

## SUCCESSFUL QI CHANGE, ODESA REGION



**Change:** Decentralizing ART initiation and management from the regional AIDS Center to local ART sites

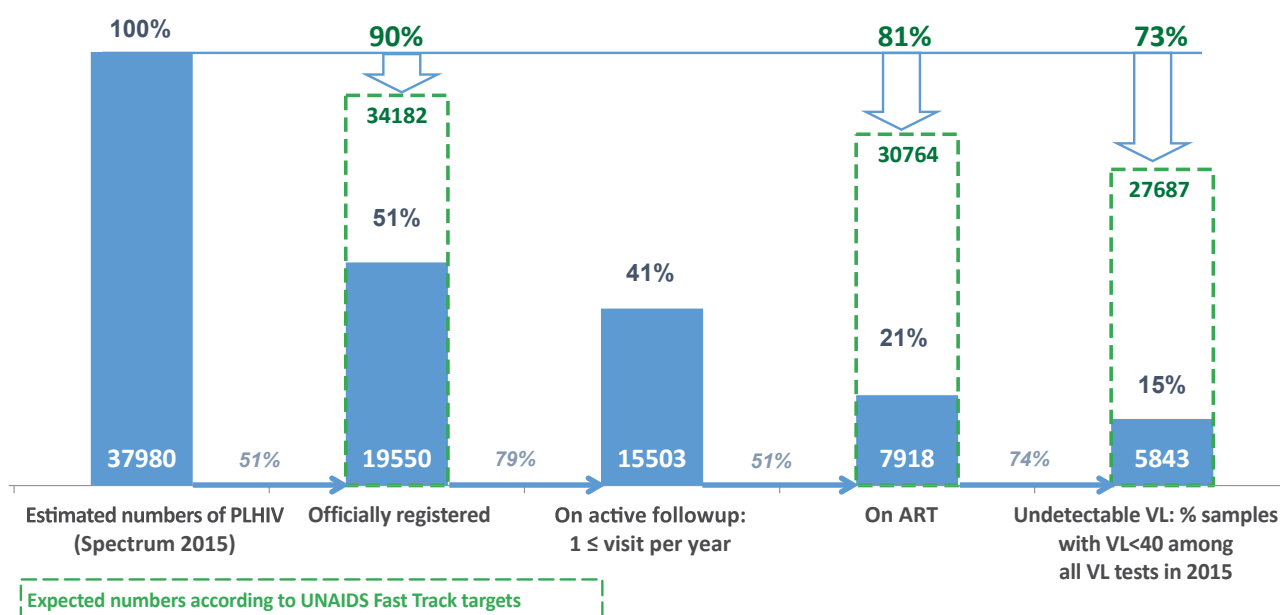
**Gap:** Antiretroviral Treatment

### Problem Statement & Improvement Objectives

According to official estimates, 38,000 people live with HIV in Odessa region. Of them, only 8,000 (21%) were on ART as of January 1, 2016. With support from RESPOND, 41 HIV service delivery

sites (including the Regional AIDS Center, 14 sites of the Odessa City AIDS center, two TB facilities and 24 local ART sites) started a Quality Improvement (QI) effort with an objective to put 1,250 new patients on ART by October 1, 2016.

**Cascade services for PLHIV in Odesa region, as of 01.01.2016**



## System issues and changes tested

The regional QI team identified low accessibility of HIV services to patients living outside of the regional capital as the key reason for low ART uptake by PLHIV already linked to care. Causes of low accessibility of services include: (1) Limited number of the ART sites at the district level; (2) Local ART sites only dispense ARVs, while clients must travel to the regional AIDS Center for ART initiation and management; (3) Limited and inconvenient working hours for patients of the local ART sites as physicians are only available part-time.

To address these challenges, the regional QI team implemented the following changes: (1) Trained infection disease specialists at local ART sites on ART initiation and management; (2) Updated regional and local protocols to allow ART management at all local ART sites; and (3) Worked with chief physicians of central district hospitals to ensure

full-time physician staffing at local ART sites.

