

AUGUST 2022

METS WATCH

METS Gets Nod to Improve Governance, Leadership And Management of Health Services at Regional Referral Hospitals



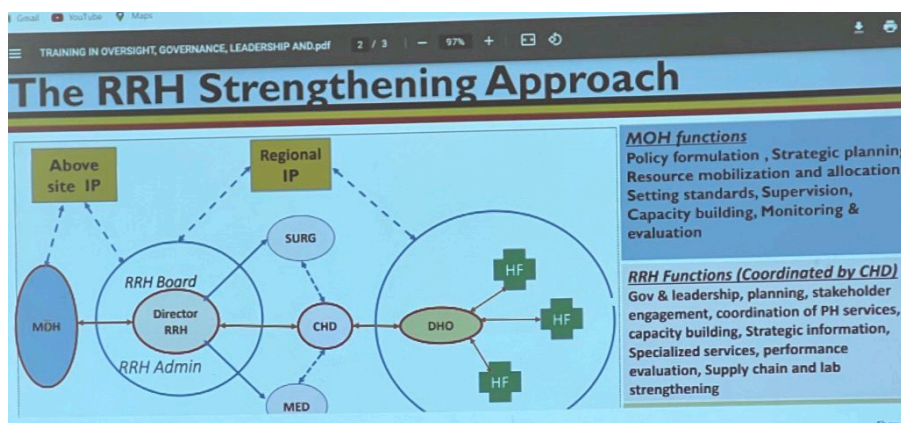
Dr. Kamba during his presentation on planning and building partnerships

By Rose Baryamutuma, Nancy Karunganwa & Goretti Akidi

The Ministry of Health (MOH) adopted a Regional Approach to service delivery- also referred to as the Regionalization Strategy. The approach uses Regional Referral

Hospitals (RRHs) as coordinating entities with responsibilities in planning, coordination, monitoring, support supervision, Quality Assurance/improvement, surveillance, capacity building and strengthening the health information systems within the districts in their

catchment areas. The Regional approach is expected to improve disease prevention, quality of care and coordination for health service delivery, which are a pre-requisite for control of HIV/TB and sustainability of interventions.



Snap shot from the presentation

Against this background, MakSPH-METS in collaboration with MoH, organized a five-day (15th -19th August 2022) training in Governance, Leadership and Management (GLM) for RRH Directors, Heads of Departments (Community Health, Laboratory) and Biostatisticians. In total, the training was attended by 42 participants from 8 RRHs of Soroti, Arua, Entebbe, Naguru, Mubende, Hoima, Fort Portal and Masaka.

The training covered critical principles in GLM including emerging health

care governance issues prioritized in the MoH Strategic Plan; Linking leadership and management practices to achieve results; Critical leadership skills that enhance personal effectiveness; Planning coordination and partnerships building and Conflict management.

Other key topics include Creating high performance teams, Managing change, Gender dimensions in the health sector, Health financing, Resource mobilization/ Advocacy, and Budgeting, and budgeting tools. The

training was based on the MakSPH-METS curriculum on Governance, Leadership and Management <https://bit.ly/GLM18>

Several notable trainers participated in the GLM training, thee included: Dr. Samuel Kamba, Richard Kabagambe, Dr. Bayo Fatumbi, Dr. Sarah Byakika, Dr. Assay Ndazihiwe, Isaac Ssebuliba and Ibrahim Lutalo.

Participants were equipped with practical skills to monitor and coordinate delivery of health services, identify performance gaps and their causes, as well as identifying priority health needs using information derived from quality data to formulate appropriate actions.

At the end of the training, participants generated action plans which will be implemented post-training to address gaps in GLM. MakSPH-METS will support implementation of action plans to generate lessons that can inform replicability and address gaps in other health system building blocks.

