

# ENSURING QUALITY HEALTH SYSTEMS AND HUMAN RESOURCES

## OVERVIEW

The original goal of UNAIDS' "90-90-90" global targets was that, by 2020, (1) 90 percent of all people living with HIV (PLHIV) will know their HIV status; (2) 90 percent of all people with diagnosed HIV will receive sustained antiretroviral therapy (ART); and (3) 90 percent of people receiving ART will have viral suppression. The organization has since called for a Fast-Track Strategy of "95-95-95" among the general population, while retaining the original "90-90-90" targets among key populations (marginalized and stigmatized populations including men who have sex with men, sex workers, people who inject drugs, transgendered women, and prisoners). Meeting these targets will require HIV treatment coverage to double globally – from 15 million (in 2015) to 30 million by 2020 and viral load (VL) testing to be scaled-up dramatically.

This expansion in HIV service delivery requires a health workforce authorized and equipped with the right skills and deployed to the right places to deliver high-quality, compassionate care across the clinical cascade. In order to enhance services for key and priority populations, HIV service delivery must also connect and retain patients in care, address loss to follow-up, manage complex cases, and utilize VL results to better manage care. All of this will require additional investments in the global health workforce. Strengthening health workforce capacity requires more than just training. It also requires improvements in recruitment, allocation, mentorship and supervision, enabling policy environments, workforce regulations, innovative service delivery models, and pre-service and continuing education. Moreover, health system improvements must address causes of persistent workforce shortages and financing barriers, as well as responding to workforce needs such as authorization of allied health cadres (e.g., community health workers) for task sharing (i.e., community-based testing, linkage, adherence) and addressing the need for workforce planning, strategic deployment, and improved retention across all health cadres – clinical and non-clinical, whether facility- or community-based.

## CDC'S ROLE

The U.S. Centers for Disease Control and Prevention (CDC) is enhancing the efficiency and effectiveness of health systems and the performance of health workers to sustainably scale-up and deliver high quality HIV services under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). CDC collaborates with national and international partners, ministries of health (MOHs), and CDC country offices as thought leaders; identifying human resources for health (HRH) gaps; guiding systems investments; developing innovative tools; and improving policies to build capacity in health services research, policy and regulation, MOH workforce data and management systems, and quality clinical practice. Specific investments include:

- **Instituting Mentorship and Supervision for nurses, midwives, community health workers and other health care workers** in PEPFAR countries with national policies permitting Task Sharing and promoting direct service delivery models/differentiated care modes to advance innovative clinical practice and improve the quality of care for PLHIV.
- **Improving the planning and distribution of health worker programs** for HIV by providing technical assistance to more than eight countries in human resource information systems. In addition, CDC is providing guidance and support on use of a National Health Worker Allocation Optimization Tool to improve the efficiency of health worker deployment to high-burden HIV clinical sites and support countries implementing HRH rapid assessment tools.
- **Strengthening MOH capacity to plan and manage HIV programs** by establishing key sub-national MOH capacity metrics, by supporting capacity-building activities, assisting with translating and disseminating practices to the field, and by advancing National Public Health Institutes.
- **Addressing policy barriers to HIV service delivery** by helping countries to develop national task-sharing policies, regulations, scopes of practice, and national public health laws.
- **Advancing research** to evaluate health systems and health workforce interventions, including those focused on reducing stigma and discrimination, increasing access for key and priority populations, and identifying best practices for sustainable HIV service delivery.

## ACCOMPLISHMENTS

CDC's investments have proven effective in addressing health systems barriers and strengthening the health workforce in numerous countries. Some of those accomplishments include but are not limited to:

- **Task Sharing Policy Development:** Helped three countries to adopt national task-sharing policies.
- **HRH Rapid Assessment Tool:** Worked on the development of an assessment tool which has gathered site-level HRH staffing data in three countries.
- **Continuing Professional Development:** Established new national continuing professional development programs in seven East, Central and Southern African countries, and strengthened six countries' existing programs.
- **Nurse-Initiated and -Managed ART:** Advanced nursing regulations in 17 East, Central and Southern African countries, including national scopes of practice, continuing professional development programs, nursing and midwifery legislation, and professional licensure.
- **Human Resources Information Systems (HRIS):** Worked with MOH and CDC offices in eight countries on the development, implementation, integration, and evaluation of HRIS.
- **Development of Global Standards:** Joined forces with the World Health Organization to develop National Health Workforce Accounts and Minimum Data Sets for HRIS and HR Registries and created HRIS Assessment Framework and HRIS Business Case with the Office of the Global AIDS Coordinator within the U.S. State Department, U.S. Agency for International Development, and partners to identify implementation gaps in 12 countries.
- **Workforce Planning:** Conducted analysis of HR recruitment and deployment processes in two countries. Trained an African non-governmental organization in methodology to serve as a sustainable resource in the region.
- **Workforce Allocation Optimization Tool:** Developed a tool to match graduates' employment preferences with demand for workers at specific locations. This development has been piloted at the national level in one country, reducing reallocation requests.
- **Capacity and Sustainability Metrics:** Supported three countries in developing a tool to measure the sub-national capacity to manage the HIV epidemic.
- **Field Epidemiology Training Program:** Supporting advanced training in HIV epidemiology, surveillance, and laboratory to professionals in Mozambique, Democratic Republic of Congo, and Zimbabwe. Graduates from this program serve in senior leadership roles at the national and sub-national levels to support the HIV response in their respective countries.

## FUTURE EFFORTS

The health workforce is a critical factor in meeting the UNAIDS' targets to control the HIV epidemic. As countries strive to meet them, future investments will be needed to create and formalize new cadres of health workers and to facilitate uptake of innovative service delivery models among pre-existing cadres. Formulation and implementation of task-sharing policies is also a key activity to continue in order to expand the capacity of the workforce to support HIV service delivery. In order to develop a workforce properly equipped to address the HIV epidemic among key populations, CDC will focus on research and adoption of best practices among providers in this key area.

## BENEFITS OF OUR WORK

Fighting disease abroad is the first step to preventing disease at home. CDC's global health work extends from scientific discovery to on-the-ground program implementation and draws on its deep pool of expertise as the only U.S. government agency with an exclusive focus on public health. The advancements CDC helps countries to make in their health systems and health workforce development contribute to not only the health of people in those countries, but to the American people as well.