# THE LINK - NEPAL

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Special Issue on

Monitoring for Motivation, Mobilization, **Maintaining Progress, and Quality** 

# LINKAGES Project's Planning, Monitoring, and Ensuring the Quality of **Key Population Programming**

Globally, HIV programs are striving to achieve 90-90-90 goals by 2020 and 95-95-95 goals to end AIDS as a public health threat by 2030. Key populations (KPs) including men who have sex with men (MSM), people who inject drugs (PWID), sex workers, and transgender people should be at the center of HIV prevention, treatment, care, and support programs to achieve these goals. Collection and use of data for evidence-informed planning is pivotal to allocating and mobilizing resources for the most effective response.

Activities of the LINKAGES project—funded by the United States Agency for International Development (USAID) and the United States President's Emergency Plan for AIDS Relief (PEPFAR) and led by FHI 360—enhance the HIV prevention and care cascade by increasing reach for KPs, promoting routine HIV testing and counseling, and actively enrolling those with HIV into care and support interventions that enable them to remain in care. The project helps countries use and scale up evidence-based approaches to service provision. LINKAGES strategy is primarily focused on KP programming that includes planning, implementation, outreach, and HIV testing, treatment, and care services. Planning includes size estimation of hot spots for each KP; implementation involves interpretation of the prevention and clinical data and identification of the way forward; and outreach and clinical services put data to use at the local level.

LINKAGES has developed a variety of tools and guidelines to plan, monitor, and ensure the quality of KP programming such as the PEPFAR Monitoring, Evaluation, and Reporting (MER 2.0) Indicator Reference Guide and Monitoring Guide and Toolkit for Key Population HIV

Prevention, Care, and Treatment Programs. The Safety and Security Toolkit: Strengthening the Implementation of HIV Programs for and with Key Populations helps implementers address safety and security challenges.



Figure 1. Guiding documents of LINKAGES

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Monitoring and evaluation are crucial to the HIV response in Nepal. Evidence gathered is used for program planning and implementation processes to improve relevance and effectiveness. LINKAGES Nepal has integrated planning and monitoring, and uses data management, analysis, and visualization to ensure program quality. The project ensures that data gathered are valid, reliable, accurate, precise, and timely. The following strategies and activities are used at the project and national levels.

### **Programmatic Mapping through Rapid Community Assessment**

As an initial part of the microplanning process, LINKAGES Nepal conducts programmatic mapping and rapid community assessments in its districts every year in collaboration with Jagriti Mahila Maha Sangh (JMMS) for female sex workers (FSWs) and Federation of Sexual and Gender Minorities Nepal (FSGMN) for MSM, male sex workers (MSWs), and transgender people to estimate the size of KPs in the district and to identify new locations/hot spots/cruising sites. Outreach staff validate and update hot spots every quarter. The number of outreach staff to be mobilized is based on size mapping. Information is collected on types of sex workers such as street-based, establishment-based, or home-based, and on KPs who are active in virtual/online platforms. Peak months, days, and times are identified for effective planning of outreach sessions, providing services as per the need of KP groups, reaching unreached populations, and for clinical

services. The findings are used for hot spot level planning, implementation, monitoring, and tracking HIV prevention, care, support, and treatment services. The assessments also provide information on changes in the typology of KPs that has helped with revision of mobilization of community-based staff.

"Rapid community assessment is a very helpful tool for us. It guides us where we have to go and whom we should reach to contribute to 95-95-95."

Sushma Pandey, Community-Based Supporter,
 Child and Women Empowerment Society

# MeroData: Real-Time Data Collection, Review, and Monitoring System

Tracking of individuals across the continuum of prevention, care, and treatment (CoPCT) services and having real-time data is essential for program monitoring and ensuring program quality. Thus, LINKAGES Nepal customized the District Health Information System (DHIS)2 and named it "MeroData" (My Data) for online and real-time data collection, review, and tracking to allow for continuous monitoring and improvement of program outcomes.

Implementing partner (IP) agencies record information from prevention outreach in the community by providing a unique identification code (UIC) to each KP individual for tracking across the CoPCT services. MeroData has enabled LINKAGES Nepal to monitor daily progress at national, province, district, IP, and hot spot levels and to analyze and use real-time data to adaptively manage, focus, and optimize efforts to increase HIV case finding, early enrollment in treatment, and viral load testing. MeroData has also changed the monitoring dimension from "top to bottom" to "bottom to top" in the decision-making process.