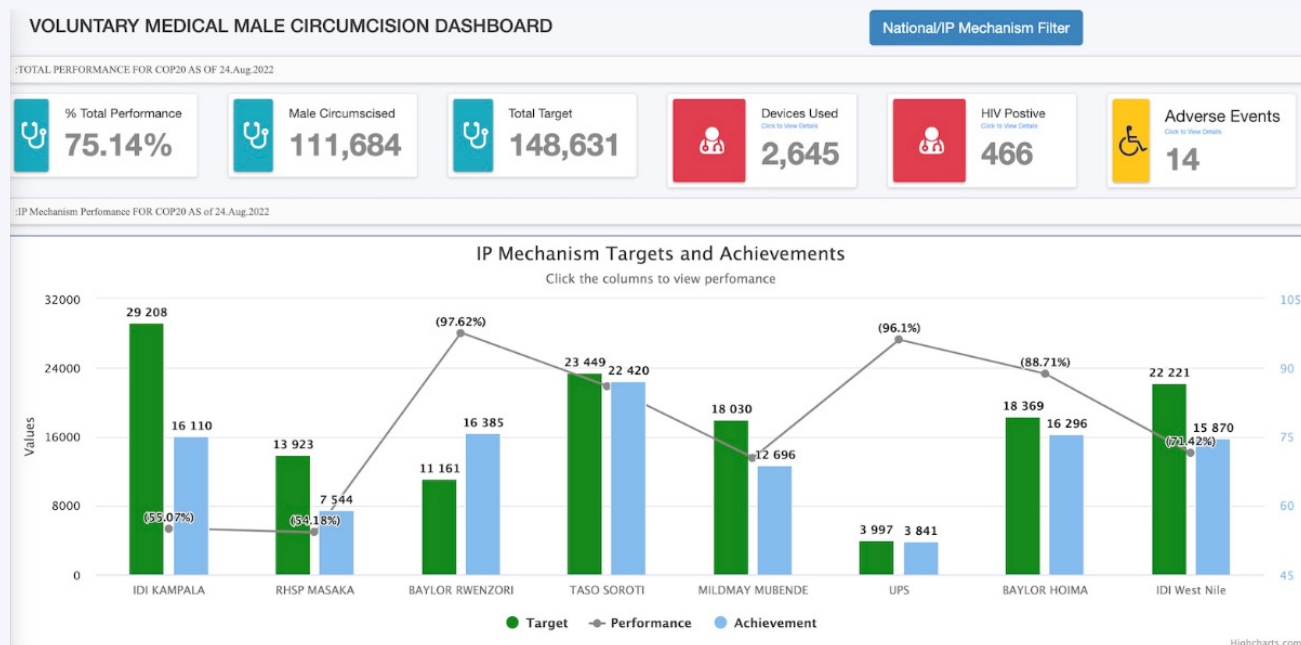


Dr. Ndazihiwe emphasised the need for good data to strengthen the RRH mechanism



Rose Baryamutuma gives insights on organizational leadership, stakeholder mapping, strategic planning and M&E

METS facilitates reporting real-time data on Voluntary Medical Male Circumcision



Snapshot of the Nerve Center generated VMMC Dashboard

By Alex Ochedikol and Nancy Karunganwa

Established in 2012, the 'Nerve Center' has supported the provision of real-time data on the Voluntary Medical Male Circumcision (VMMC) program. The weekly reports support identification of issues in a timely manner which allows for course correction.

Following transition of the VMMC Nerve Center to MakSPH -METS in 2020, facility coverage has expanded from 8 sites supported by the Infectious Diseases Institute (IDI) in 2012 to over 135 sites in the CDC-supported regions as of June 2022.

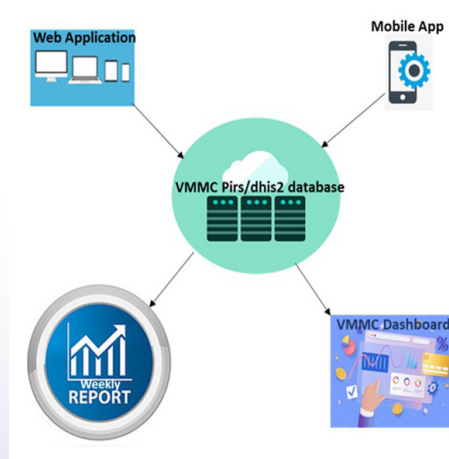
METS has since developed a new VMMC module in the PEPFAR In-Country Reporting System (PIRS) to capture additional data elements at the VMMC facilities. The new data elements include detailed HIV Testing Services (HTS) outcomes, additional data on adverse events, and finer age disaggregation.

Additionally, METS developed a dashboard (<http://vmmc.mets.or.ug>) showing a visual summary of facility VMMC data and the data entry has been decentralized to facility staff.

In July 2022, the new VMMC module in PIRS was successfully piloted in 8 sites in the regions of Kampala and West Nile. On 18th July 2022. The module was officially rolled out to over 90 CDC-supported facilities and

online trainings were conducted with the aim of building the capacity of Implementing Partners and site level staff to effectively utilize the system.

Ministry of Health through METS with support from CDC are working on upgrading the Nerve Center into a national database where all VMMC stakeholders across the country will submit data.



An illustration of how data is collected and disseminated.



Medical team carrying out a VMMC procedure

Scaling Up Recency Infection Surveillance



Participants from Luwero region pose for a photo after training

By Disease Surveillance and Response Team

Disease surveillance is critical to the generation of information towards the achievement of epidemic control. As part of the technical assistance to the Ministry of Health (MOH) surveillance efforts, METS is supporting the roll-out of HIV recency infection surveillance, building site level implementation capacity through staff training, coaching, mentorship, and support supervision. Recency testing helps to establish the period of HIV infection, and can detect long term infections as well as identify recently infected persons.

Between July and August, METS supported the activation of 34 sites to implement Recency surveillance in the districts of

Gulu, Luwero, Mbarara and Masaka. Over 57 health care workers participated in the training. The trainings were designed to build the capacity for HIV Testing services (HTS) providers, and laboratory personnel to implement recency infection surveillance, as well as equip data officers with the knowledge and skills to capture and report recency data through UgandaEMR.

