

The Elizabeth Glaser Pediatric AIDS Foundation's

Global Delivering Technical Assistance 2 (DELTA2) Project







Elizabeth Glaser Pediatric AIDS Foundation Fighting for an AIDS-free generation

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The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) is a recognized leader in the global effort to eliminate pediatric AIDS and one of the most successful international implementation organizations for pediatric, adolescent, youth, and adult HIV prevention, care, and treatment programs. Through support from the U.S. government, as well as private and multilateral donors, EGPAF employs a comprehensive and sustainable approach to achieving the elimination of pediatric HIV, working at multiple levels of the healthcare system to meet the needs of women, children, adolescents, and families living with or affected by HIV. EGPAF currently provides TA at the national, sub-national, facility, and community levels in 17 countries to effectively support the implementation, scale-up, and evaluation of HIV, TB, and COVID-19 programs. EGPAF is able to provide high-impact, high-quality, innovative, contextually-responsive technical assistance (TA) across a wide range of areas including health system strengthening, strategic information and evaluation, digital health, operational research, quality improvement, community engagement, local organization capacity building and development, innovation/emerging technical priorities, project management, and HIV/TB/COVID-19 service delivery.

Project Overview

Through funding from the U.S. Centers for Disease Control and Prevention (CDC), EGPAF started implementing the five-year Delivering Technical Assistance 2 (DELTA2) cooperative agreement for global TA in HIV and AIDS in FY19 and is now in our fourth year of implementation. Building on EGPAF's successful Project DELTA (2013–2019), DELTA2 provides TA services to optimize the impact of programs supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis, and Malaria to ultimately help achieve an AIDS-free generation. Through the original Project DELTA, EGPAF completed 37 assignments across 10 countries: Cameroon, Côte d'Ivoire, Lesotho, Malawi, Mozambique, Namibia, Tanzania, Uganda, Zambia, and Zimbabwe. In the initial three years of DELTA2, EGPAF and partners supported a variety of activities under PEPFAR's Faith and Community Initiative including the development and dissemination of HIV and COVID-19 Messages of Hope for faith leaders and communities; conducted COVID-19 infection prevention and control studies in Cameroon, Cote d'Ivoire, Kenya, South Africa, and Uganda; established a Project ECHO telementoring platform in Haiti; and implemented No Means No dual gender violence prevention programming in five countries. EGPAF is also providing tailored TA to C19RM activities in six countries, is implementing the Violence Against Children Study in Jamaica and providing pediatric HIV and PMTCT TA in five states in Nigeria.

Consortium & Mechanism Partners

The ECHO Institute at the University of New Mexico (UNM) trains partners all over the world in the ECHO model[™] of case-based health care education and telementoring. Using interactive video technology, the ECHO model connects groups of community providers with specialists at centers of excellence in regular real-time collaborative learning sessions. The sessions, designed around case-based learning and mentorship, help local healthcare workers gain the expertise required to provide high-quality needed services. ECHO has engaged more than 640 partners in 51 countries, and participants come from over 180 countries. In Africa, ECHO programs have been implemented in Cameroon, Côte d'Ivoire, Egypt, Ethiopia, Eswatini, Kenya, Malawi, Lesotho, Namibia, Nigeria, South Africa, South Sudan, Sudan, Tanzania, Uganda, Zambia, and Zimbabwe. The ECHO model is also used to train HIV rapid testers in Tanzania and Uganda. In addition, UNM supports TB and laboratory ECHO programs in multiple countries. The ECHO model is well poised to support virtual training, mentorship, and site support during and after the COVID-19 pandemic.

No Means No Worldwide (NMNW) trains instructors to deliver the evidenced-based No Means No sexual and gender-based violence prevention curricula to youth aged 10-20 years old in high-risk environments. Girls learn mental, verbal, and physical skills that can be used to prevent sexual assault. Boys focus on building resiliency and bystander intervention skills, challenging rape culture, and practicing consent. No Means No also encourages young people who have experienced sexual violence to disclose it to trusted adults. Instructors and local staff provide relevant referrals to ensure survivors of sexual violence receive needed medical, legal, and psychosocial support services. No Means No programming is currently active in 10 countries and is on track to reach over 250,000 youth in 2022. No Means No has been highlighted in various publications and reviews conducted by the WHO, CDC, USAID, UNICEF, Together for Girls, Big Win Philanthropy, and the Global Partnership to End Violence, as one of a few evidence-based, cost-effective, and replicable approaches to sexual violence prevention. No

Means No is cited as a PEPFAR-approved EBI and has been implemented successfully within DREAMS and OVC programming for many years.

