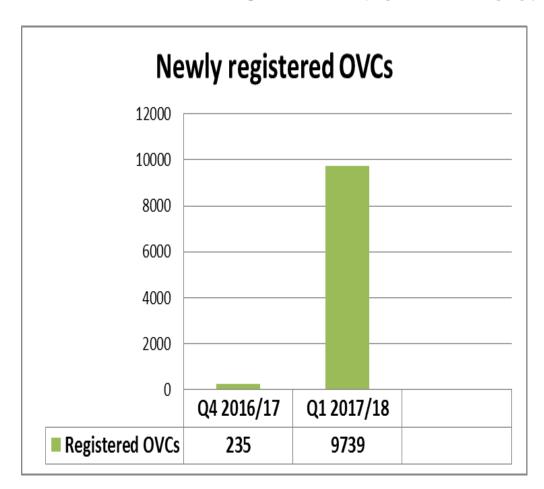
KING CETSHWAYO DISTRICT AIDS COUNCIL REPORT



08 SEPTEMBER 2017
DAC CHAIR: DISTRICT MAYOR, CLLR
NNP MKHULISI

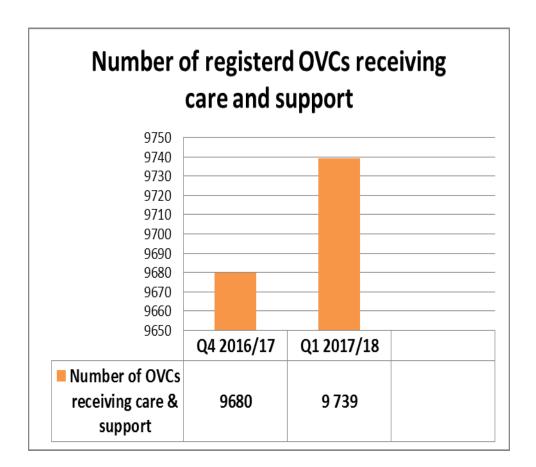
INTERVENTION AREA: ORPHANS & VULNERABLE CHILDREN



Q1 report includes annual data that is why is 9739.



INTERVENTION AREA: ORPHANS & VULNERABLE CHILDREN

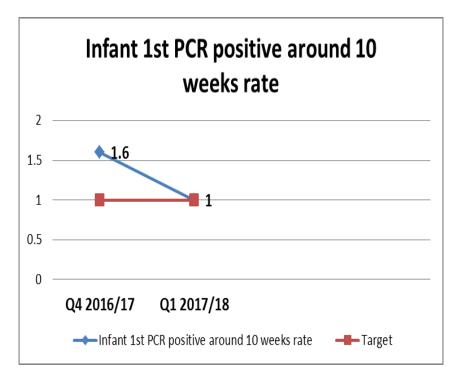


Q1 includes data from Q4.



INTERVENTION AREA: MATERNAL CHILD & WOMEN'S HEALTH

Target < 1,2 %



A decreased in Q1 is observed from 1.6% in Q4 to 1% (9/1095)

What has been done:

- Double testing of babies due to mothers using different clinics and not revealing the babies HIV status, and also reporting the child's Road To Health Card as lost is still a problem in the district.
- Drop in patients from other facilities and districts report to our clinics already positive.

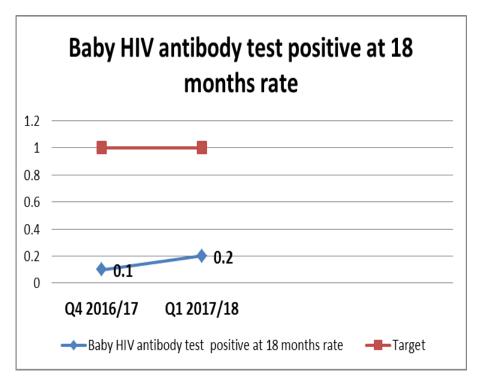
Interventions in place

- Clinicians to be vigilant with the patients who are already on ART stressing the importance of adherence.
- Viral load for HIV positive ANC clients to be monitored throughout pregnancy and viral load suppression activities to be implemented to reduce the risk of transmission.
- PCR positive results to be communicated on time to the mother/parents. The clinicians to note on the RTHC that PCR was done and add relevant stickers on the RTCH.



INTERVENTION AREA: MATERNAL CHILD & WOMEN'S HEALTH

Baby HIV antibody test positive around 18 months rate



Child rapid HIV test around 18 months positive rate is 0.21%(4/1864) and its within the target of <1%.