"MeroData has made our work easier. Since this is an online system, it is easy to work from anywhere but there should be access to the Internet. By entering data in a single system, we can analyze all the indicators required [to observe the progress of work], we can also individually track community-based supporter (CBS) work based on the target and plan for which area we need to focus on."

Mallika Shrestha,
 Management Information
 System (MIS) Officer, STEP Nepal



# Monitoring of the Project and Implementing Partner Agencies to Ensure Quality

Monitoring of program activities, performance, and achievement at IP and project levels is a regular practice of LINKAGES Nepal. All IPs' key staff prepare a monthly monitoring plan for program activities at the grass-roots level. Monthly achievements are analyzed using standard tools: progress tracking sheet and review meeting template. CoPCT cascade is used to monitor achievement, progress, gaps, and challenges during meetings. Planned group discussions are held quarterly with KPs and people living with HIV (PLHIV) to get feedback on programs, identify key barriers, and plan the way forward.

LINKAGES Nepal's monitoring strategies also include a standard monthly dashboard performance and monthly program technical meetings on progress at the national level and at each district level. Special meetings and discussions are held based on importance and urgency of issues. A quality assurance/quality improvement (QA/QI) checklist for all services—prevention, testing, care, support, and monitoring and evaluation system—is used while conducting on-site supportive supervision, coaching, mentoring, and monitoring of program activities. Based on findings from the field visit, an issuesand-action-point matrix is prepared for follow up during future visits.



# Compliance Monitoring of Protecting Life in Global Health Assistance

Compliance with Protecting Life in Global Health Assistance (PLGHA) is a requirement for any agency outside the United States receiving global health assistance from the United States government. The policy restricts performing and/or actively promoting abortion as a method of family planning. LINKAGES Nepal is complying with PLGHA and monitors IPs using a standard checklist bimonthly.



#### Percentage of reach, test, case finding & Tx enrollment targets achieved in FY18



# **Environmental Mitigation and Monitoring Plan**

Environmental Mitigation and Monitoring Plan (EMMP), a requirement for USAID-funded projects, is a plan to minimize environmental hazards while implementing program activities and provides a framework for compliance reporting. Through EMMP, the program ensures that whatever is produced during program implementation, should not harm the environment. LINKAGES Nepal strictly follows this plan and monitors IPs using a standard checklist semiannually.

# **Service Quality Monitoring System via Short Message Service**

The service quality monitoring system via short message service (SMS²), or LINK, is an electronic feedback and monitoring tool to support QI. It monitors facility-based KP-related stigma, discrimination, and overall client satisfaction with health services on a continuous basis. LINKAGES Nepal project is currently implementing SMS² in seven LINKAGES districts to (1) monitor KP members' experience of stigma and discrimination at health facilities, and (2) maintain a feedback loop between KPs and service providers with actionable data. The findings have been helpful for service quality improvement.

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**LINK GO** 

### **Ensuring Data Quality**

LINKAGES Nepal has set commitments for monitoring program activities at the IP level to ensure data quality. Trained cadres are deployed for data collection, compilation, and aggregation for reporting. Using standard recording and reporting guidelines, regular planned and organized review processes are done by assigned monitoring and evaluation staff.



Data verification and data quality assessment (DQA), which are central to ensuring data quality, are an integral part of monitoring. The project has a mandatory provision for conducting semiannual DQA at each IP. The standard tool has six dimensions:

(1) management and administration of monitoring and evaluation, (2) data validity and reliability, (3) data integrity, (4) information system integrity, (5) accuracy, and (6) data use and feedback system.

Monthly reports are verified at different levels using the data quality control features of MeroData before submitting reports to the next level for approval. A two-way feedback mechanism is vital to ensuring data quality. This standard practice has supported IPs to maintain high quality data over the years.

# Data Analysis, Visualization, and Use

Data analysis is a regular practice of LINKAGES Nepal at the IP and country office levels. Data are analyzed weekly and monthly at the partner level to identify good practices/successes and issues/challenges to determine ways for improvement. Mobilization of outreach staff and choice of mobile clinic venue are derived from mapping and cascade analysis of each hot spot area. Hot spot and service data are also analyzed by a specialized unit at the country office to provide strategic guidance and support for IPs. Monthly progress and up-to-date achievement are tracked at the country level using district CoPCT cascade. New initiatives are tracked weekly and fortnightly according to the progress. Similarly, microplanning tools such as coverage maps and mobility maps are used to review, analyze, and plan outreach activities.

