

ST. CAMILLUS MISSION HOSPITAL

ART CLINIC

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KCCB-KENYA AIDS RESPONSE PROGRAM (KARP)

ART PROJECT



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YEAR 14 ANNUAL REPORT

January – December 2017.

1. INTRODUCTION

1.1. Program Goal:

Reduce HIV related morbidity and mortality in Nyanza, Western and Rift Valley Provinces through provision of comprehensive high quality services at faith based affiliate sites for the second phase of PEPFAR funding to end in 2022.



Fr. Emilio, Director St. Camillus Karungu is awarded a Trophy for the best site in Pediatric Viral Load Suppression during the Launch of KARP 2 by Dr. Dee Cock, Director CDC Kenya in Kisumu, March 2017.

1.2. Background:

St Camillus Mission Hospital-Karungu, since 2004, has been Sub-awardee of US-Presidential Emergency Program for AIDS Relief (PEPFAR) in the implementation of Kenya AIDS Response Program (KARP) with Kenya Conference of Catholic Bishops (KCCB) as the prime recipient. St Camillus serves a catchment population of 300,000 spanning a radius of 32 km which translates into administrative regions of Nyatike, Suba and Ndhiwa Sub-Counties. As at December, 31 2017, active on ARVs at St. Camillus KARP were 3,061.



Launch of OTZ at St. Camillus Karungu in July 2017.



Obillo Meshack represents St. Camillus Karungu at the KCCB Conference.

2. YEAR 14 OBJECTIVES.

2.1. Objective 1: Increased access to comprehensive HIV prevention services.

- a) Intensified Community mobilisation for HIV Services.
- b) 90% Expanded HIV Counselling and Testing.
- c) Readily Available Post Exposure Prophylaxis (PEP) to HIV Exposed People.
- d) Enhanced PrEP Services to HIV Key Population (KPs).
- e) Above 90% Isinaizide Preventive Therapy(IPT)
- f) Prevention of Mother To Child Transmission (PMTCT)

2.2. Objective 2: High quality HIV treatment, care and support maintained and expanded:

- a) >90% Patient New Enrolment and Initiation.
- b) Above 90% Viral Load (VL)Suppression.
- c) Above 90% Patient Retention to care.
- d) Reduced Mortality Rate below 5%.
- e) 100% Serum CrAg Screening.

2.3. Objective 3: Strengthened health systems and services at faith-based affiliated sites:

- a) Sound Program Leadership and Governance.
- b) Dependable Health Information Management and Sharing.
- c) Sustained Health Commodity Stock Levels at all Times.
- d) Compliance to Donor Fund Management Requirement
- e) Capacity Building of all Program Staff with latest service provision Updates and Guidelines.

2.4. Objective 4: Increased capacity among integrated faith-based networks and district level health systems:

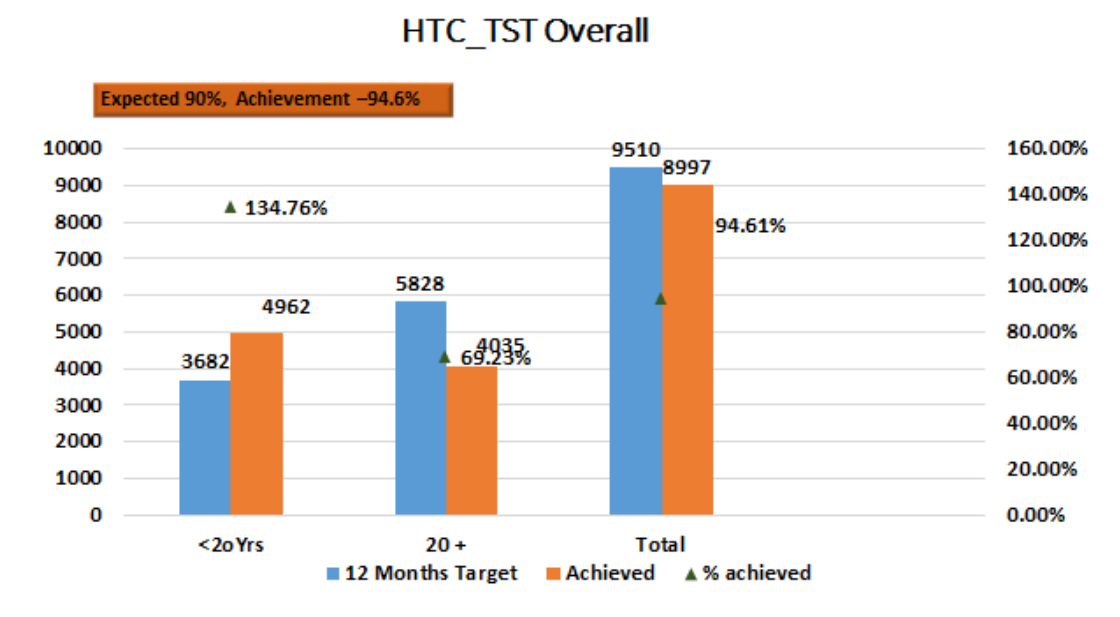
- a) Enhanced Collaboration with the Sub county and County Systems.
- b) Full integration of services within the facility