HEALTHQUAL is a global leader in quality improvement and quality management for HIV service delivery, bringing more than 20 years of experience in applying a public health approach to capacity-building activities for sustainable and lasting change. In partnership with national Ministries of Health and implementing partners, Healthqual designs and implements largescale improvement activities, such as improvement collaboratives, and facilitates the establishment of sustainable and institutionalized health facility-level and national quality management (QM) programs.



PHOTO: EGPAF, 2022

Faith and Community Initiative (FCI) activities: EGPAF has supported a number of activities including developing and disseminating HIV Messages of Hope, COVID-19 Messages of Hope, and corresponding communication materials for faith leaders and faith communities; in addition to establishing the monthly South-South New Foundations of Hope webinar platform for faith leaders and FBO staff; providing No Means No dual gender violence prevention training through sub-grantee No Means No Worldwide in Botswana, Tanzania, Uganda, Zambia and Zimbabwe; supporting Faith Matters! training of facilitators in Tanzania; developing training videos for evidence-based HIV programs in Zambia; and developing country-specific briefs summarizing the work of FCI Steering Committees.

COVID-19 infection prevention and control (IPC) support: In collaboration with the CDC and Ministries of Health, EGPAF implemented studies in Cameroon, Kenya, Cote d'Ivoire, South Africa, and Uganda to assess disruption in health services during the COVID-19 pandemic due to IPC limitations. With a consortium partner, the University of New Mexico (UNM), EGPAF also supported a series of ECHO (Extension for Community Healthcare Outcomes) webinars focused on COVID-19 IPC for a global audience and for Brazilian hospitals. EGPAF is currently providing TA to C19RM activities in Cameroon, Cote d'Ivoire, Haiti, Malawi, Uganda, and Zimbabwe, developing and implementing specific SOWs based on identified country TA needs including TA for mitigating pandemic effects on HIV/TB programming, data management, coordination and project management, laboratory/surveillance, waste management, asset management, and other support.

ECHO projects: In the original Project DELTA, EGPAF collaborated with UNM, the National Institute of Public Health of Côte d'Ivoire, and Lighthouse Trust Malawi to pilot the ECHO telementoring model in Côte d'Ivoire and Malawi. The pilot aimed to improve HIV care and treatment as well as provide an opportunity for health providers to gather virtually for didactic trainings and review of complex clinical cases. Under DELTA2, EGPAF joined with UNM and the National Laboratory of the Haiti Ministry of Public Health and Population to support the development and implementation of an ECHO program in Haiti focused on modules related to laboratory activities, including strengthening cholera surveillance and general laboratory strengthening.

Violence Against Children Surveys (VACS): EGPAF supported the Zimbabwean Ministry of Health and Child Care and key stakeholders in the implementation of the 2016/2017 VACS to collect data on the health of the nation's young adults and to study the epidemiological patterns of risk factors for HIV and violence in the country. In DELTA2, EGPAF is implementing VACS Jamaica in partnership with the University of West Indies and CDC colleagues.

DELTA2 Technical Assistance Menu

Through the DELTA2 global mechanism, EGPAF is poised to support national programs, CDC missions, local implementing partners, and other stakeholders in a wide variety of technical, programmatic, and operational areas in alignment with COP23 priorities.

