



Differentiated service delivery (DSD) in 2020

Responding to the needs of people living with HIV before, during and after 2 COVID-19

Prioritized DSD implementation in Sierra Leone due to COVID-19

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HIV and DSD in Sierra Leone

- In 2017, National HIV/AIDS Control Programme developed DSD guideline; however, it was not implemented due to unforeseen circumstances.
- Ongoing fragmented unofficial DSD implementation in Sierra Leone pre COVID-19 pandemic
- In 2018, commencement of DSD guideline review and standardization
- Due to the COVID-19 pandemic, DSD implementation was fast tracked
- Standard eligibility criteria for all models were modified to reduce clinic attendance



Implementation during COVID-19

Facility DSD models	Community / Group models
All clients + newly Initiated on ART Monthly or 3MMD (depending on clinical assessment) Fast track for continuing Recipients of	 3MMD for all clients Home delivery Support group Drop-in centers for key populations
Care (RoC)	Social distancing should be practiced
Pregnant women on ART 3MMD according to ANC Visit Schedule	
Children ART 3MMD	
TB/HIV Co-infection 2 to 3MMD Synchronized drug refills for ART and TB	



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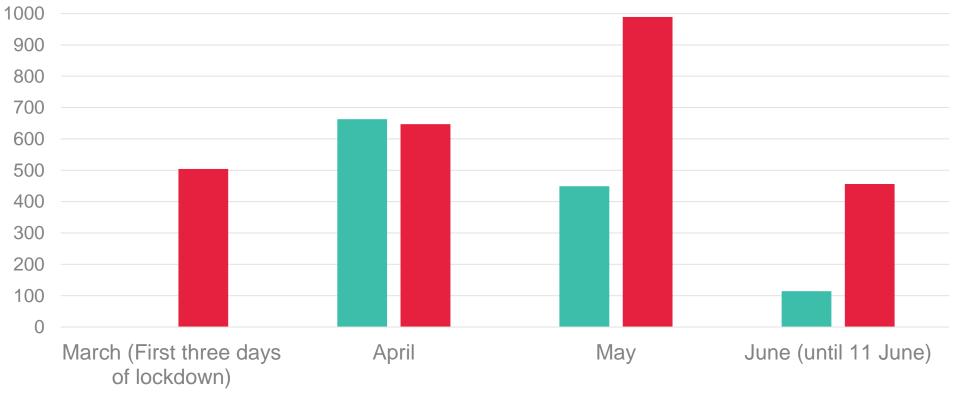
Implementation during COVID-19

Multi-sectoral Collaboration

District Health Management Teams (DHMT)	Implementing Partners (IPs)	Network of HIV Positives in Sierra Leone (NETHIPS)	TB Programme
Integrated community health programmes with DHMT	Technical, logistics and HR support from IPs.	Support group members, expert clients and community health workers (CHW) support home distribution of ARVs.	Integration of HIV/TB services at community level.
Outcome: Provision of ARVs and other routine services such as malaria bed net distribution, nutrition services etc. This reduces stigma while ensuring services are confidential	Outcome: Improved coverage and efficiency of teams Guidelines and SOPs for HIV services during COVID-19 pandemic	Outcome: Increase HR for distribution and improved coverage.	Outcome: Synchronize drug refills (Anti-TB and IPT)

Location of ART refills since COVID-19

Rapid acceleration of community ART refills



Facility Community



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Best practices

- Recording/updating contact numbers for RoC to call for ART refills during lockdown
- Support to COVID-19 national response to ensure that RoC are not neglected
- Community ART distribution with support from partners
- Use of electronic data reporting tools for community ART distribution



Challenges and priority questions

Challenges

- Intermittent stock out of ARVs and IPC Materials
- Human resources for health and logistics for community ART distribution
- Limited data for decision making

Priority questions (HIV & COVID-19)

- Prevalence of HIV and COVID-19 co-morbidities
- Management of COVID-19 confirmed cases in people living with HIV
- Effects of COVID-19 on adherence to ART



Advice to others

- Multi-sectoral collaboration is vital
- Patient-centred and context specific care is important
- Data for action
- Strengthen supply chain to prevent stock outs



