

**ST. CAMILLUS M. HOSPITAL
ART CLINIC**

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**KCCB-KENYA AIDS RESPONSE PROGRAM (KARP)
ART PROJECT**



YEAR 19 ANNUAL REPORT

January – December 2022

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.

1.2. Background

St. Camillus M. Hospital, Karungu has lived to the mandate of restoring hope to those living with HIV/AIDS and Prevention of new infections for close to 2 decades now. This distinct testimony is owed to reciprocal partnership with KCCB which is the prime recipient of US -PEPFAR grant for Kenya AIDS Response Program (KARP). Its implementation is anchored to Ministry of Health policies and embraces every step in ensuring set standards are achieved. In spite of patient retention challenges experienced within this Financial Year (FY 19) under, St. Camillus closed with 3472 patients active on treatment.



Wath Onger Primary School Pupils on Field Day at the ART Clinic.

2. Program Objectives.

As specified in the Action Planning and Budgeting, below are the Program's Broad Objectives:

- i) Increased access to comprehensive HIV prevention services,
- ii) High quality HIV treatment, care and support maintained and expanded.
- iii) Strengthened Health Systems at St. Camillus Karungu.
- iv) Increased capacity among integrated faith-based networks and County level health system



AMREF-Kenya on TB Treatment Support Supervision at. St. Camillus

3. Annual Performance Review per Indicator.

Performance Indicators often revolve around identification of the new HIV Positives, enrolling them for treatment and Ensuring their Viral Load is suppressed. A serious drop in the new case Identification (HIV Testing) and subsequent low Positivity rate was registered within the period. This is historical since 2 quarters went without HIV Rapid Test kits for reasons of change of Testing Algorithm as per New HIV Treatment Guideline unveiled in November 2022.

To mitigate the gap, St. Camillus HIV Testing Service (HTS) Providers prioritized target testing for potentiality when kits supply resumed and managed a yield of 74 out of 512 from HIV tests done. Enrollment to treatment which solely depends on the new HIV positives (yield) was achieved at 98%



Clinic Multidisciplinary Team (MDT) conduct Adherence Session to an Adolescent Patient.

Patient treatment outcome is monitored through Viral Load (VL) count in blood cells. This is usually done at 6 months after ARV initiation, then routinely at 12 months if the patient is adhering well. Recommended VL should be < 1000 copies /ml of blood. This exercise did not realize it's target which was set at 95% due to inadequate commodities designed for collection, storage and transportation of blood samples to referral laboratories. However, within the 4th quarter, supplies normalized to aid VL uptake which settled at 47% by end of December 2022. This translated to Suppression rate of 96% averagely.



A youth during clinic appointment.

The fourth and most delicate level in patient management is retaining them to care for closer adherence monitoring. Missing Clinic Appointments normally lead to defaulting in medication. To the worst, some patient opt to suspend their treatment by longer periods till they are considered as Lost to Follow Ups (LTFUs). To contain the situation which had signaled underperformance by mid-year, new measures were engaged. Mitigation strategies included, re-assessing client social history, maximum of 3 clients to be followed by staff per day, community itinerary to be processed a day earlier, home visits done before midday, if found at home, patient should be brought to the clinic immediately and One Data Manager/Pharm tech was specifically assigned to handle Retention matters.

Prevention of Mother to Child Transmission (PMTCT), though a Program Objective, is integrated in the Hospital's MNCH Department for Comprehensive service delivery to the Mother and the Child. Expectant mothers with unknown HIV status undergo scheduled HIV tests as outlined in the ANC procedures.

Those confirmed positive are enrolled for HIV Care and treatment alongside Known Positive (KPs) mothers to benefit from PMTCT services with an aim of not infecting the newborn. A total of 292 mothers were started on PMTCT within the year. On Early Infant Diagnosis (EID) through PCR, only 2 turned positive out of over 100 samples. The two tested HIV positive at separate health facilities and declined care only to later appear at St. Camillus for ANC services.



Children interact on a clinic day.