Technical Support and Implementation

EGPAF can provide or coordinate expert comprehensive TA and service delivery in the following areas:

- HIV services, including pre- and post-exposure prophylaxis (PrEP and PEP)
- TB prevention services
- Pediatric, adolescent, youth, and adult HIV & TB care and treatment services
- Advanced HIV disease programming
- COVID-19 testing, vaccination, and related services
- Cervical cancer screening and treatment using a public health approach
- Adolescent-friendly services
- Priority populations especially children, adolescents, PBFW, and elderly living with HIV
- Integration of HIV and chronic diseases
- Key populations interventions
- Gender-based violence services
- Laboratory services including accreditation, point-of-care early infant diagnosis, and sample transportation
- Family planning
- Early childhood development
- Linkage to other health services

PEPFAR Five-Year Strategy Priority Alignment

- Pillar 1: Health Equity for Priority Populations
 - AGYW-centered programs, NMNW programs, EGPAF's CAYA initiative, leader in the global movement to end AIDS in children with decades of PMTCT and pediatric technical and program experience
- Pillar 2: Sustaining the Response
 - Capacity building of local IPs across the technical and operational spectrum, supporting national systems
- Pillar 3: Public Health Systems & Security
 - Patient-centered care, pandemic preparedness, supply chain TA
- Pillar 5: Follow the Science
 - Research and SIE expertise, data use for program improvement, scaling up evidencebased models and tools, innovations

COVID-19 Technical Assistance

Recognizing the immediate threat of the COVID-19 pandemic on the communities it serves, EGPAF leveraged its core expertise in service delivery and capacity building to begin direct COVID-19 interventions in June 2020. EGPAF's decades of experience in epidemic prevention and control as a technical leader in the global fight against HIV and AIDS has made the organization uniquely prepared to respond to the pandemic. As of late 2022, EGPAF has provided direct COVID-19 interventions from testing and surveillance to vaccine roll-out in 13 countries: Cameroon, Cote d>Ivoire, DRC, Eswatini, Haiti, Kenya, Lesotho, Malawi, Mozambique, South Africa, Tanzania, Uganda, and Zimbabwe.

- Testing and surveillance
- Laboratory strengthening
- Data management and database development
- Vaccination roll-out & demand creation
- Research and evidence generation
- Training and capacity building
- Integration of COVID-19 services into existing services
- Supply chain support

Emerging Technical Priorities

- Advanced HIV disease support
- Triple elimination of HIV, syphilis and Hep B
- Improving management of coinfections
- Supporting the fourth 90-quality of life
- COVID-19 technical assistance including public health programming for other pandemics
- Differentiated antenatal care / PMTCT services, including those for AGYW
- Improving pediatric viral suppression through a comprehensive suite of services
- Introduction and scale-up of new pediatric formulations
- Support for HIV self-testing (HIVST) scale-up
- Expansion of recency assays
- Support for transition to local partners
- Prevention, identification, and treatment of TB in children
- HIV and aging
- HIV and chronic diseases
- · Care of highly treatment-experienced patients
- Evaluations, surveys and surveillance

Strategic Information and Data Visualization TA

Over the last 30 years, EGPAF has provided monitoring and evaluation (M&E) support to HIV care and treatment programs across 24 countries. EGPAF has extensive experience in packaging standard processes and tools such as developing M&E frameworks, conducting M&E portfolio assessments, indicator selection, and establishing robust data systems. The Foundation has spearheaded the design and development of a digital health strategy; national health information system data collection tools, including e-registers and electronic medical record systems, and their associated standard operating procedures/manuals for use at the health facility level. EGPAF has worked hand-in-hand with local Ministries of Health to build country-wide electronic health information systems to enable patient data to be collected in a systematic manner in addition to improving network connectivity and handling the safe and secure storage of sensitive information. To improve access to and enable the use of granular, actionable, and real-time analyses, EGPAF has assisted stakeholders in developing data dashboards in various software including PowerBI and Tableau. As well, EGPAF has conducted training on techniques to create excellent data visualizations, undertaking nuanced and granular program performance analysis, the use of descriptive/inferential analysis, and effective data presentation. In addition, EGPAF is also an expert in conducting program costing analysis and undertaking large-scale economic evaluations.

