

ECHO

Enhancing Children's HIV Outcomes



Wits Paediatric HIV Clinics
WPHC
Farai Dube





Comprehensive Paediatric Antiretroviral Care by Primary Healthcare Nurses- a reality

Consider this

- Where are the children?????
- Are we using our nurses effectively in the rollout? *“doctors manage disease and nurses manage care”*.
- Staff burnout due to increasing workload are we getting there?
- Staff shortages what are the issues?
- Healthcare worker motivation, is it a problem?
- HIV care apprenticeship. Knowledge ≠ practice

Background

SA at a glance

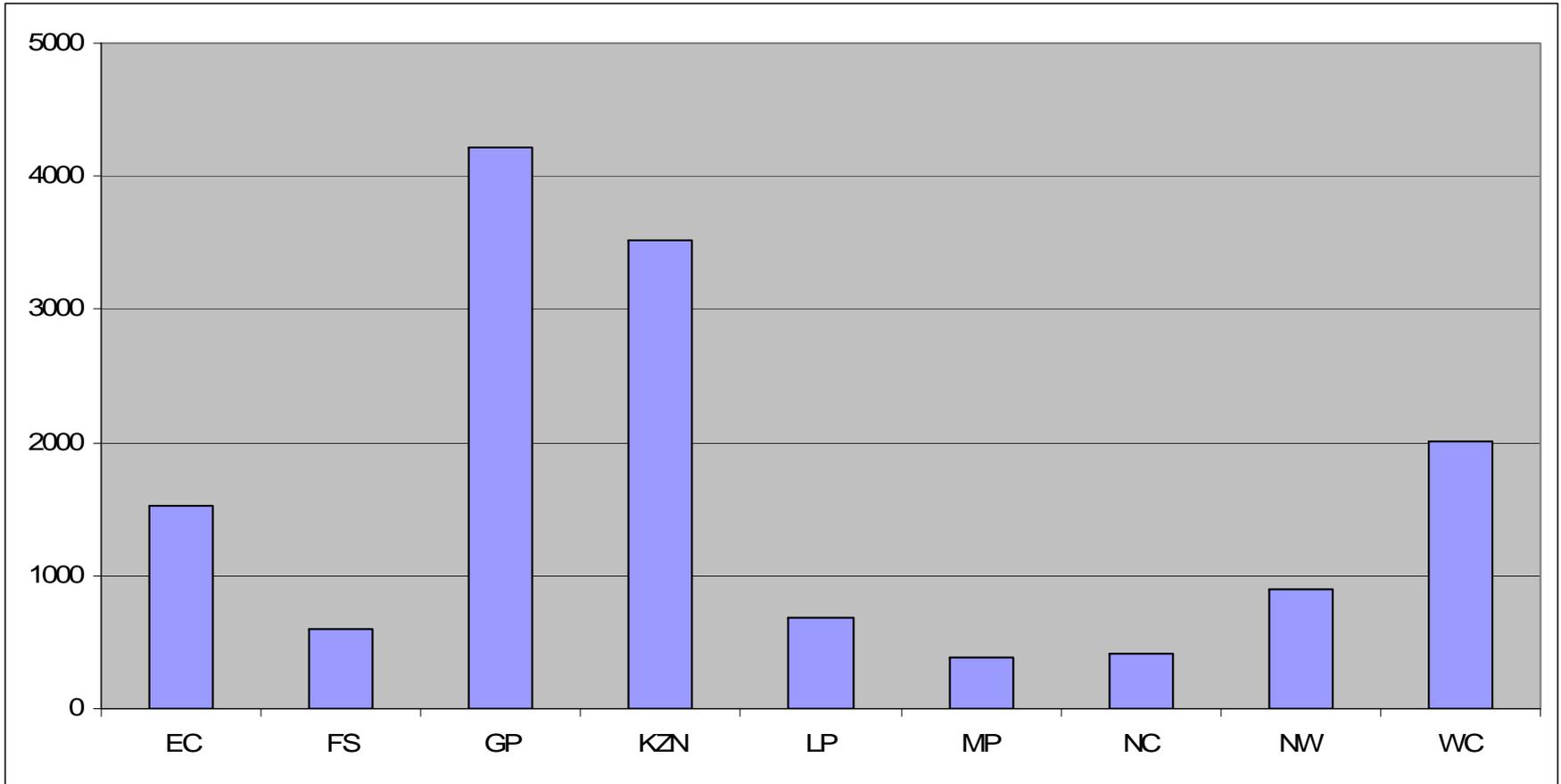


- Mid 2006, 309 000 HIV infected Children
- 40% (123 000) met HAART criteria
- On HAART Mid 2006 (21000)

