

SUCCESSFUL QI CHANGE, KYIV CITY



Change: Increase the network of local ART sites and transfer patients from the AIDS Center

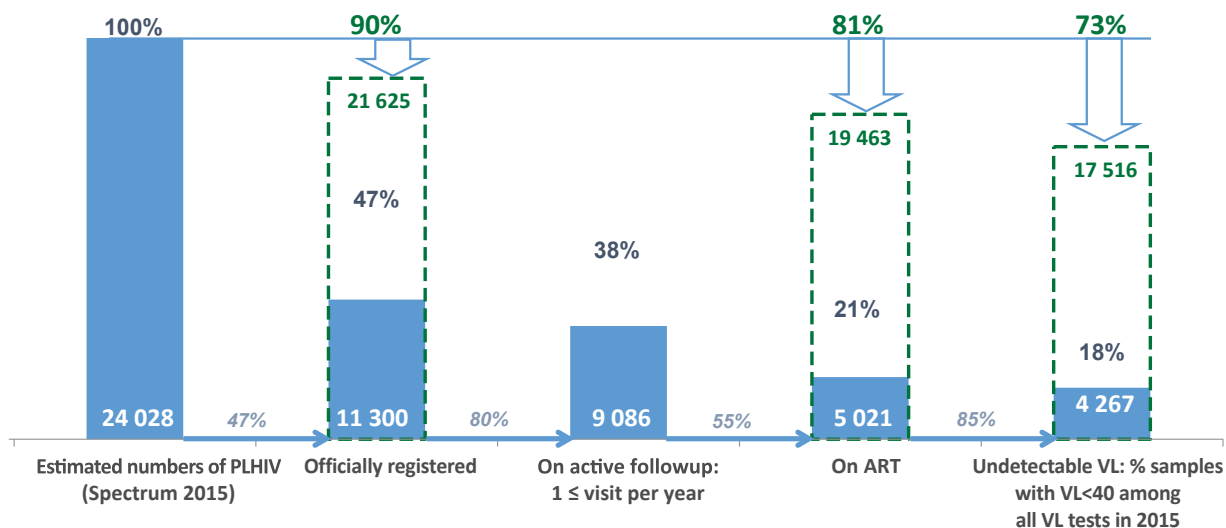
Gap: Antiretroviral treatment

Problem Statement & Improvement Objectives

According to official estimates, there are about 24,000 PLHIV in Kyiv City, of whom only 5,000 (21%) were receiving ART as of January 1, 2016.

With support from RESPOND, four local QI teams comprised of staff at the ART sites, specialist physicians and NGO representatives started a quality improvement effort to increase the number of PLHIV receiving ART to 72% by March 2017.