Data Collection, Linkage, and Storage Systems

- Design and implement paper and electronic registers, data collection forms, apps, and data management and governance systems
- Design and pilot prototype point-of-care electronic medical record systems
- Conduct situation analysis of system security and confidentiality for patient monitoring and case surveillance
- Develop central data repositories (Data Lake)

Data quality Assurance

- Develop data dashboards that track a set of data quality indicators so that progress in data quality can be assessed over time
- Develop and implement national/subnational data quality assurance strategies, tools, and SOPs to institutionalize data quality at all levels
- Conduct rapid data quality assessments or periodic data quality audits

Enhanced Analytics

- Develop human-centered, mobile-based solutions for rapid data collection, validation, and real-time analysis
- Provide expertise in combining key data from disparate data sources into usable formats for data use/learning
- Conduct program costing analysis and economic evaluations

Quality Improvement

- Quality Assurance utilizing mobile solutions and data dashboards to conduct rapid quality of care assessments, root cause analyses, and client-centered surveys in order to provide on-site feedback for real-time solutions
- Site-tailored QI TA using mobile-based solutions to enhance coaching visits and facilitate near realtime tracking of site-level QI activities, enabling stakeholders to be responsive to health systems and client needs
- QI Collaboratives establish and manage improvement collaboratives to promote cross-site learning and maximize impact and spread of best practices
- QI for Community using proven community engagement tools such as community dialogues and score cards to involve communities and individuals in improving health care systems and services to meet their needs

Research

EGPAF's broad clinical and implementation research portfolio, conducted across 16 countries in sub-Saharan Africa and India, focuses on optimizing health service delivery, building an evidence base for innovative strategies and novel technologies, and effectively scaling up promising interventions. With decades of on-the-ground community and facility-level research and program experience as well as critical relationships with ministries of health and key stakeholders, EGPAF ensures strong stakeholder engagement to improve the utilization of results for policy and program improvement.

EGPAF has worked with the CDC since 2012 to develop its novel Patient and Program Outcomes Protocols (PPOP) in all EGPAF CDC-funded PEPFAR program countries. These protocols have been approved by CDC offices in-country and in Atlanta and all have local and US IRB approvals. The PPOP allows for the abstraction of existing patient-level clinical, laboratory and program data from paper-based registers/medical records and extraction of the same from existing electronic medical records. Analysis of this patient level data generates evidence to assess program and service gaps; improve program implementation; inform policy; and disseminate key findings and lessons learned. Under these protocols, EGPAF is able to rapidly utilize multiple data sources (patient community, clinic, laboratory) to assess patient outcomes and answer key evaluation questions in single and multi-country studies.

EGPAF Research Experience

Facility- and community-based cluster randomized trials

 Examples include: evaluating the integration of COVID-19 screening using rapid antigen-detecting diagnostic tests into routine services for pregnant women or patients with TB, use of digital tools for COVID-19 contact tracing, advanced HIV disease treatment packages on patient outcomes, interventions to improve early childhood development, integration of routine TB screening into child health care services

Quasi-experimental studies

• Examples include: pre-post evaluation of standardized enhanced adherence counseling for improved HIV viral suppression among children and adolescents

Surveys

• Examples include: Violence Against Children surveys, surveys on the impact on health service disruptions resulting from limitations/commitments of IPC, a telephone-based surveillance survey of COVID-19-like illness, including vaccine hesitancy and health service use by PLHIV during the COVID-19 pandemic, and community surveys on the effectiveness of PMTCT programs.

Qualitative studies & evaluations

• Examples include studies on acceptability and usability of a pediatric screening tools, health care worker and caregiver perspectives on optimizing neonatal ART using raltegravir; mother and health worker views on point-of-care HIV birth testing

Clinical studies

• Examples include: effectiveness of new medications for COVID-19 disease on patient outcomes in African setting, clinical and pharmacovigilance outcomes of children on ART, birth defects surveillance among women on ART

Project Management TA

EGPAF's Project Management Office (PMO) provides capacity building across the organization and to targeted partners. The PMO sets standards, conducts training, and offers a variety of processes and tools that teams, departments, and individuals can use to improve the management of their activities. EGPAF PMO standards and services ensure high-quality management of donor-funded projects and support the core functioning of internal teams. Individuals also apply these tools and processes to better manage their workloads. EGPAF PM TA services may be brought in to guide PM initiatives for new business opportunities, support project start-up, help with closeout, or improve management of an ongoing project. EGPAF PM TA services can be adapted to stakeholders including local IPs and MOH to improve project outcomes and efficiencies.