Under HIV prevention, those who are at the high risk of exposure are enrolled for prophylactic intervention, Pre-Exposure (PrEP). At close of the year, apart from those that had been exited as per the guideline, 37 were still active. St. Camillus equally manage Post Exposure to HIV that may be out of Unsafe Sex (n-6), Occupational (n-8) or any other (n-1) risk areas. Number seen were 15 in 2022.



*Directly Observed Therapy (DOT)
session at a client's residence*



A social worker attends to his patients in the community office.

Tuberculosis (TB) is not only a leading infectious disease among the general population but and HIV comorbidity. St. Camillus pays keen attention to TB Screening, Diagnosis and Treatment hence among the top 3 Hospitals in Migori County. Presumptive (Suspect) Sputum sent for Gene X-Pert diagnosis at the Sub County Laboratory was 336. Out of which 74 (22%) turned positive and were initiated on anti-TBs. To reduce on new TB infection among HIV Known Positives (KPs) 131 were started on 6 month Isoniazide Preventive Therapy (IPT). This achievement is attributed to Involvement of CHVs that aided Case Identification and uninterrupted supply of TB Commodities. TB Cure rate moved from 80% to 100%.



KARP Team, MCH Nurse and Lead Pharm tech on a Data Validation Exercise

Physical, Sexual and Emotional Gender Based Violence (GBV) has a direct correlation with HIV Infection and Adherence to treatment. Screening for GBV is expected on patients at all points of service for possible correctional intervention that includes legal interventions. However, screening for the same has been challenged due to stigma associated with self-reporting especially by male counterparts. 1018 Physical and Emotional cases were detected out of the number screened within the period and necessary steps taken.



*Staff undergo Occupational Safety and Health Training.
Certificates issued for attendance*



Practical demonstration of fire extinguishing during training

The Kenya government's policy for COVID-19, voluntary vaccination is one of the preventive measures. HIV patients being a vulnerable lot, ART Clinic has been mandated to ensure those 12 years and above are vaccinated. Details of the exercise are then updated in the national CHANJO Platform created for monitoring Kenyans accessing the initiative. Out of 3383 aged above 12yrs, 65% have been vaccinated either at St. Camillus or elsewhere and captured. This is an ongoing activity.

For purposes of Planning, the donor requires that all clients are assigned a National Unique Patient Identifier (NUPI). This was rolled out in November 2022 with a one-month deadline. Electronic Management Register (EMR) which is the Ministry of Health's HIV Data Base has the capacity to generate NUPI immediately National Identification Number has been entered at the facility. At the end of reporting period, 92% had been assigned NUPI numbers in the system.



A 72-year-old ART patient with visual impairment

Physical Staff Capacity building resumed though concurrently with the Virtual ones. Those that were conducted focused on Guidelines for ART in Kenya 2022 version, KTB, PrEP in MCH, Continuous Quality Improvement(CQI), Programming and HTS Quarterly updates.

No funding hitch nor erratic drug supplies was encountered throughout the year. This ensured ample planning for patient clinic appointments.



Adolescents demonstrate how they take their drugs during a home visit by CHV and Mentor

KADEM CLINIC REPORT

The year 2022 St. Camillus M. Hospital, Karungu marked her 20th Anniversary in HIV Care. This is way before PEPFAR funding. Since then St. Camillus has partnered with a number of primary health care facilities for purposes of moving services closer to patients and equally Strengthening Health System at such facilities.

Still benefitting from the partnership is Kadem TB and Leprosy Clinic also within Nyatike Sub County. Kadem is managed by Ivrea Sisters Congregation with a Human Resources for Health (HRH) of 17

Since it borders Tanzania to the South, a reasonable portion of their patients come from across the border. Apart from routine health care services, Kadem is known across Western Kenya for TB and Leprosy management. As at end of December 2022, 63 were continuing on TB treatment as 1,429 reported active on ARTs.



Lead clinician at Kadem TB attend to her patient.

Conclusion

As the Program moves to the 3rd phase of implementation, it is time to pursue Acceleration of HIV services towards Transitioning to local Leadership with an aim of sustaining this endeavor meant to restore hope to the needy members of our society.

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