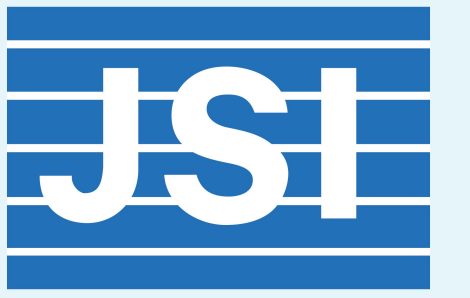


The Utility of the Continuous Quality Improvement Methodology in Identifying and Addressing Gaps in the HIV Care Continuum: the Case of the USAID Strengthening the Care Continuum Project



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Continuous Quality Improvement

In low-prevalence and generalized epidemic contexts, strategically using health facility client entry points is an important policy-driven approach to optimize resources for effective HIV case identification. The USAID Strengthening the Care Continuum (Care Continuum) project, implemented by JSI Research & Training Institute, Inc. (JSI), used continuous quality improvement (CQI) methodology to test a change idea and provide evidence to policy actors that blood banks are effective and feasible entry points for HIV testing and linkage to care in Ghana.

Response

In 2019, the Care Continuum collected retrospective baseline blood donation data from eight hospitals in the Western Region of Ghana, a high HIV-prevalence region. The analysis revealed that about 1% (40 of 3,152) of voluntary donors and over 2% (299 of 11,743) of replacement donors were reactive to HIV. This prevalence was close to the national average of 1.15%.

Potential blood donors were discouraged due to stigma and fear and as such, missed the opportunity to know their HIV status and receive timely treatment. The Care Continuum project used the largest hospital in the region, Effia Nkwanta, to pilot offering HIV testing services to blood donors. Two nurses from the

blood bank were trained in HIV counseling and testing during sample taking from donors. The project also convinced hospital authorities that with effective counseling, HIV-positive donor results could be disclosed without consequence.

Results

During the pilot, nine of the 2,291 people tested were positive and immediately linked to treatment. Between April 2020 and June 2021, 3,634 donors were offered HIV testing services; 11 were positive and were linked to care. As a result, offering HIV testing services to blood donors did not lead to a reduction in donors.

Cascade Data

Timeframe	2019–2020	2020–2021
Tested	2,291	3,634
Positive	9	11
Yield	0.4%	0.3%
Initiated Treatment	9	11
Linkage	100%	100%

Next Steps

- ➔ Harness the findings of this intervention to influence high-level policy engagement.
- ➔ Continue to monitor blood bank testing to inform policy and practice.
- ➔ Scale-up entry-point testing to other blood banks.