Illustrative Project Management TA Activities

Training

- Project management trainings in English, French, or Portuguese
- Development and customization of the Foundation's in-house training platform (for face-to-face or virtual training)
- Training of Trainers to develop in-house PM trainer pool

Governance, standards and processes

- Set up of organizational minimum standards and roles for project management
- Development of project management tools to fit the organization's needs
- Refinement of project management processes
- Structured support to develop formal project and activity governance processes
- Guidance on creating a customized project charter template to meet organizational needs
- Assistance developing and deploying change-management process
- Deployment of RAPID framework (recommend, agree, perform, input, and decide) to bolster decisionmaking processes for strategic organizational decisions

Focused assistance

- Training on project management tools, including work breakdown structures, problem trees, stakeholder management tools, communication tools and others
- Develop and guidance to establish a RACI (responsible, accountable, consulted, informed) tool to clarify key responsibilities and accountabilities
- Training on using a logical framework to develop a coherent set of project activities and ensure inputs result in the intended outcome for project or program beneficiaries
- Project start-up or close-out support
- Knowledge and process management guidance and TA, including the development of standard operating procedures

Local Organizational Development and Transition TA

EGPAF, a recognized leader in the effective and sustainable transition of HIV programs to national organizations, has been instrumental in supporting PEPFAR-funded programs to meet localization targets. Since EGPAF began implementing its global programs in 1999, it has used a country ownership approach, working with and through public, private, and civil societies to bolster the capacity of national health systems. EGPAF's health system– strengthening activities are guided by its institutional framework to advance country ownership and capacity, which includes three prongs: (1) evidence-based health system–strengthening activities at the national and decentralized levels, (2) comprehensive organizational development of civil society organizations and private providers, and (3) robust assessments of national capacity to monitor progress and identify capacity gaps.

Illustrative TA Activities in Support of Transition and the Strengthening of Health Systems

Services

- Provide technical capacity building for the health workforce and local partners in cervical cancer, HIV testing services, male-friendly services, PrEP, viral load monitoring, management of high viral load, adolescent- and youth-friendly services, multi-month dispensing, HIV treatment failure, post-genderbased violence care, and TB services
- Support integrated service delivery (capacity building of health workers and district teams, integration of systems and registers)
- Design and roll out support for differentiated delivery of HIV prevention, testing, and treatment services that is tailored to the varying needs and preferences of different sub populations and client groups
- Development of virtual support groups for adolescent and youth, community adherence groups, and peer supporters to provide PSS to clients and encourage their continued adherence and retention in care on a daily basis while maintaining social distancing

Enabling Environment

- Build capacity to create a conducive environment for innovation and adaptability through approaches such as in-depth data analysis, research forums, and learning and sharing forums
- Institutionalization of program and project management processes and policies through training and mentorship for local partners and national entities
- Development of national manuals and support for development of national policies
- Support donors and organizations in introducing, implementing and evaluating transition, localization and sustainability efforts

Systems

- Create digital tools and systems to monitor HIV care & treatment of children and adolescents
- Incorporation of eletronic medical record system to health sites (installation of hardware and software, end user training and coaching)
- Build and adapt highly effective and efficient data processing and management systems
- Support the roll-out of new clinical, laboratory, and pharmacy guidelines (training of district- and facilitybased staff, development of job aids and tools, integration into supportive supervision and mentoring)
- Design and support roll out of supply chains for the management of commodities

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Resources

- Human resources systems, including recruitment, retention, and development of staff, as well as adherance to labor laws
- Compliance with U.S. government rules and regulations, and best practices in project management
- Financial management and operations, including risk management and ongoing fraud prevention
- Designing, issuing, managing, and monitoring subgrants
- Resource mobilization approaches, including assistance for SAM (System for Award Management) and DUNS (Data Universal Numbering System) registration, proposal writing, budget planning, and partnership approaches

Contact Information

For more information on the types of TA that can be accessed via the DELTA2 mechanism, please contact: Andrea Uehling, Associate Director, Elizabeth Glaser Pediatric Aids Foundation (email: auehling@pedaids.org)

For more information on how to access DELTA2 TA through CDC, please contact: Emily Stong, Project Officer, Division of Global HIV & TB, CDC (email: wrs8@cdc.gov)