



Enhancing Response to Sexual and Gender-Based Violence

Responding to and preventing Sexual and Gender-Based Violence (SGBV) and Violence Against Children (VAC) are critical components of Uganda's national HIV prevention program. The link between SGBV and the spread of HIV, along with its negative impact on treatment adherence, emphasises the need for effective intervention.

Recognizing the need for better coordination and service access for survivors, the Makerere University School of Public Health Monitoring and Evaluation Technical Support Program (MakSPH-METS) developed a new app designed to improve support for SGBV survivors. This followed an assessment in December 2022, that revealed gaps in service access and coordination in Fort Portal and Kampala Regions.

The app improves service access by enabling stakeholders to track the status of cases across various sectors, including health facilities, police, and district

probation offices. It aims to improve coordination among these sectors and facilitate timely management of SGBV cases, ensuring survivors receive the necessary care and justice.

In each region, key stakeholders were selected as GBV focal persons and equipped with the app on their smartphones. This allows for real-time information sharing and immediate action, ensuring that healthcare providers can offer prompt treatment and police can pursue justice effectively.

The MakSPH-METS team, in collaboration with regional implementing partners, is scaling up the app's use in pilot districts such as Masaka, Kiryandongo, Fort Portal, and Mubende. The team visited facilities and police stations to install the app and train selected focal persons on its use. This initiative aims to ensure comprehensive monitoring of services provided to SGBV survivors.



Musa (L) from METS teaches a police officer how to use the SGBV App

However, challenges remain, particularly in rural areas where access to smartphones is limited. Efforts are ongoing to address these gaps and ensure the app's effective implementation across all regions.

The SGBV app represents a significant step forward in improving the response to sexual and gender-based violence in Uganda, fostering better coordination and service delivery to support survivors.

Assessing Readiness for Integrated HIV and NCD Care Services

The Monitoring and Evaluation Technical Support (METS) Program supported the Ministry of Health to conduct a site readiness assessment for integrated delivery of HIV and Non-Communicable Diseases (NCD) services from 22nd to 26th April 2024, in collaboration with the US Centers for Disease Control and Prevention (CDC), and various implementing partners.

The assessment was part of efforts to improve and expand integrated HIV and NCD care services across Uganda, an initiative that began as a pilot program in 2022. The activity was conducted in selected health facilities in Acholi, Mubende, Kayunga, and Rwenzori regions to determine their feasibility for participating in a comprehensive NCD evaluation.



The integration of HIV and NCD care services is vital for improving the overall health outcomes of patients who are affected by both conditions. This exercise aimed to assess the readiness of selected health facilities to contribute to a wider evaluation of the

HIV/NCD integrated care program. This evaluation is key for understanding the effectiveness and quality of the integrated services and ensuring that facilities are equipped to deliver comprehensive care.

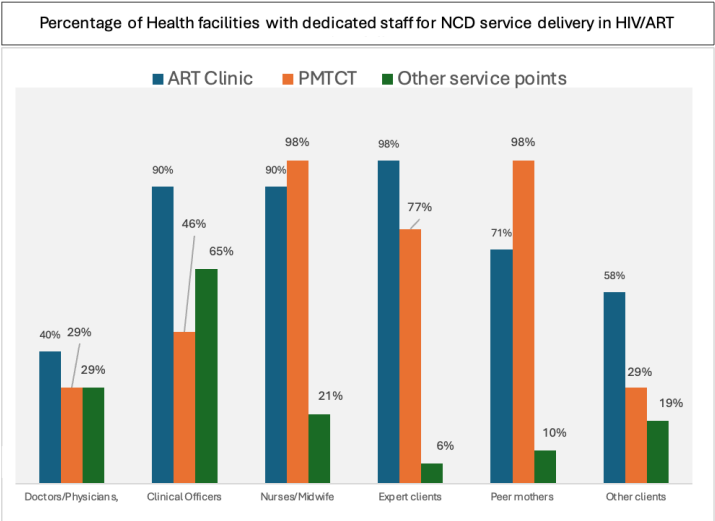
Aspects considered during the assessment:

1. *Integration Levels:* The degree of NCD integration into HIV care and the Integrated Community HIV Services Model (ICSDM) was thoroughly reviewed.
2. *Data Availability:* The availability and quality of necessary data for the program evaluation and data capturing processes were mapped and verified.
3. *Regional Preparedness:* Regions were sensitized about the evaluation processes, and immediate feedback and mentorship were provided to address identified gaps.