Cascade services for PLHIV in Kyiv City, as of 01.01.2016





System issues and changes tested

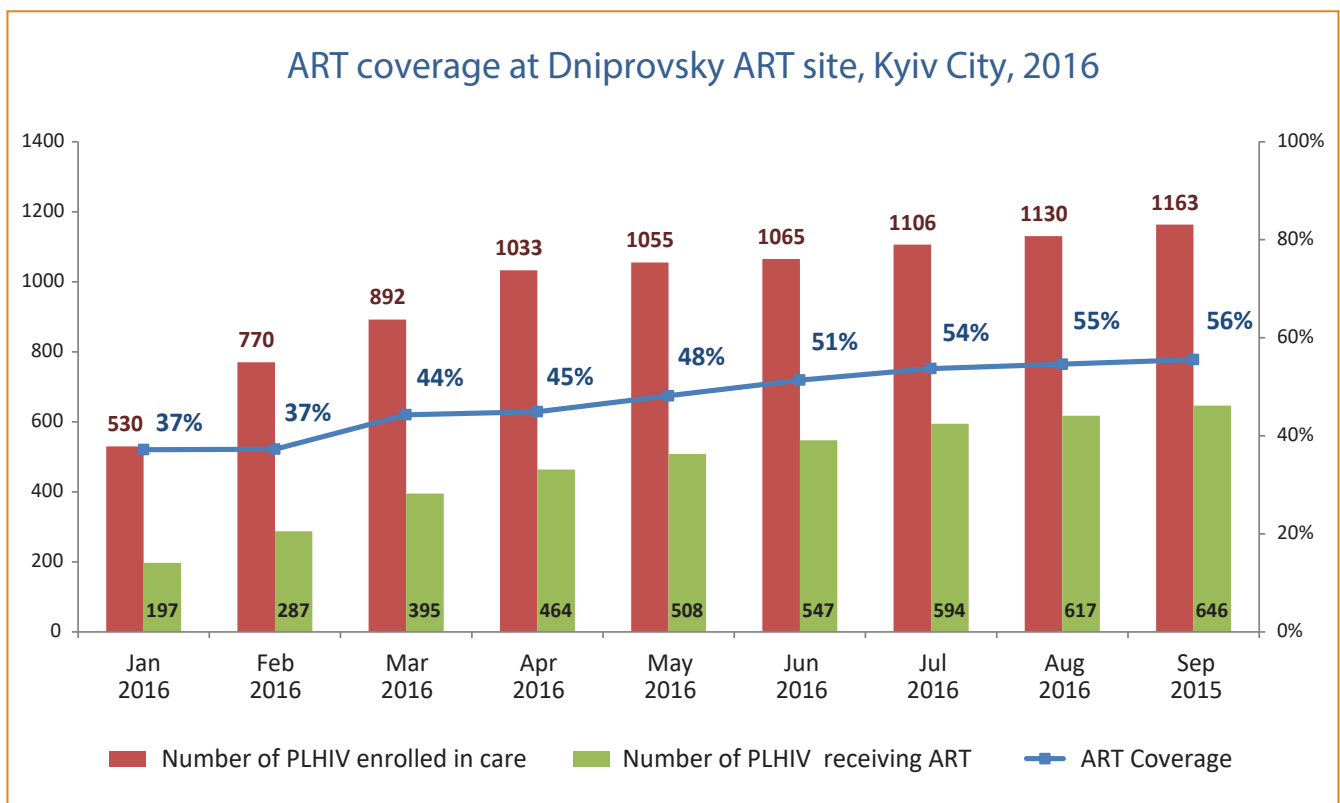
The regional QI team identified the following main reasons for low ART coverage in Kyiv city: (1) Patient-to-physician ratio the highest in the country: over 1,600 PLHIV per ART site physician; (2) High proportion of ART patients per physician; and (3) Concentration of services at the City AIDS Center requiring patients to travel across the city. The City AIDS center with its resources of seven ART site physicians on staff reached its saturation point: long patient lines, short time for patient visit, and deteriorating quality of services. To put more people on ART, as expected under the Kyiv City Fast Track initiative, decentralization of services was required. In January 2016, a new ART site was opened in Dniprovisky district of Kyiv with one full-time physician, two nurses, one medical phycologist and NGO social worker on staff. Consenting patients from the district and nearby areas were transferred from the AIDS Center to the new site, where ART was initiated to those not yet on treatment. The decreased workload on physicians at the AIDS Center also allowed them to initiate treatment to new patients.

Scale of the improvement effort

One new ART site, in addition to the Kyiv City AIDS Center and two other district sites, was the focal point of this change. Transfer of patients to the new sites, however, alleviated the case burden on physicians at the AIDS Center, which also allowed them to put additional patients on ART.

Improvement measures, results and interpretation

The performance of the implementation of the change at the Dniprovisky district site was tracked monthly by the number of PLHIV transferred from the AIDS Center or newly registered, the number and proportion of PLHIV on ART. While doubling the number of patients registered at the site between January and September 2016, the proportion of patients on ART also increased from 37% to 56% (graph below).

