



King Cetshwayo District DAC Report

Provincial Council on AIDS Meeting
Venue: Microsoft Teams (Virtual)
Date: 23 JUNE 2021
Presenter: Cllr BL PHUNGULA

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Challenge	Mitigation (Plans to Address Challenge)	Status (Actions Taken)
<p>Low HIV positive yield Target – 7% Annual performance = 4.6%</p> <p>Poor implementation of targeted testing using HIV risk assessment tool</p> <p>Decreased number of clients in our health facilities due to COVID 19 regulations</p> <p>Poor implementation of index testing by some health facilities</p>	<p>Individual performance monitoring whereby all health care workers in the facility implementing HIV testing were given a target of one positive client per week through Index testing and HIV risk assessment screening.</p> <p>Implementation of MINA campaign in 12 Siyenza sites</p>	<p>Implementation of index testing and monitoring in the weekly nerve centre meeting</p> <p>Strengthening of the HIV risk assessment in all facilities for targeted testing.</p> <p>To integrate COVID 19 screening with all other programmes (HIV,TB and non communicable diseases)</p>
<p>Poor Male and Female Condom Distribution</p> <p>Male condoms Annual performance at 48%</p> <p>Female condoms Annual performance at 18.3%</p>	<p>District is monitoring the facility distribution of condoms in the nerve centre meeting monthly</p> <p>Civil Society Organizations and Local Municipalities to assist with condom distribution</p> <p>Ensure condom distribution in all District and Local community outreach service delivery intervention programmes.</p>	<p>Male and female condoms target were distributed in all facilities.</p> <p>District is monitoring all facilities not meeting their targets.</p> <p>All facilities not meeting their targets, to develop quality improvement plans with time frames</p> <p>District condom coordinator to monitor closely the implementation of the QIPs and hold Operational managers accountable where activities were not actioned.</p>

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<p>Maternal death in facility</p> <p>Increased in Q4 is noted which is double the number recorded in Q3</p> <p>Q3 =7 Q4 =14</p> <p>Increased observed is due to the following:</p> <ul style="list-style-type: none"> • Covid-19 related deaths • Influence of the regional centre in KCD • Poorly managed case-by-case 	<ul style="list-style-type: none"> • Integration of services to improve early ANC booking • Role of preconception service in all streams in the facility as planned pregnancies have positive impact on outcomes 	<ul style="list-style-type: none"> • Continue with key trainings like Basic Antenatal Care (BANC plus) and Essential Management of Obstetrics Emergencies (ESMOE). • Audit of BANC and Partogram to improve quality of care • Continuous in-service to Obstetric ambulance teams

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<p>Total remaining on ART (TROA)</p> <p>Annual target 158 007</p> <p>Annual performance 138 357</p> <p>Reasons for not meeting the target are as follows:</p> <ul style="list-style-type: none"> • District lost 4800 clients to transfer out to other districts and provinces • Self-transfer of clients to other districts • Clients transferring within the district are lost before they reach new destination 	<p>Monitoring of the Implementation of deduplication initiative effectively</p> <p>Tracking of transfer out clients especially those transferred within the district if they have reached their destination facility.</p> <p>Utilization of the District Server to track self-transfers within the district</p>	<ul style="list-style-type: none"> • List of Lost To Follow up (LTF)s is generated weekly • Each community health care worker is give the target of 3 LTF up clients to bring to care • Implementation of appointment system to identify early treatment interrupters. • Implementation of bicycle model to deliver treatment for suppressed clients who are unable to collect their medication for different reasons to prevent defaulters

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<p>TB client start on TB treatment – Total</p> <p>Total number of clients who were initiated on TB treatment was 2460.</p>	<p>TB screening is implemented in all facilities and in the community by Ward Based PHC outreach teams</p> <p>Monitoring of sputum results turn around time so that all patients with positive TB sputum results are initiated on TB treatment</p>	<ul style="list-style-type: none"> Integration of TB screening with COVID 19 screening to strengthen TB case finding
<p>TB clients Loss To Follow up</p> <p>Total number of TB Loss to follow up recorded was 547 which is a huge number considering the fact that TB is an infectious disease</p>	<p>Monitoring of all clients on TB treatment by generating Tier. net reports weekly.</p> <p>Intensive tracking and tracing all clients appearing on the lost to follow up list by Ward Based Outreach teams.</p>	<ul style="list-style-type: none"> Integration of TB services with all other service so that patient have one return date Early identification of all clients who have missed their appointment for early tracing and tracking and bringing them back to care.

Achievements/Successes

Goal 1: Accelerate prevention to reduce new HIV, TB and STI infections:

- Facility TB screening increased from 89.7% in Q3 to 95% in Q4. Target is 90%

Goal 2: Reduce morbidity and mortality by providing treatment, care and adherence support for all:

- Total HIV viral load suppressed rate including both adults and children at 6 months is 91.6, vs target of 90 (3rd 90)

Goal 3: Reach all key and vulnerable populations with customised and targeted interventions:

- AGYW reached with life skills empowerment programmes in quarter 4 = 738
- Specific key and vulnerable populations tested for HIV =498

Achievements/Successes

Goal 4 : Address the social and structural drivers of HIV,TB and STIs

- Beneficiaries receiving social behaviour change programmes =969.
- Increase in the number of Children age 0-4 years accessing ECD programmes = 8220 as compared to 6545 in quarter 3.
- Number of AGYW (15-24 years) reached through GBV prevention programmes =1014.
- GBV AGYW (15-24 years) survivors provided with post-violence care services = 338
- GBV survivors provided with post-violence care services = 1481
- Decrease in sexual assault cases under 12 years =66 as compared to 86 in Quarter 3.
- Decrease in New sexual assault cases seen in public health facilities = 201 as compared to 282 in quarter 3.

Achievements/Successes

Goal 5: Ground the response to HIV,TB and STIs in Human Rights principles and approaches

- The District AIDS Council Monitoring and Evaluation Training Session was held on 31 March 2021 led by the Office of the Premier: HIV and AIDS Directorate.

Goal 6: Promote leadership and shared accountability for a sustainable response to HIV,TB and STIs

- King Cetshwayo District Multi-Sectoral Stakeholders Forum Engagement led by the Office of the Premier was held on 26 March 2021.

Plans for the Next financial year

- Strengthen the implementation HIV self screening (HIVSS)
- Strengthen the implementation of PrEP for HIV negative clients who are at risk for HIV
- Strengthen community health service delivery model including treatment home delivery
- Strengthen condom distribution drive working closely with Civil Society Organizations and other stakeholders at ward level
- Conduct capacity building workshops for Ward AIDS Committees and LACs in order to strengthen the functionality of the structures at ward level and to strengthen the Local AIDS Councils and District AIDS Councils Reporting systems.

DAC CHAIRPERSON CLLR BL PHUNGULA



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