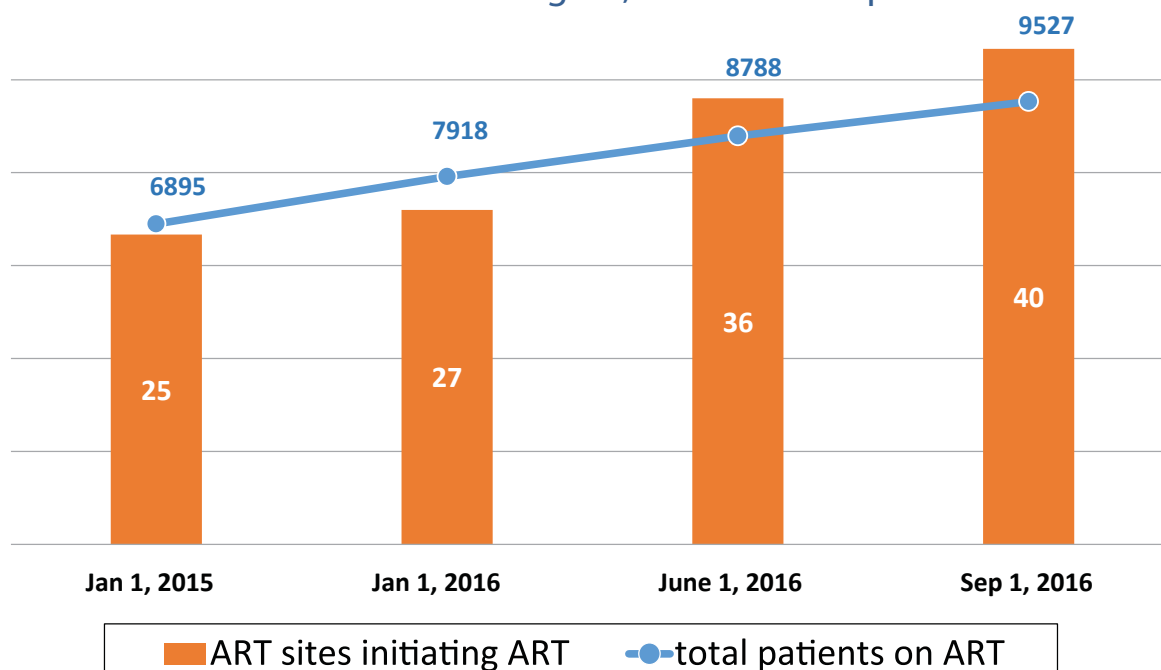
## Scale of the improvement effort

The improvement effort on ART initiation covered 13 ART sites: 12 ART sites across Odesa region, and one ART site in Odesa city. Of these, six sites improved physician staffing, although only three of them ensured full-time physicians on staff.

## Improvement measures and results

The number of ART sites initiating and managing ART clients in Odesa region increased from 27 in January 2016 to 40 in August 2016 (see figure below). The number of PLHIV on ART increased by 16%, from 7,918 to 9,179 from January 1 to October 1, 2016.

Number of ART sites initiating and managing ART, and number of PLHIV on ART in Odesa Region, Jan 2015 – Sep 2016



## Learning & Next Steps

The implemented changes contributed to putting an increased number of new patients on ART as compared to the same period in 2015 and closing the treatment gap in the Odesa region (see graph below). Other factors contributed to the results observed. These include: (1) Changes in the national ART protocol in December 2015 lifting the requirement of CD4<350 for initiation of ART; and (2) Improved ARV supply through PEPFAR and

Global Fund emergency funding procurement as previously the supply of ART was unstable in the region. To further improve access to ART, by the end of 2016, the Odesa region staff plans to open **eight additional ART sites** at the district level and enroll 2,500 new patients on ART between October 1, 2016 and March 1, 2017. The tested changes will be incorporated into the management practices or policies of the newly opened sites.