# Data are used for various purposes by LINKAGES Nepal such as: Program management

- a) Budget allocation to IPs
- b) Human resource planning: outreach, clinical, and program management staff
- c) Request for additional funds for implementation

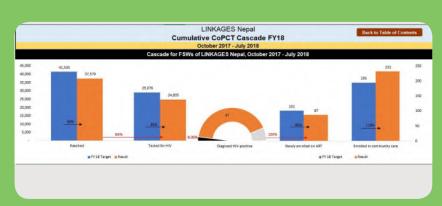
#### **Program implementation**

- a) Activity planning (frequency, geographical location); depends on efficiency and need by KPs
- b) Re-budgeting based on key lessons learned

#### **Program monitoring**

- a) Hot spot, KP, outreach staff, district through dashboard
- b) Monthly analysis of achievements against targets
- c) Documentation of good practices, success stories, learning, and adapting





# **Data Safety and Security**

Safeguarding data that may disclose an individual beneficiary's identity and/or information is critical in the KP and PLHIV context, as data leakage may put individuals at risk. For this reason, all LINKAGES' country teams and subpartners have safety and security mechanisms to ensure proper and sufficient monitoring and controlled access of their data. IPs ensure minimum requirements in four areas: (1) paper records, (2) electronic data systems, (3) data sharing and destruction procedures, and (4) staff

training/management. LINKAGES staff provide technical support and follow-up on these items during site visits. LINKAGES Nepal administered a data safety and security checklist for 24 IPs for the first time in December 2018 to review and assess whether minimum requirements listed in their subagreements were in place, and to provide technical support for addressing any needs and gaps. The process will be continued semiannually along with DQA.

### **Finance and Administrative Review**

LINKAGES Nepal is holding financial review to ensure the proper administration and financial system of IPs. The reviews are held every four months by program unit using a standard checklist. Similarly, an annual review is conducted by contracts management staff using a standard checklist. Recommendations from the review are shared with the organization, and support is provided as needed.



# LINKAGES NEPAL ENSURING QUALITY AT THE NATIONAL LEVEL

Monitoring for Motivation, Mobilization, Maintaining Progress, and Quality.

# **GUIDING DOCUMENTS**











# SUPPORT AT **NATIONAL LEVEL**



Develop Guidelines and Strategies



Participation in National Strategic Information Technical Working Group (SI-TWG) Meeting and Workshop



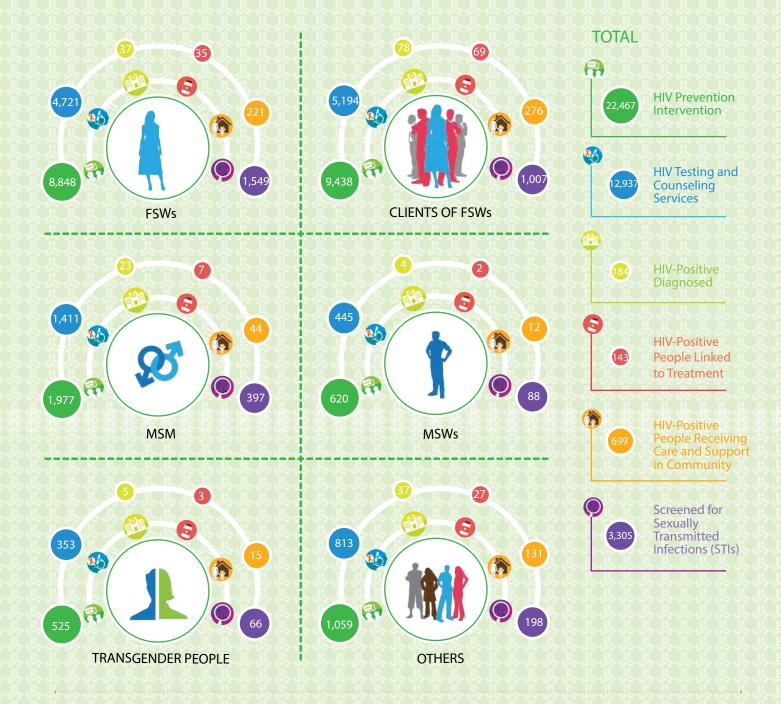
National KPs, PLHIV Size Estimation, and Integrated Biological and Behavioral Surveillance (IBBS) Surveys

