



Mubanga Chimumbwa
Family Health International - FHI360



INTRODUCTION

Zambia National Service GARRISON MIN HOSPITAL, 15 km South of Lusaka Main Post Office along Kafue Road, is one of the sixty (60) Zambia Defense Forces (ZDF) Heath Facilities, catering for both the military personnel and their families and the civilian catchment area with population over **9,000** people:

The facility is also a center for both Universal Routine HIV Testing and Antiretroviral Therapy (ART) services

PROBLEM

As at 30 September 2020, the site had tested **1,363** people in the catchment area population and has close to **3,000** clients on the sites database of whom **2,335** clients per month were in compliance with their treatment regime by 24 February, 2020 when the Client Experience Associate was engaged in March 2020 under the FHI360 funded ZDFPCT project. The 2020 annual target for restarts retention clients was **325** clients and proportional target for the remaining 7 months was **231** restarts

OBJECTIVES

We applied Total Quality Leadership and Accountability (TQLA) management tool to support our targets for the site with the greatest needs to attain significant results in the shortest time-frame of 7 months. We adapted leadership quality skills by fostering an environment of regular targeted feedback using data by:-

- Engagement with all the sites staffs (including the Camp Ward Master),
- Assessing the local situation with its specific developmental challenges
- Identifying key intervention areas, classifying, prioritizing and differentiating them appropriately so as to allocate resource and time management accordingly.

INTERVENTION

My team (Community Based Volunteers and Community Medicine Staffs) regularly held data review meetings with the in-charge and the ward master (to have a daily follow up for those that had dropped out) and brainstormed on solutions to arrive at mutual accountabilities. This TQLA approach was undertaken as follows:

- Identified the lost-to-follow-up (LFTU) files according to the residence of the clients;
- Scheduled meetings with the respective facility leaders to meet clients domiciled in their areas;
- Met the clients and identified their challenges and guided them on the ART adherence expectations;
- Updating clients records and arranged pharmacy pick-ups and/or lab tests as per each individual client's needs;
- Introduction of weekend clinics for clients who can no manage during the week for quality access to ART services.
- Introduction of night shifts for target clients who unable to access treatment during the day.

This performance improved the adherence to the treatment regime leading to improved outcomes

RESULTS

Over the seven months period we undertook the above stated program meticulously and the active client's number went up by 168 from the average **2,335** to **2,660** clients. We achieved **353** restarts for FY 19 against the target of **245** translating in to **103** surplus of the projected target. This translated into an **88%** client restarts recovery rate from March 2020 (as per chart below)

CONCLUSION

By improving the client patient locator contact and proper records maintenance, we managed to achieve significant improvement in the performance of the sites client management target of the Health Centre of close to **3,000** clients

CONTACT

Months	2019_Dec	2019_Nov	2019_Oct	2020_Feb	2020_Jan	
Restarts	2	2	5	3	5	Total
Cumulative	2	4	9	12	17	17

Months	2020_Mar	2020_Apr	2020_May	2020_Jun	2020_July	2020_Aug	2020_Sep	
Restarts	90	89	47	37	20	18	24	Total
Cumulative	90	179	226	263	283	301	325	325