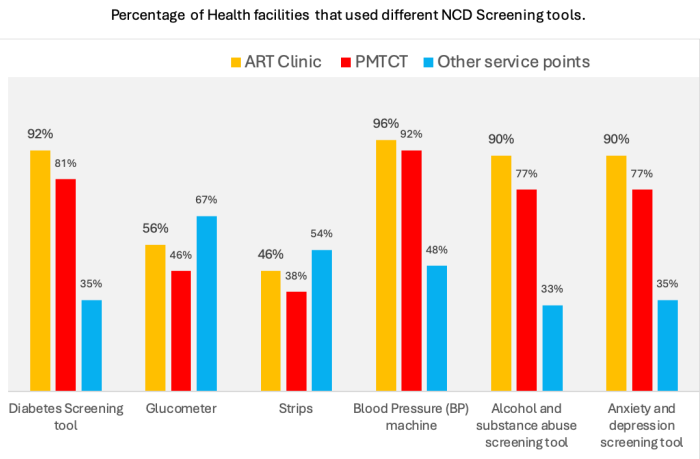
METS, as the lead Strategic Information PEPFAR Interagency, spearheaded the assessment process, methodology development, tool creation, team identification, logistics, and data management. They coordinated field activities, analyzed data, and prepared comprehensive reports for dissemination.

There is need to have NCD services offered at points of care in the ART and PMTCT sites where the clients would receive a combination of these services. The 48 facilities visited have already integrated NCD services (mental Health, diabetes, and hypertension). Of these, 78% have integrated mental health services in their PMTCT clinics.

Regarding staffing, 40% of the facilities have a dedicated NCD services physicians /doctor in the ART Clinic, 29% have doc have dedicated physicians in the PMTCT clinics. 90%. Most of the facilities have clinical and nurses in the ART than PMTCT facilities but more nurses offering NCD services in PMTCT sites.



For screening tools, over 90% of the ART clinics have screening tools with over 70% in the PMTCT sites. However, the glucometer and strips were largely found to be missing in both clinics.



Challenges affecting linkages highlighted during the evaluation included:

Inconsistent supply of NCD medications, leading to patient non-compliance and declining health, some facilities lacked essential screening equipment and often run out of vital commodities like glucometers and strips. There is a need for better training in mental

health identification and management, along with increased funding for psychiatric support and critical tests as well as improving staffing levels at health facilities.

The assessment team collected feedback from the facilities visited, staff reported that integrated mentorship from partners significantly boosted their ability to provide NCD screening and management services and incorporating NCD care in community visits had increased service uptake.

Healthcare workers from various facilities provided insightful feedback on the current state of services. They emphasized the importance of integrated mentorship and the challenges posed by drug shortages and inadequate equipment. Despite these challenges, there was a strong commitment to improve the quality of care provided to patients with HIV and NCDs.

By addressing the identified gaps and building on the successes, the METS Program, in collaboration with MoH, CDC, and other partners, aims to ensure that patients receive comprehensive, high-quality care.

Based on the assessment findings, the following next steps have been proposed:

Enhanced data management at facilities to ensure timely updates of NCD registers and validate data across sources.

MoH to ensure NCD drugs are included in essential medicine lists and address stockout issues for essential testing reagents.

Continued education and mentorship for healthcare providers on NCD management and documentation are essential to build capacity.

Facilities to streamline integrated services through dispensation of NCD drugs with ART refills to improve patient adherence and outcomes.

Digitalizing the health sector through strategic partnerships

The Ministry of Health (MoH), aligning with its Health Information and Digital Health Strategic Plan 2020/21 - 2024/25, is driving the digitalization of health service delivery in Uganda. In collaboration with CDC and METS, the MoH organized a national Electronic Medical Records (EMR) stakeholders meeting to orient stakeholders on the national EMR agenda and transition towards a comprehensive digital health facility package. The meeting included representatives from UgandaEMR, eAFYA, Clinic Master, and other key stakeholders to facilitate knowledge sharing and collaboration. Key actions discussed included expanding the rollout of the EMR and Community Health Information System (eCHIS) and urging development partners to support prioritized health information and digital health investments.



Mr. Paul Mbaka, the Assistant Commissioner, Division of Health Information (DHI) at MoH, highlighted the need to address accountability by for example linking patients' prescriptions to facility stores and called for collaborative efforts to enhance innovation and efficiency. He stressed the importance of supporting system users and emphasized that change management should focus on user experiences to ensure system acceptability and easy of use through good design. He appreciated the meeting as an opportunity for participants to exchange knowledge and collectively work towards a more digital and efficient health system, acknowledging that MoH staff do not have a monopoly on ideas.