Gauteng

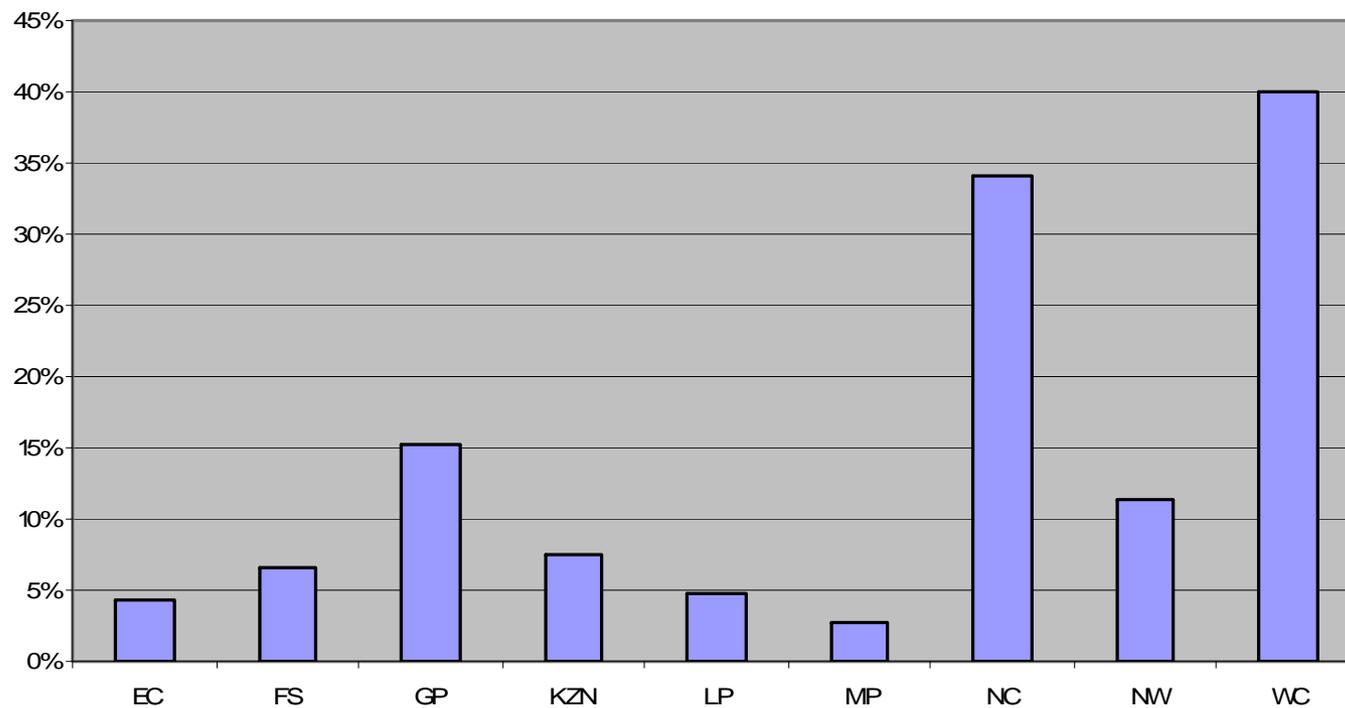
- Early 2006 4000 children on HAART
- 6% (246) in CHC's