ART Pharmtech dispenses drugs to a client.

3. PERFORMANCE ANALYSIS.

Compared to the previous year, access to HIV services went up courtesy of new strategies outlined in the NASCOP ART Guideline 2016. Expanded HIV Counseling and Testing at all Points of Service within the facility and Targeted Community Testing achieved 8997 overall. Pediatrics and Adolescents accounted for 55.15% %. A total of 704 patients on care and exposed to TB infection were started on a IPT as a continuing phase over 1039 initiated in 2016. PEP services were offered to 8 people. PrEP which is newly introduced still faces some challenges of stigma though mobilization has been intensified to mitigate the anomalies hence only 14 have so far been enrolled. Under PMTCT, only 2 children turned HIV positive (seroconversion) out of 204 followed within the period under review. The 2 are blamed to late contact/reporting to the facility.



HIV testing performance by age.

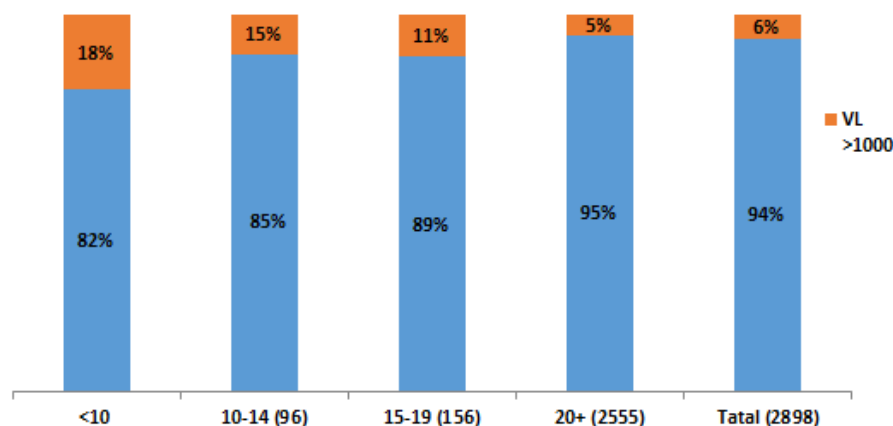


Dr. Erick Omondi (center) Nyatike SCMoH and KEPI Nurse (left) receive fridge Volt Guards donated by KARP Karungu within Coordinator's office.

Among the three 90s WHO Strategic Goals, Care and Treatment addresses initiation to ART and clinical monitoring this is the second 90. Annual program target was set at 24 new enrollments and initiations per month. Out of this, Karungu managed 160. Failure to meet the target is attributed to low positivity within the catchment resulting from intensive HIV prevention activities routinely carried out by this program alongside other partners.

While Viral Load Suppression has performed above expectation at 90% which is a good proof of treatment outcome, Retention to care scored 84% with a mortality of 26 (0.85%). All patients (15) who had a baseline CD4 test bellow 100c/ml had their Serum CrAg done thus 2 positives with Cryptococcus Meningitis were started on Fluconazole treatment.

Third 90: Viral Load Suppression (Per Age)



Viral Load Suppression for the year.



A Triage Nurse, Eunice, attends to a parent with his 2 sons at the ART clinic.



Dr. Cleopa Mailu (far right), Kenyan Health Minister, addressing the press during 2017 KCCB Conference in Mombasa.

Desired program performance depends squarely on her optimal Leadership and Governance as a pillar. Within the year, reporting of program and clinical activities was done to KCCB/KARP by 5th of every month. Government Revenues were paid in time and where the program had financial constraints, the Hospital Administration managed to bail it out under the umbrella of integration. Ministry of Health, NASCOP, Policies and Guidelines were adhered to.

The Ministry through NASCOP and other Government agencies offered Capacity Building opportunities to 14 St. Camillus KARP staff during 9 separate sessions throughout the year. Besides the Government others partners like GIS, MEDS and Impact RDO also trained 7 of program staff in respective components of health care delivery within the period as a sign of good collaboration and synergy.