To achieve digitalization of the health sector by 2025, strategies include ensuring timely availability and access to quality-assured health data; providing effective statistical, analytical, and data visualization

support at national and sub-national levels; and institutionalizing the use of patient-level digital systems at the point of care through the rollout of EMRs, a client registry, and e-training. By 2025, 60% of public and private health facilities will have the necessary infrastructure for digital health systems, and by 2026, Uganda will have a strengthened environment for digital health initiatives. Additionally, by 2025, the Ministry of Health aims to establish a functional collaborative mechanism to support health information, digital health implementation, research, and innovation.

The introduction of electronic medical records (EMRs) in health facilities aims to improve the quality of health service delivery by providing real-time accountability, transparency, and traceability of medical supplies, monitoring health worker absenteeism, enhancing patient satisfaction through efficient care provision, reducing unnecessary or duplicate diagnostic tests, and offering easy access to management reports for decision-making. Additionally, EMRs will lay the foundation for the implementation of national health insurance.



Jonathan Mpango, the Team Lead Software Development at METS, presenting on the new features in UgandaEMR+

The Ministry of Health requested Partners for technical assistance and resources for implementing digital health information systems, participation in developing standards and guidelines, and monitoring and evaluating these systems. Additionally, they called for support to health facilities, coordination with districts from the Ministry of Local Government (MOLG), provision of electricity from the Ministry of Energy and Mineral Development, ICT policy support from the

UgandaEMR+ Implementation Showcased at Kisenyi HCIV

On 14th May 2023, METS and Reach Out Mbuya (ROM) showcased the implementation of UgandaEMR+ to representatives from the USC and the Ministry of Health (MoH) at Kisenyi HCIV. The visit was aimed at providing a clear understanding of the system's functionality at the health facility, which serves over 1,200 outpatients daily and supports over 1600 clients on ART.

Edson Mugisa, the Kampala Capital City Authority (KCCA) Administrator, highlighted that the system, already operational in the ART department, had significantly streamlined workflows and would soon expand to the outpatient department. He highlighted the need for power backups to prevent data loss during power outages, given the high patient volume.

Dr. Alice Namale, Director METS, emphasized real-time data entry improved data quality and efficiency, reducing reliance on paper records. She encouraged documenting the impact of EMRs,

highlighting the system's potential to redirect resources from printing tools to digital methods.

Kenneth Musenge from CDC praised the committee responsible for implementing the system in selected Kampala sites. He noted that the system's decision supported capabilities improved decision-making and advised users to share continuous feedback for improvement.

Jamil Mpiima, Digital Health Specialist from MoH, spoke on the broader government plan to digitalize health services to improve efficiency for health workers and patient experiences. He mentioned ongoing efforts to integrate multiple information systems, address power backup issues, and enhance ICT skills among health workers. Despite challenges such as limited server capacity and the need for IT officers, the system aims to alleviate administrative burdens, allowing staff more time for clinical practice.



Dr. Akonyera (2nd Right) takes the team through the advantages that have been realised from using the system during the facility tour

Dr. Peter Akonyera, the ART Clinic In Charge shared positive end-user experiences, noting simplified data use and analysis, efficient data retrieval, and the system's popularity among users despite existing challenges. He appreciated METS' support in maintaining system synchronization. The data visualization tools have been particularly useful for clinicians to manage patient schedules and workload distribution effectively, ensuring timely and efficient healthcare delivery.

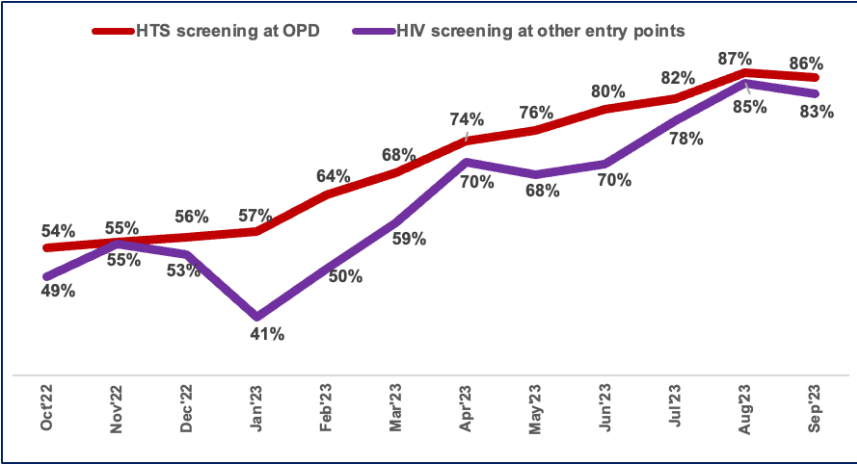
METS Showcases Research at INTEREST 2024 Conference in Benin

The International Conference on HIV Treatment, Pathogenesis, and Prevention Research (INTEREST) was held in Benin from 14th to 17th May 2024. As the premier scientific conference for HIV in Africa, INTEREST brought together global scientists to share cutting-edge knowledge in HIV diagnosis, treatment, and prevention. The conference also aimed to build a community of African physicians and scientists to develop local solutions for managing HIV and preventing its transmission.