Interventions in place

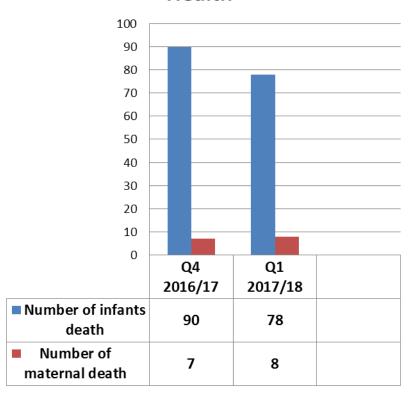
In service training of health care workers on infant feeding

Linkage of mothers post delivery to community care givers for support on infant feeding



INTERVENTION AREA: MATERNAL CHILD & WOMEN'S HEALTH

Maternal, Women's & Child Health



An increased in Q1 is observed from 7 in Q4 to 8

Four (4) deaths that occurred in LUWMRH were from PHC facilities and 2 out of these were from UNIZULU. There were also 2 failed abortions.

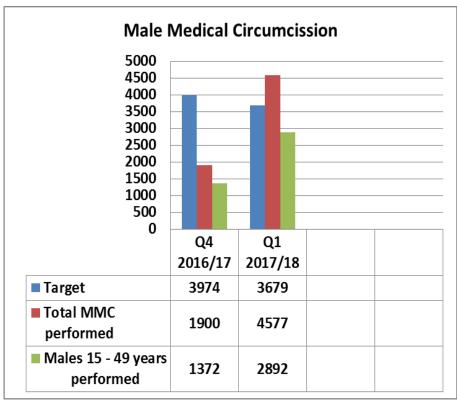
Interventions in place

- The district and facility MCWH to market CTOP services at UNIZULU and other tertiary institutions within the district.
- The clinic within the campus also to market and offer contraceptives or family planning services.
- The hospitals and PHC facilities referring to LURWMH to identify and manage high risk ANC clients on time. This will prevent complications that lead to maternal deaths.
- Obstetric ambulance to be always available when need



INTERVENTION AREA: HIV PREVENTION

Medical Male Circumcision



Medical male circumcision performed - total is 4577 which was above a set target of 3679.

What has been done:

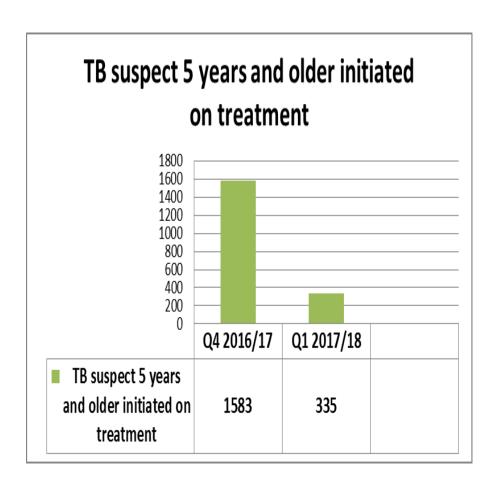
- All sub districts had MMC camps
- There are contracted GPs, NGOs that are responsible for performing MMC
- MSF and Care works have sub district based mobilisers.
- Data verification is done monthly at all levels

Interventions in place

- The hospitals to continue using the services of the contracted NGO for support in this service.
- Some of these NGOs have doctors and nurses that assist with circumcisions.
- CARE WORKS can be contacted to assist with mobilisation.



INTERVENTION AREA: TB TREATMENT



A decrease is observed from 1583 in Q4 to 335 in Q1.

Reason for this performance.

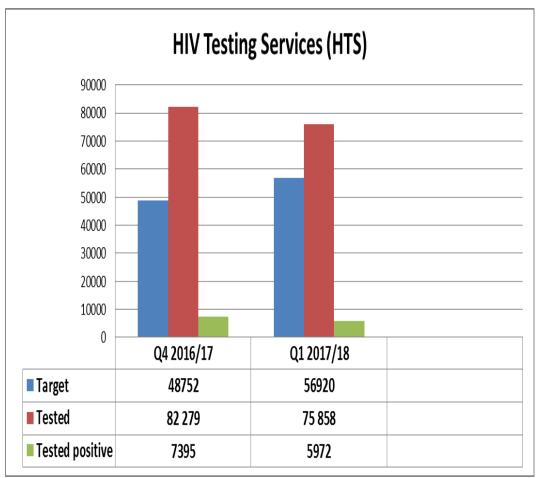
- All facilities are using case identification register which assist them in identifying TB cases to be initiated.
- NHLS is responsible for delivery of results within 48hrs