Children on ART, March 2006



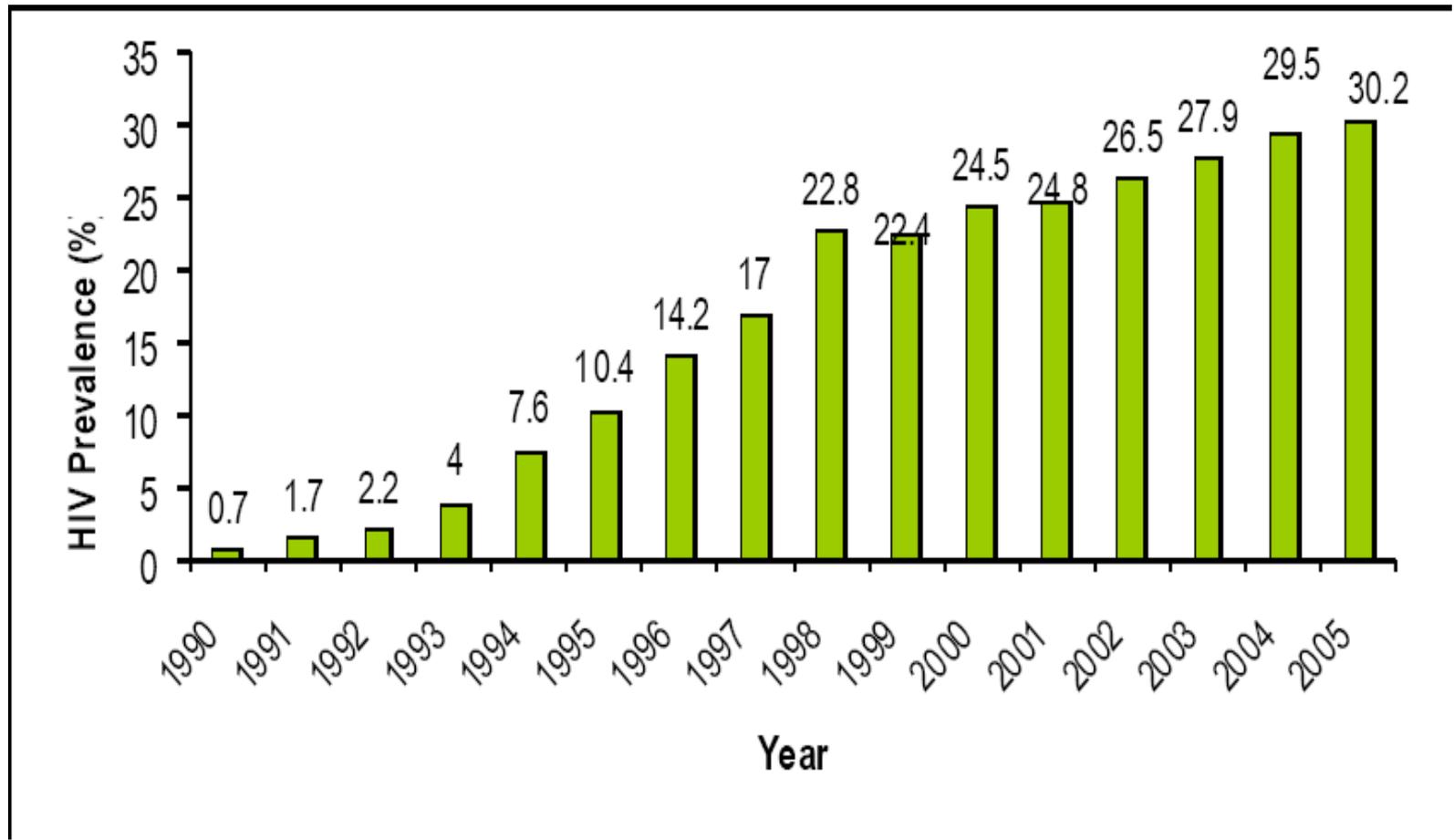
EQUITY???

Rough Estimate of %Children getting ART who need it, 2006





ANC HIV Seroprevalence



Department of Health. National HIV and syphilis antenatal sero-prevalence survey in South Africa 2005.



Method



- ECHO team launched in Sept 2005
- Aims
 - Scale up Paediatric ART services
 - Creation of a Sustainable Paediatric HIV service
 - Improving Quality of Care



MODEL



- Multidisciplinary mobile clinical support Teams
- By end May 2007 8 Nurse clinicians, recruited and trained at Harriet Shezi Clinic and Coronation Hospital
 - Clinical mentoring by doctors and colleagues
 - Case presentations
 - Ward rounds
 - Didactic 2 week RHRU HIV course
 - WPHC training initiatives

Minimum level of competency

- Basic understanding of Paediatric protocols- e.g. Khomanani guidelines
- Identification of adverse events
- Demonstrable confidence
- Ability to refer properly, awareness of own limitations, site capabilities etc.

ASSUMPTIONS

- Trained nurses to train other nurses on site. (difficult for doctors to teach nurses)
- Diagnosis and early initiation of children in the community by nurses
- Rapid replication of program in other sites
- Reduction in the use of highly skilled staff and resources to treat well children on HAART in tertiary centre's.

Results

- Nurse clinicians able to
 - Provide comprehensive Paediatric HIV care confidently and independently
 - Mentor other nurses in 9 Outreach sites
 - Nurses in 4 Outreach sites CHC clinics have started managing children on HAART with some support. **And of the 4, one in Zola and one in Discoverers one in Hillbrow clinics actually see children whilst the doctors see the adults.**
- Increased Job Satisfaction
- Better Utilization of Skills and knowledge
- Some decentralization of Care using Nurses

Challenges

- Service provision VS training and Systems Improvement work
- Attracting and retaining suitably qualified Primary Healthcare Nurses remains a problem
- Perception of specialized paediatric HIV nurses by other healthcare professionals
- Site staff not available to be trained
 - No PHC trained nurses in the site
- Legislation, scope of practice etc
- Lack of nationally standardized training in Paediatric ART



conclusion



- With adequate support and training PHC nurses can prepare, initiate and manage children on HAART.
- It is about the survival of children



Acknowledgements



Dr Tammy Meyers

Dr Ashraf Coovadia

Prof Gayle Sherman

Dr Harry Moultrie

Gauteng Department of Health

Wits Paediatric HIV Clinics