METS submitted an abstract titled “Enhancing HIV Case Identification through a National HIV Testing Services (HTS) Continuous Quality Improvement”.

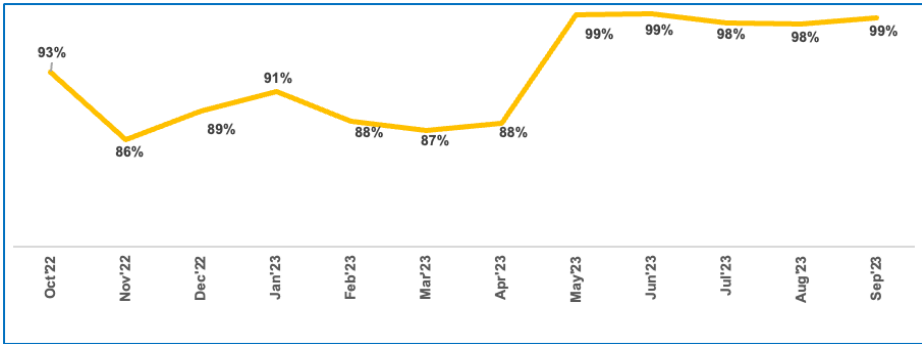
METS has supported the Ministry of Health (MoH) in designing, implementing, and evaluating initiatives to increase the identification of HIV-positive clients, crucial for achieving the global target of 95% of people living with HIV (PLHIV) knowing their status. This collaboration involved setting up testing centers at various points of care, training staff in quality improvement approaches, and establishing HIV screening at all entry points in health facilities across over 700 sites nationwide. These efforts have significantly contributed to 80% of newly enrolled patients on treatment.

HIV Testing Services Screening



Health facilities conduct bi-weekly meetings to review HIV testing data, guiding action and decision-making on client identification and enrolment into care. This continuous quality improvement approach ensures effective HIV case identification and linkage to care, ultimately improving the quality of health services for PLHIV.

HIV Testing Services Screening



The number of HIV tested clients increased from 86% in November 2022 to 99% in September 2023 as a result of increased identification of positive clients.

Gallery

The newly appointed CDC Director, Dr. Adetunke Mary Boyd (7th from left) met with country implementing partner Executive Directors to get insights on ongoing projects, discussed leveraging of partnerships as well as strategizing for how best to strengthen health systems.



Representatives from the Ministry of Health, CDC, USAID, METS, KCCA, Reach Out Mbuya take a group photo after the UgandaEMR+ support supervision at Kisenyi HCIV visit on 14th May 2024.



Group roll out discussions during the EMR Stakeholders meeting held on 16th May 2024

Dr. Godfrey Timbihurira presenting on Data Quality during the CBS guidelines meeting held on 2nd May 2024 at Hotel Africana



Naseef Mayanja guides a team at Kisenyi HCIV during a verification exercise for Intensive Adherence Counselling alongside non suppressed forms in UgandaEMR+ led by Dr. Peter Akonyera (in jacket), the HIV clinic In-Charge.



METS team was part of the delegation at the Kisenyi HC IV facility during a benchmarking visit, by MSH (Madiro) a US-based software development company, on a UgandaEMR+ point of care demo. The system, that uses OpenMRS, is capable of patient queuing, intuitive unique identification, and multiple widgets to allow multi-tasking. The inbuilt queue management functionality increases efficiency, has extensive integrations (registries, DWH, ALIS, VL HIE), has improved patient flags, monitors staff productivity, incorporates KPI's for management decisions and boosts of improved reporting functionality.

Dr. Alice Namale making her remarks during the UgandaEMR+ point of care demonstration at Kisenyi HCIV on 14th May 2024. METS in collaboration with Reach Out Mbuya showcased the system implementation to US Government and Uganda Ministry of Health Officials. The system is currently implemented on two other facilities: Kawala HCIV and Banda HCII



Innocent Musoke explaining how the HTS collaborative has improved case identification during the INTEREST 2024 conference held in Benin in May 2024.

Rose Baryamutuuma (C) takes DIC staff through the Key Populations assessment to determine quality of services provided at the sites in Ishaka district on 16th May 2024.



METS WATCH

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