



Photo by Erik Schouten / MSH

USING PERFORMANCE CHARTS TO ACHIEVE HIV TARGETS

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Background

Achieving targets and improving data use for decision-making in health facilities has been a persistent challenge in Malawi. A baseline study conducted in 2013 by the District Health System Strengthening and Quality Improvement for Service Delivery (DHSS) Project, led by Management Sciences for Health (MSH), established that few facilities used data for decision-making, largely because of poor quality data and limited capacity to analyze and use it. Orientation on the use of data and graphs, supportive supervision, and mentorship sessions achieved little progress.

In 2015 the US President's Emergency Plan for AIDS Relief (PEPFAR) adopted the UNAIDS approach of 90:90:90 targets.¹

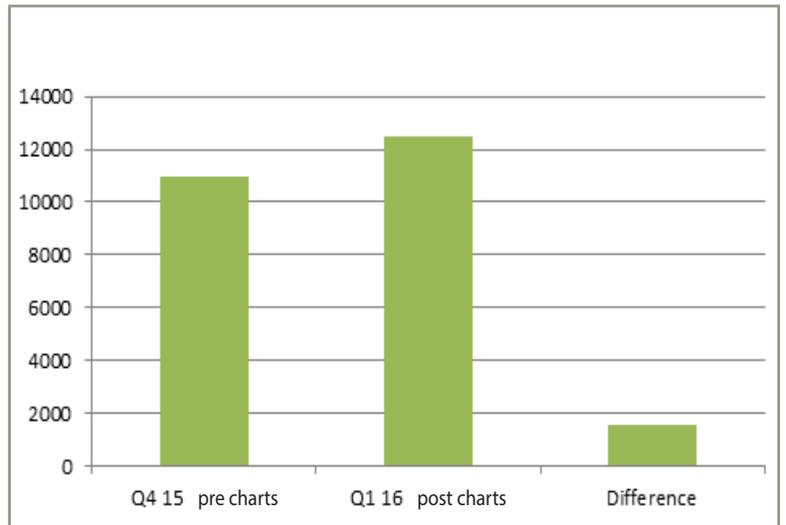
1. UNAIDS in 2015 introduced the HIV program target approach to run from 2015

DHSS also has clear targets on the number of people to be identified as living with HIV. Even with HIV diagnostic assistants (HDAs) in place, facilities struggled with attaining required targets. Since PEPFAR targets for MSH-supported facilities were quite ambitious, innovative ways had to be explored to reach them by the team implementing the Service Delivery and Quality Improvement (SDQI) component of DHSS, which is funded by the US Centers for Disease Control and Prevention under PEPFAR.

In March 2016, SDQI introduced the facility performance chart to track progress towards HIV testing service (HTS) targets

-2020 called the 90:90:90, whereby: 90% of people living with HIV should be identified; 90% of those tested HIV positive should start treatment and retained in care; and 90% of those on ART treatment should have a suppressed viral load.

Figure 1. Chiradzulu District performance before and after the introduction of performance charts



THE DISTRICT HEALTH SYSTEM STRENGTHENING AND QUALITY IMPROVEMENT FOR SERVICE DELIVERY IN MALAWI (DHSS) PROJECT aims to support the Government of Malawi in implementing the National Strategic Plan for HIV and AIDS (NSP) in line with the Country Operational Plan, leverage the President's Emergency Plan for AIDS Relief (PEPFAR) resources, and support implementation of the Health Sector Strategic Plan. The project's goal is to contribute towards a healthy and prosperous nation free from HIV and AIDS through district health system strengthening, focusing on key populations, using targeted evaluation, and providing technical support to the Ministry of Health. The project has two components: the Service Delivery and Quality Improvement (SDQI) Project and the National Evaluation of the Malawi PMTCT Program (NEMAPP).

in 12 priority health facilities in Chiradzulu District. Data for number of clients tested, number testing positive, and how many of the positives were linked to care were recorded on a paper chart each month and compared with the set data target. MSH oriented facility staff – including the HTS coordinator, facility in-charges, and HTS counselors – on use of the charts. Supportive supervision and mentorship followed, focusing on how to compile and record the data. The health facility team prepared the charts, discussed the data, and then displayed the charts in all areas of the facilities where HTS is conducted.

By June 2016 all 12 sites in the district had surpassed their monthly HTS targets at least once. Previously, sites would collect data and just report to the districts without analyzing what the information meant. Since the introduction of the charts, facility staff is able to discuss the data before it is presented to the district health management team and make recommendations about how to improve performance if targets were unmet. These discussions have yielded initiatives such as data usage at the site for decision-making. For example, bimonthly outreach community testing was initiated so that the sites are able to achieve their targets.

"We are now able use our data in quality-improvement activities," said Richard Kamalizeni, antiretroviral therapy focal person for St. Joseph Mission Hospital. "The facility charts have challenged us to do even more, like plot graphs for our facility

performance, which acts like a quick reference in decision-making. Using our data has been easy with these charts, unlike reading reports."

The targets are displayed on the walls of the HTS rooms as a quick reference on site performance. Each month, data was evaluated and staff discussed the reasons for poor or good performance. They then had to come up with strategies and plans for problem solving.

As shown in Figure 1, most of the facilities were able to meet their targets after they began using the charts.

The strides made in Chiradzulu District demonstrate improved data use at the facility level and that using performance charts can go a long way in improving program performance. As a result of the success in Chiradzulu, the initiative has been scaled up in all of the DHSS program areas. All priority sites/facilities have adopted or are in the process of adopting the concept to help improve indicator performance in all seven districts supported by DHSS.

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