

BACKGROUND

- The Uganda Ministry of Health consolidated guidelines for the prevention and treatment of HIV & AIDS states that all HIV exposed infants (HEIs) should be tested periodically during and after the end of breastfeeding to ascertain their final HIV status.
- In 12 Health facilities in Fort Portal region, there was a gap – only 58 % of HEIs had a documented outcome at 18 months by December 2020.

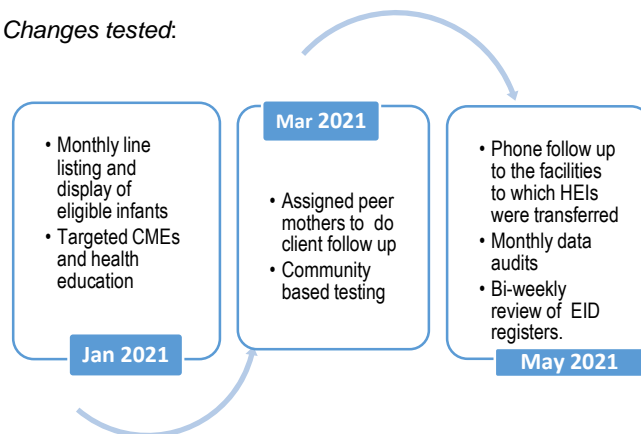
METHODS

- Baylor Uganda supported work improvement teams at the mother-baby care points to identify gaps and test changes which they monitored monthly.

Gaps:

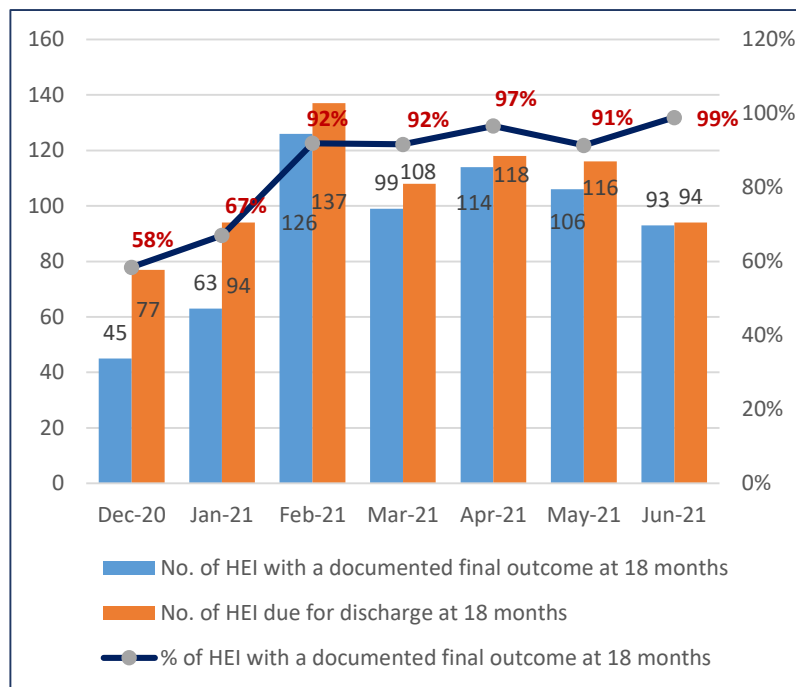
- No mechanism in place to track HEIs due for a rapid test; knowledge gap among some health workers and caregivers on the EID cascade; clients missing appointments or getting lost; mothers self-transferring with their babies to other facilities; poor documentation in the EID data tools like the register.

Changes tested:



RESULTS

Figure 1: Documented outcomes among HIV exposed infants in 12 health facilities in Fort Portal region (December 2020 – June 2021)



DISCUSSION

Despite the numerous challenges presented by COVID-19 for health facility teams in providing health service delivery, innovative strategies implemented through a QI approach like community based testing and involvement of peer mothers in the follow up processes among others, helped to reach more infants and consequently improved documented outcomes among HEIs.

CONCLUSION

Interventions that ensure optimal testing of HEIs during and after end of breastfeeding are critical in reduction of the risk of infant mortality due to HIV.

LESSONS LEARNT

- Community based testing and engagement of peer mothers helped to reach more infants for rapid HIV testing.
- Monthly data audits and tools review improved documentation of outcomes for HEIs through timely identification and addressing of gaps.

ADDITIONAL KEY INFORMATION

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