As part of her mandate, KCCB KARP organized and funded 16 capacity building sessions centrally between January and December 2017 where 21 site staff benefited. Quarterly SCHMT/KARP joint supportive supervisions were conducted within the facility and its affiliate site, Kadem TB. Internally, Continuous Medical Education (CME) befitted all staff as was scheduled in the 2017 annual work plan.

Health commodities were available throughout the year with a stock of 3 months at one time as per the National Policy. Thanks to KEMSA supply chain. On financial management, no questioned costs came up out of monthly liquidation reports to KARP.



ART lead Pharmtech, Melda, carries out monthly stock taking the commodity bulk store.

As an evidence of County and Sub County health levels collaboration, joint supportive supervisions were hosted on quarterly and monthly basis with outcomes shared and corrective measures undertaken. This does not only reassure quality of service but also addresses sustainability concerns beyond donor funding. During the last quarter, a rare community engagement was established between Sub County Kenya Expanded Program for Immunization (KEPI) and HIV Testing Service (HTS) component of the program. This arrangement provided Testing opportunity to families while receiving immunization services at the Community level twice a month. An average of 30 tests was reported done per session. St. Camillus KARP actively participated in co-sponsoring County and Sub County Public Health days like World TB Day, World AIDS Day and World Hand washing Day among others. Besides materials support, Peer support groups were equally given a chance to showcase their treatment experiences and Socioeconomic activities.



Program Data Team at Work.

At National level, S.Camillus ART (KARP) has fairly participated and emerged with exemplary performances in a number of program area evaluations and ranking. During the launch of KCCB KARP 2 and Close of KARP 1 held in Kisumu on May 30, 2017 attended by a number of County and National Officials in Health as well top religious leaders, S.Camillus was awarded two Trophies being the best in Pharmacovigilance Reporting to NASCOP and Pediatric Viral Load Suppression respectively.



Fr. Emilio leads the cake cutting session during the launch of OTZ Club at the facility.

An initiative dubbed Operation Triple Zero (OTZ) is a facility based club geared towards Viral Suppression among the Adolescents on HAART. During December 2017, Kisii-Migori KARP sites held OTZ Camp within Migori town for peer interaction and competition in various Edutainment activities.

Here, St. Camillus OTZ Club was declared number 1 in 4 categories (Drama, Theme Song, Dance and Poem) out of the 6 competed slots. Trophies and Medals attesting to this are well displayed within the office of facility HIV Services Lead (HSL) Coordinator. One Karungu Club member, Victor Otieno, became the Regional KARP Vice President in a hotly contested election deputizing Sheila Ombachi from Christamarion Mission Hospital, Kisii.

St.



Camillus OTZ Club presents a poem at World AIDS Day Ceremony in Karungu.

In a separate forum, out of 3,551 Hospitals in Kenya, St. Camillus Mission Hospital, Karungu was rated second best after Moi Teaching and Referral, Eldoret. This was carried in ***'The Lifesaver'***, a Publication of the Pharmacy and Poisons Board of Kenya, 6th Edition, released in September 2016. Classes of Drugs under evaluation include ARVs, Antibiotics, Anti-TB, Anti-Malarial, Anti-hypertensive and Anti-Cancer. This placed St. Camillus Hospital Karungu on the world map since Kenya is a member of WHO Program for International Drug Monitoring and has been submitting Adverse Drug Reaction (ADR) reports to the Uppsala Monitoring Centre (UMC) since May 4, 2010.



15 year old client, Briton, demonstrates to the ART Adherence Officer, Mr. Killion, how he takes his drugs during Home visit.



The Head of Program Finance, Mr. Audo, at work in his office within ART Clinic.



Sheila, 8 and her mother while visited by ART adherence officer at Home.



80 year old client (left) reassures care providers she has understood well how to take her ARVs as she leaves for home after clinic appointments.

Conclusion:

Containing HIV scourge is a multidisciplinary endeavor within a concerted effort to ensure no new infection is realized come the year 2020. Innovative approaches have not only highlighted care achievements in the past but have further designed future roadmaps that, if well implemented, desired milestones will testify that HIV/AIDS is History. With this. Health care institutions are urged to up their sustainable Systems and Infrastructural preparedness responsibly. As for St. Camillus Karungu, past performance recognitions and assessment outcomes confirm willingness to continue with quality provision of health care to till the Broad Objective is arrived at.

Report Compiled by Obillo Meshack.

Coordinator