaya and index testing
	management during after hours, holidays and weekends	Hotspots, grey areas, Reaching our governmental different departments	-Introduction of male services at Mason clinic, Dumbe CHC has been started from Mondays 7h00 till late hours supported by DSP
	Inadequate implementation of index contact	Conduct direct community based testing to areas of high prevalence and during weekends	-uLundi A and uMdumezulu male comprehensive services plans in place to be starting
Testing , clients not ready to give their contacts	ready to give their	Strengthen targeted testing in community hotspots	-Nongoma Phila Ndoda is being upscale throughout the week incorporated with Outreach services instead of one day per week
	Few male contact Index elicitated, working very far	Increase afterhours testing, weekend and holidays monitor and supervise utilization of these services	Increase HIV test yields by testing more men aged 25 to 45 years. Address small groups of men separately and privately, in facilities and in community settings
	.Delayed linkage of children testing	Daily/Weekly monitoring and verification of index testing tools	about HIV testing and treatment to increase the testing of men. Plan activities for men over weekends and the
	Targeted testing not	Monthly visit to Institutions of higher learning	Easter period when migrant workers will be home.

QUARTER 3 (OCT-DEC 2019/20) NARRATIVES

INDICATOR	CHALLENGES	KEY INTERVENTIONS	Progress Report
2. Low ART initiation rate 86%-92%	Poor linkage to care Low case finding in Children < 15 years, Adolescents and youth in schools	Re implementation of treatment literacy classes Disclosure remains a critical challenge in both adults and children Use of CHW and Campaign Agents to trace those appearing not honoring the appointments Fast track all Children < 15 years, adolescents and youth in schools	Ensure, that at clinic visits, behavioural and psychosocial challenges are assessed, including depression, and other mental disorders, to assess the required level of support the patient may require. Depression has been found to be a cause of non-adherence

QUARTER 3 (OCT-DEC 2019/20) NARRATIVES

INDICATOR	CHALLENGES	KEY INTERVENTIONS	Progress Report
2.High number of LTF up clients/TROA fluactuating	Non Adherence to Treatment CCMDD Patients Poor filing system due to inadequate filing space, inadequate staff and inadequate access control to filing room Patient contact info. Not up to date and Movement between facilities Cross boarder issues with Swaziland, uMkhanyakude and uMzinyathi	Fast track adherence literacy module classes Welcome back scripts standardization is being implemented Filling system re arranged Install additional shelves where space allows. Recruit filing clerks. Conduct weekly generation of LTF up client lists and daily evidence on auctioning of the lists Manually pull out all clinical files of patients appearing in uLTF to verify if they are really lost to follow, Use tracing system to track the client, Update patient's record if it was clinical recording and monitor daily capturing of outcomes	Calling patients back to care Negotiate with the patient in terms of return dates Update patient info. with every visit at every service point

QUARTER 3 (OCT-DEC 2019/20) PMTCT PERFORMANCE UPDATE



QUARTER 3 (OCT-DEC 2019/20) PMTCT PERFORMANCE UPDATE

Data Element	Challenge	Remedial Action
Infant PCR test Positive around 10 weeks	 Seroconversion of mothers during breast feeding period Poor adherence to ARVs leading to unsuppressed viral load. 	 Roll out of safer conception programme to all sub districts
Infant initiated on cotrimoxazole around 6 weeks	Shortage of supplies from PPSD	 Redistribution of stock from facilities with less burden of exposed babies.

QUARTER 3 (OCT-DEC 2019/20) MMC PERFOMANCE UPDATE

Medical male circumcision - total						
Period / Organisation unit	AbaQulusi Local Municipality	Nongoma Local Municipality	Ulundi Local Municipality	eDumbe Local Municipalit y	uPhongolo Local Municipality	
Apr-19	228	92	147	34	60	
May-19	245	34	28	39	49	
Jun-19	632	126	431	51	413	
Jul-19	290	266	308	0	112	
Aug-19	277	79	58	51	15	
Sep-19	622	29	125	14	54	
Oct-19	171	17	64	51	2	
Nov-19	350	58	549	25	35	
Dec-19	187	39	242	53	54	
Jan-20	73	86	138	91	52	

QUARTER 3 (OCT-DEC 2019/20) ACTION ITEM UPDATE

Challenge	Mitigation	Status
• Condoms distribution	 Increase marketing and distribution through VMMC campaigns, WBOTS, Wellness Campaigns and during events. 	 Robust condom promotion in all Wellness Campaigns conducted per sub districts is ongoing 2 022 000 condoms were distributed this quarter.
• MMC	 The district partner withdrew from the district and the replacement partner only started on November 25 resulting in 3 months without a support partner. December is a low uptake month for MMC 	 A new support partner has commenced and has been introduce at all levels. DoH staff and traditional leadership has improved independent operations for when the support partner is not available.

QUARTER 3 (OCT-DEC 2019/20) ACTION ITEM UPDATE

Challenge	Mitigation	Status
• STI treatment	 Community dialogues to understand challenges and plan interventions are conducted in all sub districts. Isibaya samadoda dialogues and key populations interventions are being implemented Engagement of all Sector Departments, Civil Society and NGO's in War Rooms 	1265 males with male urethritis syndrome were treated this quarter.

UP COMING PLANS FOR THE NEXT QUARTER

- Community based testing operation MBO
- Index case testing for HIV and TB
- Community dialogues engaging communities in community testing and index testing
- Weekly Outreach campaigns to high schools through youth services
- TVETs weekly services to reach out to youth(on Tuesdays and Wednesdays in all 6 TVET colleges in the district)
- Isibaya samadoda and monthly MMC camps
- Integrated HAST meeting roving to all sub districts, each with appointed HAST committee teams inclusive of Drs to improve clinical management
- NIMART Trainings per sub districts conducted by DSP —HST to improve clinical competency.
- Improve electronic patient monitoring and reporting systems

ACHIEVEMENTS/SUCCESSES

GOAL 1:

ACCELERATE PREVENTION TO REDUCE NEW TB, HIV/AIDS &STI INFECTIONS

Actions

Wellness campaigns are conducted by all subdistricts

- Special focus to index cases and key population (weekly TVETs services and health promotion to all Key population)
- Testing and distribution of condoms at hotspots.
- Monthly MMC Camps to reach out to males are conducted

ACHIEVEMENTS/SUCCESSES

GOAL 2:

REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

- Integration of all services in the facilities
- There are 351 Adherence clubs from (311)where people spend less than an hour to collect their medications.
- Treatment is also distributed in the CCMDD PUPs and collected through Spaced fast lane to reduce nurses workloads to household champions and Outreach teams

ACHIEVEMENTS/SUCCESSES

GOAL 3:

REACH ALL KEY AND VULNERABLE POPULATIONS WITH CUSTOMISED AND TARGETED INTERVENTIONS

- 79 Clinics have been trained on sensitization of Key Population to provide services freely.
- •Services are given to all hot spots identified per sub districts except Ceza with no HTA site
- Provision of services to the Taxi, Truck drivers and Sex worker hotspots is done

STATUS OF AIDS COUNCILS

MUNICIPALITY	FUNCTIONALITY	SECRETARIAT	BUDGET
Zululand	functional	1 dedicated	R350 000
AbaQulusi LM	not functional	1 dedicated	No Budget
eDumbe LM	functional	2 dedicated	R150 000
uPhongolo LM	functional	1 dedicated	R1 000 000
Nongoma LM	functional	1 dedicated	
Ulundi LM	functional	2 dedicated	



THANK YOU! DANKIE! NGIYABONGA!