

# 9<sup>TH</sup> SOUTH AFRICAN AIDS CONFERENCE

#### **TULANI MAKHATHINI**

13 JUNE 2019











Implementation of Rapid Test Continuous Quality improvement (RTCQI) in Community Based Counselling and Testing in poorly resourced communities of the Eastern ape and Mpumalanga provinces, South Africa.

## **Background**

#### KfW CBCT Grant and SEAD

- Grant awarded to NDoH contracted FPD
  - ✓ FPD Sub contracted NGOs and CBOs
- District Coverage
  - ✓ Support HTS Services in five districts in two Provinces
    - Eastern Cape Chris Hani, Sara Baartman, NMBM and ORT
    - Mpumalanga Nkangala
- SEAD's focus to ensure quality assurance for POCT in these Districts

As POCT increases some concerns have been raised on the quality of testing and this has been compounded by multiple test kits available \_\_\_

## **HIV RAPID TEST PERFORMED IN NON TRADITIONAL SETTINGS**





### **Methods**

#### Study Design

- Cross Sectional Data collected from Baseline and Midterm assessments conducted for 120 testing teams(Testers attached to a specific facility) from 5 Districts
- Mixed methods were used in data collection which included semistructured interviews, record review, checklists and onsite observations
- ❖ Use of well designed and structured SPI-RT Tool (Stepwise Process for Improving Quality of Rapid HIV Testing)
  - Tool approved by WHO to evaluate sites against requirements for quality assurance implementation.
- ❖ Data collected Nov 2017 (Baseline) and July 2018 (Midterm)
  - Data analysis- "SEAD Solutions"



#### **SPI-RT Assessment Tools**

Stepwise Process for Improving the Quality of HIV Rapid Testing (SPI-RT) Checklist

SPI-RT Checklist

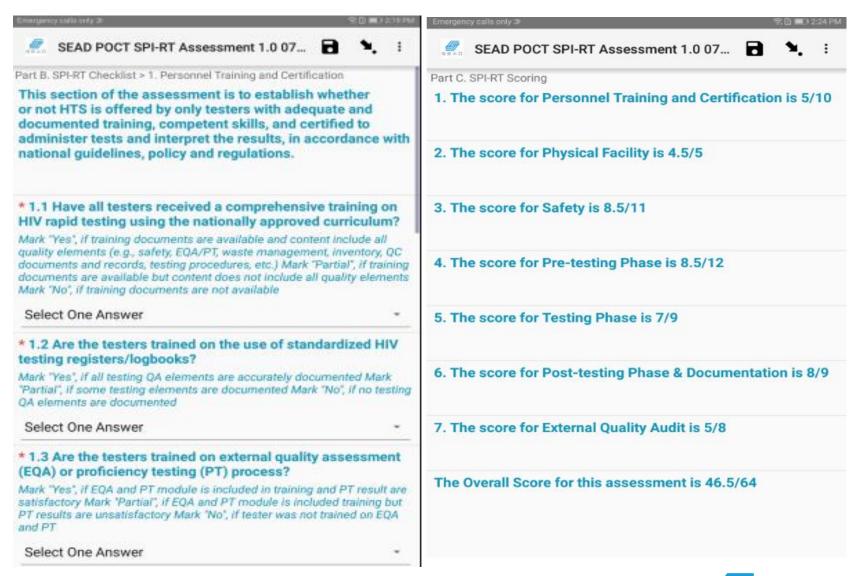
Version 3.0

10/16/2015

Assessment Score Sheet								
Section	Section Name	Total Points						
Section 1	Personnel Training and Certification	10						
Section 2	Physical Facility	5						
Section 3	Safety	11						
Section 4	Pre-Testing Phase	12						
Section 5	Testing Phase	9						
Section 6	Post-Testing Phase and Document and Record	9						
Section 7	External Quality assessment	14						
TOTAL SCOR	70							



#### **SPI-RT Assessment Tools**





# ANALYTICS FOR DECISION MAKING/REPORTING(EXAMPLE FROM BASELINE ASSESSMENT: 1 DISTRICT)

Assessment date	Testing Team	National Grading	Percentage scored	Overall Score	Personnel Training and Certification (10)	Physical Facility (5)	Safety (11)	Pre- testing Phase (12)	Testing Phase (9)	Post-testing Phase & Documentation (9)	External Quality Audit (8)
2018/07/23	Team 1	Level 0	30,47%	19,50	0	3,5	7	5	2	2	0
2018/07/03	Team 2	Level 0	35,94%	23,00	0	4	7	7	3	2	0
2018/07/20	Team 3	Level 0	35,94%	23,00	0	3	6,5	7	2,5	2	2
2018/08/01	Team 4	Level 0	37,50%	24,00	0	4	8	4	2	0	6
2018/07/17	Team 5	Level 0	39,06%	25,00	0,5	4	6,5	7	2	5	0
2018/08/01	Team 6	Level 0	39,84%	25,50	3,5	4	5,5	5	2	5,5	0
2018/07/18	Team 7	Level 0	39,84%	25,50	2	3	6,5	6	1,5	3,5	3
2018/07/16	Team 8	Level 1	40,63%	26,00	0	4	5,5	8	2	3	3,5
2018/07/16	Team 9	Level 1	42,19%	27,00	2,5	4,5	7	7	4	2	0
2018/07/20	Team 10	Level 1	42,19%	27,00	2,5	3,5	7	7	3	4	0
2018/07/03	Team 11	Level 1	43,75%	28,00	5	4	8	4,5	2,5	4	0
2018/07/03	Team 12	Level 1	45,31%	29,00	2,5	5	2	8	5	6,5	0
2018/07/23	Team 13	Level 1	45,31%	29,00	0	4	7,5	10	3,5	4	0
2018/07/17	Team 14	Level 1	46,09%	29,50	0	4	8	7,5	4	3	3
2018/07/11	Team 15	Level 1	46,88%	30,00	0	3	9	8	4	3	3
2018/07/03	Team 16	Level 1	46,88%	30,00	2,5	4	7	9	3	2,5	2
2018/07/09	Team 17	Level 1	48,44%	31,00	0	4	7,5	8	4	4,5	3