The trainings focused on the following 10 steps of HIV recency infection surveillance; Pre-test HIV counselling and introduction of Recency; HIV Testing Services; confirmation of eligibility for Recency testing; obtaining informed consent; sample collection; Asante RTRI; recording results in Recency logbook and addendum; preparation of Recency specimen for transportation to the hub; sending client card and addendum for entry into UgandaEMR; and sending the specimen to Uganda Viral Research Institute (UVRI) through the national laboratory sample transportation network.

Following the training, the sites are expected to implement Recency testing, enter data into the electronic medical record which is transmitted to the Central (MoH-hosted) data base. These data will be used to identify where, when and among whom, the new or recent infections are occurring. This information that is critical to designing an appropriate Public Health Response to better prevent HIV spread.



National PrEP QI Collaborative

The Ministry of Health (MoH) in partnership with MaKSPH-METS and in collaboration with Implementing Partners (IPs) rolled out the National PrEP QI collaborative. The collaborative was aimed at improving the follow-up and treatment outcomes of clients started on PrEP, with a focus on uptake and continuity. The coaching focused on monitoring the implementation of the coaching toolkit as well as disseminating and building capacity of IPs and

continuous quality improvement teams at health facilities to implement the coaching tool kit.

The national Pre-Exposure Prophylaxis (PREP) QI collaborative onsite mentorships were held on 22nd-26th AUGUST 2022 in 50 health facilities across 23 districts within CDC supported regions in Uganda. The main purpose of the activity was to provide support to the regional teams and review progress on the implementation of the PrEP collaborative.

MaKSPH-METS partnered with IDI-Kampala, Baylor-Hoima, Baylor-Fort Portal, Mildmay- Mubende, RHSP- Masaka, and UEC



UgandaEMR Bootcamp for DHI

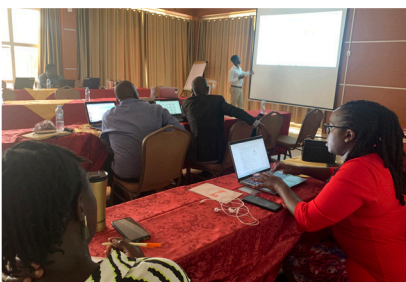
METS held a successful UgandaEMR bootcamp for Division of Health Information (DHI) at the Ministry of Health (MoH). The meeting equipped participants with the necessary skills and knowledge to use, design and support UgandaEMR implementation.

At the end of the bootcamp, MoH staff were able to use

and support UgandaEMR and guides on the overall UgandaEMR implementation plan were given. This included assigning contact persons of UgandaEMR at the Ministry hence streamlining all communication regarding UgandaEMR.



Bootcamp Asst. Commissioner DHI Paul Mbaka closing the bootcamp



Presentations during the bootcamp

METS HOLDS CONSULTATIVE MEETINGS

METS held consultative meetings with CDC, SITES, CPHL and MOH to discuss work plans and activities, iron out inconsistencies, create a way forward for harmonized engagement and implementation of program activities

Meeting with CDC on 9th August 2022



Consultative Meeting with Ministry of Health held on 31st August 2022



Consultative Meeting with SITES 10th August 2022



CPHL Consultative Meeting held on 17th August 2022



MOBILE DEVICE MANAGEMENT FOR UGANDA (MDM4U) DIGITAL LEARNING WORKSHOP TOOK PLACE FROM 24TH TO 25TH AUGUST 2022 AT PROTEA HOTEL, ENTEBBE.



By Clare Ashaba

The overall objective of the workshop was to learn about and discuss mobile device management in the context of digital health and the next steps for Uganda. The inclusive workshop, hosted by the Ministry of Health Division of Health Informatics convened digital health stakeholders including UNICEF, USAID, METS, Malaria Consortium, and representatives from the District Local Government. Private sector stakeholders included BRAC Uganda, Living Goods, and Healthy Entrepreneurs.

Discussions focused on the global/regional and country perspectives of implementation including lessons learned, and best practices. The workshop participants also co-created an investment case and road map for MDM in Uganda's digital health ecosystem and the healthcare system and this will feed into the broader digital health strategy for Uganda. The METS team served as key technical resource for the development of the device ownership, deployment architecture, and subscription models as well as the business requirements and Standard Operating Procedures for the investment case.

AUGUST ALBUM



Inter-Agency Cancer SQA and mentorship at Mukono Church of Uganda Hospital



Inter-Agency Cancer SQA



Inter-Agency CxCa SQA _ mentorship feedback meeting at Kamuli Hospital



Open Source for Equality (OSEQ) Award Ceremony

The Innovation response lab organized a contributorthon on 19th August 2022 at Fairway Hotel where UgandaEMR was selected as one of the projects to be contributed to by Opensource developers in Uganda. Over a period of 4 weeks, teams of four worked towards building the OPD form in the UgandaEMR rebranded. Out of all that participated, a winner had to be selected with the best solution towards the presented challenge. These winners, will contribute to our community of developers and growing our UgandaEMR developer volunteers.