Interventions in place

 Continuous monitoring using case identification register



INTERVENTION AREA: HIV TESTING & COUNSELLING



Quarterly targets was achieved

7.8% positivity rate

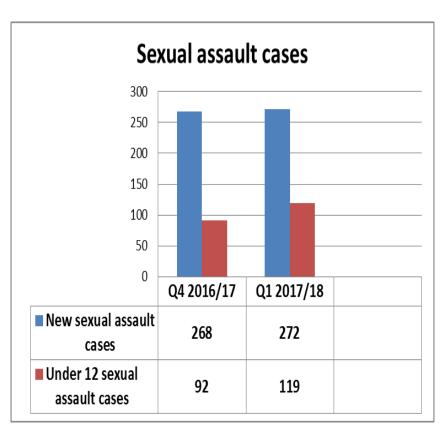
- What has been done
- Conducting Community Based HIV Counselling and Testing (CBCT) focusing on key populations including youth.
- Implementation of PICT (Provider initiated counselling & testing) in all facilities
- Support from partners, FPD,MSF and Broadreach
- Monitoring of the performance through the nerve centre meetings, barometers, use of dashboard and run charts.
- Provision of HTS in all district events.

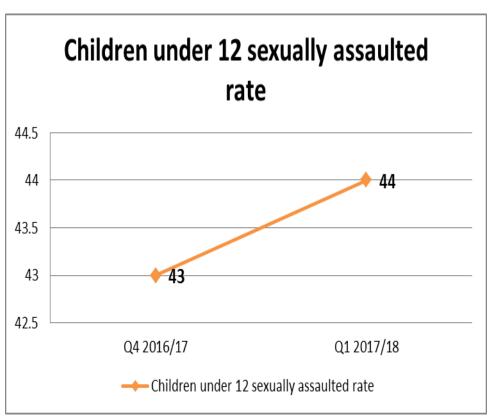
Interventions in place

Continue with HTA services to high risk areas including Key Population.



INTERVENTION AREA: SEXUAL AND REPRODUCTIVE HEALTH







INTERVENTION AREA: Prevention of HIV transmission

Sexual assault remains a challenge in our district.

An increase in the rate of under 12 sexual assault cases from 43% in Q4 to 44% in Q1 is observed.

What has the District already done:

The District has worked with other government departments through OSS as this is a social ill which need stakeholder coordination and involvement.

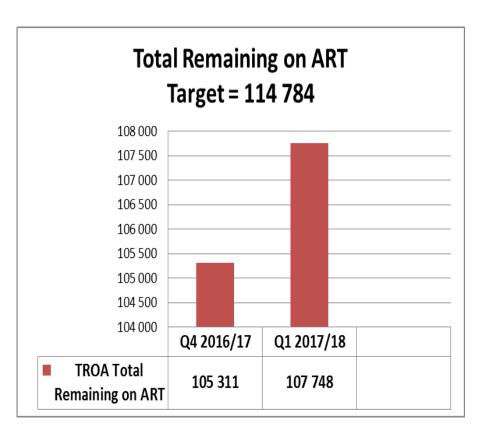
Activities that the District will embark on:

The district will continue with community awareness campaigns and community dialogues as part of community engagement

Global fund project will also assist with education in schools



INTERVENTION AREA: COMPREHENSIVE ART SERVICES



An increase is observed from 105 311 in Q4 to 107 748 in Q1.

Client tracing and tracking system using of Tier.net is being utilised.

What has been done

- Implementation of UTT (Universal Test and Treat)
- Implementation of Adherence Guidelines, which improve retention to care (CCMDD, Chronic clubs & Spaced/fast lane appointments).
- Integration of Tracer Teams (TB & HIV)
- File audits for Early Warning Indicators (EWI) to identify defaulters

Interventions in place:

- Institutions to continue updating Tier.net, identifying and tracing the defaulters and bringing them back to the system.
- All institutions to continue implementing UTT.



STRATEGIC OBJECTIVE 5: COORDINATION, MONITORING & EVALUATION

INTERVENTION AREA: COORDINATING, MONITORING & EVALUATION

Reporting	Jan - March 2017	April – June 2017	July – September 2017	Oct to Dec. 2017	COMMENTS
LAC Reporting to the DAC	03 LAC Reports ✓ uMhlathuze ✓ uMlalazi ✓ UMfolozi	O5 LAC reports: ✓ Umhlathuze ✓ Mthonjaneni ✓ UMlalazi ✓ UMfolozi ✓ Nkandla			
WAC Reporting				,	CING CEISHWAYO

to the LAC

DAC CHAIRPERSON: CLLR NNP MKHULISI