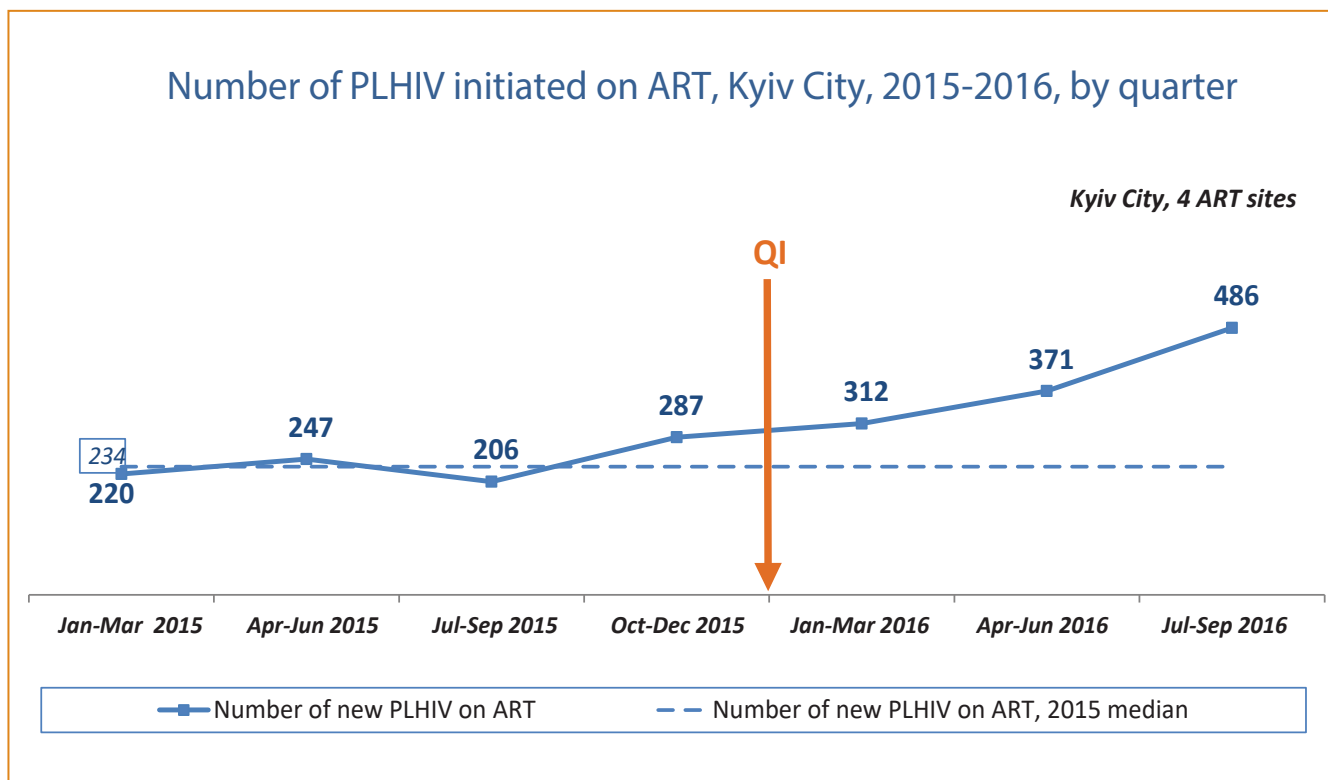




Learning & Next Steps

Almost 40% of new patients initiated on ART in Kyiv city (449 out of 1,169) can be attributed to the newly

opened ART site. Overall, the number of patients initiated on ART in Kyiv city over the past three quarters exceeded the 2015 median demonstrating an improvement over last year (see graph below).



Decentralization of AIDS services in Kyiv City has been long overdue. It will continue in FY17 as part of the Kyiv City Fast Track initiative, either by opening new ART sites, or delegating PLHIV management to district infection

disease specialists, or both. To support this change, in Q1 of FY17, RESPOND will provide training on ART basics to over 50 infection disease specialist in Kyiv City.