# **Findings**

## **Realities of HIV Testing in Community Based Settings**

## Personnel Training and certification

✓ HIV Testing algorithm and testing procedures not understood nor followed correctly

## Testing phase

- ✓ Testers not having timers, incubation period not observed
- ✓ Poor finger prick procedure

## Safety

✓ Waste management not followed correctly

#### Documentation

✓ Poor data management

## Little or no supervision of the teams

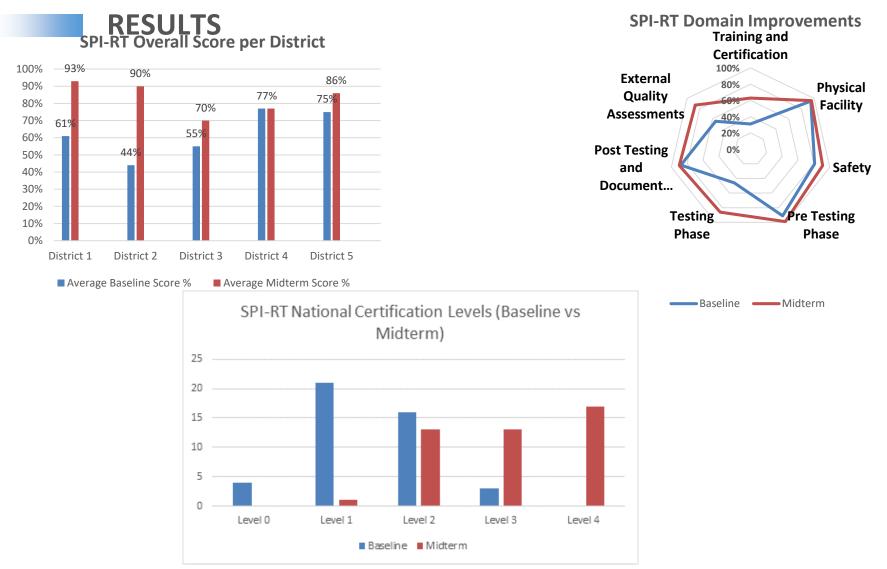
✓ No evident documentation of any onsite support visits



## **Intervention Processes**

- Onsite support visits (sit ins)
  - ✓ Practical demos of the testing procedures (HIV, IQC and PT)
  - ✓ Correct documentation on the HTS registers
  - ✓ RTCQI Training using PC 101 approach
  - ✓ Distribution of testing job aides and guidelines
  - ✓ Development of site specific QIPs for the gaps identified
- Ensure the enrollment and participation of sites on PT (Proficiency Testing) and IQC (Independent Quality Controls) Testing





There was a significant difference in the SPI-RT domain scores for Baseline (M=69.6%, SD=25.3%) and Midterm (M=87.4%, SD=11.7%); t(6)=-2.9, p=0.027. This result suggests that the intervention was effective in improving QA of Rapid HIV testing.



#### **CONCLUSION**

- Common Areas of concern across all testing teams at Baseline Assessments were in the following domains:
  - ✓ Personnel Training and Certification (no training records), Pre Testing and Testing Phase (Test kits stored in uncontrolled temperature environment, Testing algorithm not followed correctly) and External Quality Control (Sites not enrolled on PT and IQC Testing for test kit performance not done)
- Implementation of Interventions should be based on testing site-specific quality improvement plans.
- Focused onsite support visits, coaching, mentoring and onsite trainings should be reinforced to ensure that CBCT Testing Teams operate in line with the set standards.



#### **ACKNOWLEDGEMENTS**

 Foundation for Professional Development (Prime) – Testing Teams and Management

#### SEAD Team

Dr Tim Tucker

Dr Peter Manyike

Amanda Mohlala

Bandile Ndlazi

Carmen Jallow

Anil Kalan

Tozama Tonyela

Lindelwa Mjali

Zamagugu Mkhize

Abegail Makhubedu

- Kheth'impilo CBCT Testing Team and Management
- Humana People to People SA CBCT Testing Team and Management





### Ms. Thulani Makathini SEAD POCT QA Manager

Cell: 0734565271

E-Mail: thulani.makathini@sead.co.za