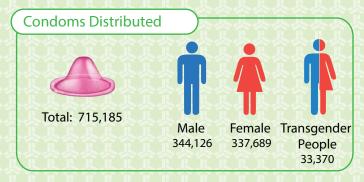


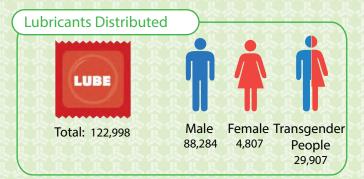
Organize Capacity Building Workshops and Trainings



# LINKAGES NEPAL PROJECT ACHIEVEMENTS, OCTOBER-DECEMBER 2018







### Important Activities and Events (October-December 2018)

• LINKAGES Nepal participated in the World AIDS Day (WAD) 2018 main event in Kathmandu. The chief guest was Honorable Deputy Prime Minister and Minister for Health and Population. The event was attended by directors of all the departments, divisions, and centers of Ministry of Health and Population (MOHP), and representatives from government, nongovernment organizations (NGOs), bilateral agencies, community-based organizations, civil societies, networks, and media. Several other programs including HIV testing were organized at the district level by LINKAGES Nepal IPs in coordination with local groups. LINKAGES Nepal also conducted a continuing medical education (CME) session for the medical and nursing staff of National Academy of Medical Sciences, Bir Hospital, one of the largest tertiary care hospitals in the country.





 LINKAGES Nepal launched the online risk assessment and appointment booking tool, "MeroSathi" (My Friend), www.merosathi.net, during World AIDS Day 2018 main event in Kathmandu, announced by Mr. Upendra Yadav, Deputy Prime Minister and Minister for Health and Population.



 LINKAGES Nepal IPs conducted a social media campaign during Dashain, Tihar, and Chhath festivals to promote HIV testing and MeroSathi, an online risk assessment and appointment booking tool.



- LINKAGES Nepal completed rapid community assessments (RCAs) in all project districts among FSWs, MSM, MSWs, and transgender people for the year 2019.
- LINKAGES Nepal IPs, in collaboration with government and NGOs, national networks of KPs and PLHIV and their community-based organizations (CBOs), and other stakeholders, celebrated the 24th National Condom Day October 27, 2018, with the slogan "Universal Access to Condoms for Dual Protection."



 Conducted a three-day training on community-led HIV testing in Kathmandu for 44 community-based supporters and 17 peer navigators (PNs) to teach them how to conduct an HIV screening test using a rapid diagnostic test kit. • Conducted a two-day training for 17 PNs on engaging and retaining PLHIV in treatment, care, and support.



LINKAGES Nepal, in collaboration with the National Centre for AIDS and STD Control (NCASC) and National Public Health Laboratory (NPHL), started implementation of a PrEP demonstration study to explore the feasibility, uptake, and acceptability of PrEP among FSWs, MSM, MSWs, and transgender women in Lalitpur district. Enrollment for PrEP will be continued for 90 days, from November 30, 2018, and/or enrolling up to 100 individuals. The study has been approved by FHI 360's Protection of Human Subjects Committee (PHSC), Nepal Health Research Council (NHRC), and Department of Drug Administration (DDA).

# **Visitors Log**

LINKAGES Nepal IPs in Banke, Chitwan, Lalitpur, and Makawanpur districts organized monitoring visits from the representatives of local governments and district public health offices to their respective sites. The team observed static and mobile clinic set-up and services and processes including logistics management, recording, and reporting; and interacted with project staff. The team also discussed the importance of coordination with local government bodies and reporting work plan activities to them.



Dr. Tara Nath Pokhrel, Director for NCASC, visited Association of Medical Doctors of Asia (AMDA) Nepal Birtamod static site, observed the clinic, and interacted with Sahara Nepal and AMDA Nepal staff members. The main topics were recording and reporting system and tools, HIV case finding, antiretroviral therapy (ART) enrollment, and viral load testing. Dr. Pokhrel expressed appreciation for the overall program and suggested focusing on case finding and index testing to achieve 95-95-95 targets.



#### **Editorial Team**

Bhagawan Shrestha, Project Director, LINKAGES Nepal Project
Pradeep Kumar Thakur, Senior Technical Advisor, Strategic Information, LINKAGES Project
Kiran Bam, Senior SBC Specialist, LINKAGES Nepal Project
Suzanne Fischer, Associate Director, Knowledge Management, LINKAGES Project
Stevie Daniels, Editor, Research Utilization, LINKAGES Project

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#### For further information, contact: