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# Health Care Works And Patients Experiences on Piloting Fast Track Model: Piloting Differentiated ART Models In Zambia.

# BACKGROUND

- The last decade has seen successful scaling up of ART provision resulting in over 800,000 adults and children accessing HIV care and treatment services in Zambia .
- Continued scale up of HIV services has also led to increased demand for the HIV services thus leading to congestion in health facilities .
- The continued strain on the health system threatens the quality of care.
- We implemented Fast Track, a differentiated care service model in two urban ART clinics purposively selected for heavy clinic patient load (>4,500) in Lusaka, Zambia.
- Fast Track (FT) model is an accelerated drug pick-up where HIV Stable positive patients are dispensed three months of Anti retroviral Therapy (ART) supply in a dedicated treatment room.
- Stable patients were defined as; HIV+, age>14, on ART > 6 months, not acutely ill by clinical judgement, CD4 >200/ $\mu$ l in last 6 months(if available), not pregnant

# Figure 1: Infographic of Fast Track

## What is FastTrack?



**FastTrack is an accelerated pharmacy pick-up for stable HIV+ patients**



Every 3 months patients come to the clinic to receive adherence counselling and collect their ART drugs from the FastTrack Unit



**Every 6 months patients come for their full clinical visit. They receive adherence counselling and collect their ART drugs from the FastTrack Unit**

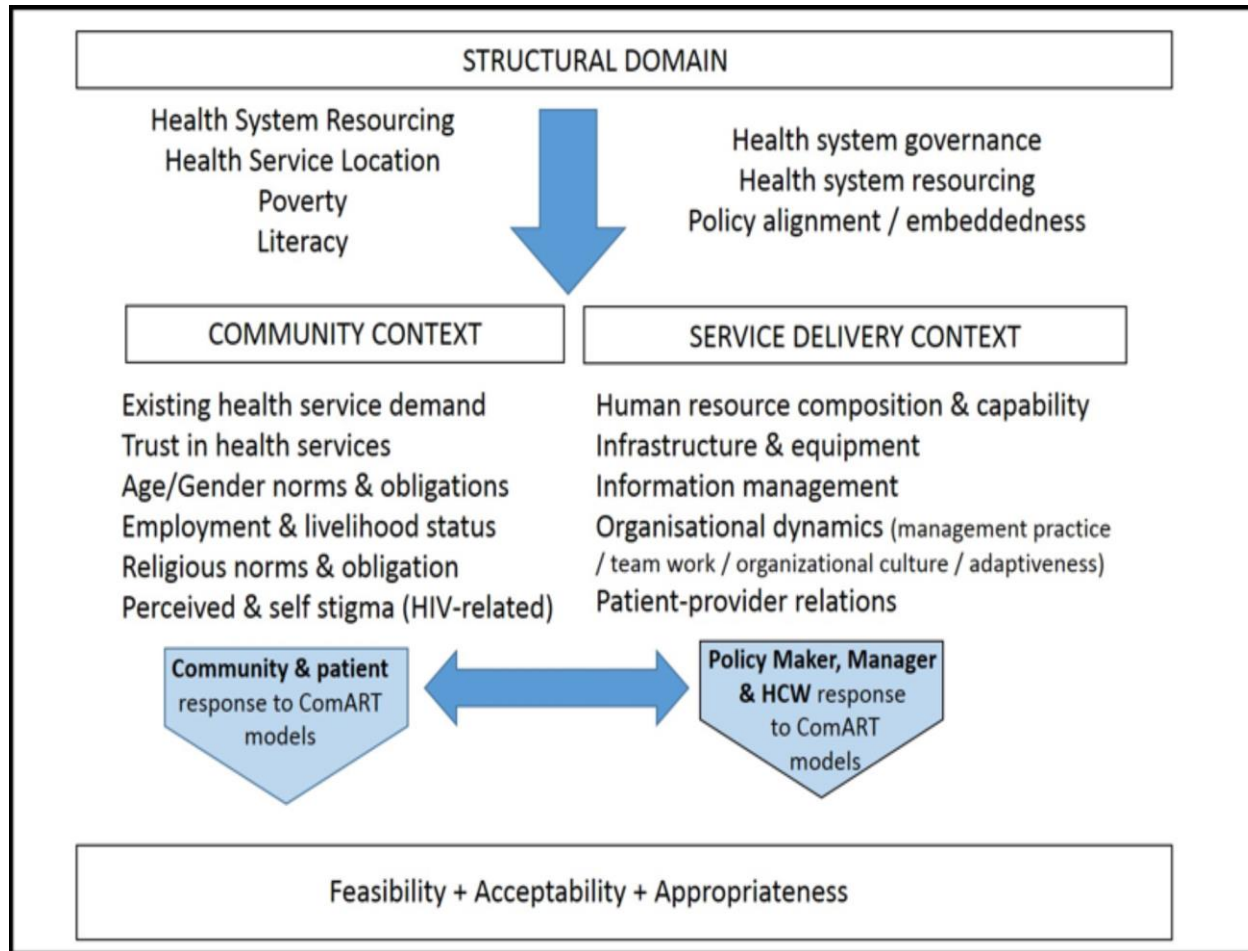
# METHODS

- From December 2016 to January 2017, we collected data on the lived experiences with the Fast Track model from the two urban sites in Lusaka where the model was implemented.
- Six (6) Focus Group Discussions (FGDs) were conducted with:
  - 4 groups of ART patients
  - 2 groups of Professional health workers
- Inductive & deductive coding guided by an adapted social-ecological framework was used to analyze data.

# METHODS con't

- Eight (8) In-depth interviews (IDIs) were conducted with:
- 2 ART In-charges
- 2 Pharmacy technologists
- 4 Lay health care worker (clinic volunteers)
- All interviews and discussions were audio-recorded using voice recorders and transcribed into English
- All transcripts were imported into Nvivo 11 QRS software for data organisation and managing
- An iterative process of coding using a multi-step process of deductive and inductive techniques was used

# Figure 2: Conceptual Framework



# RESULTS

## Clinic Decongestion

- Both professional health workers and patients viewed FT as having the ability to decongest the clinic by spacing ART pick-ups and reducing time spent in the clinic by providing dedicated services.

*...fast track is one way which has helped reduce congestion, because that number (number of ART patients) which went to fast track would have joined the queue (routine queue), but the people were directed to go and get medication from fast track **[Professional health worker]***

*...ah, the model decongested those queues of ART patient because the patients are basically skipping and go for adherence counselling then they pick up drugs in Fast track unit and off they go home **[patients]***

*...this model of fast track has helped very much decongest the clinic because before Fast Track was introduced we used to have a large number of patients probably we could even work up to 16 hours **[Professional health worker]***

# RESULTS con't

## Integration of clinic services

- Patients requested for other services such as measuring weight and blood pressure be integrated into the FT services. With FT services dedicated to dispensing ART and counselling patients therefore, joined routine ART queues for other services at every visit.

*...like I said, at the fast track unit there are no BP machines, thermometers and scales so they should put that in place I think that would help **[Patient]***

*...I would love this model (Fast Track) to be giving even other drugs apart from the drugs that they are taking the ARVs, probably the client is not feeling well, she is coughing, they can give them amoxicillin **[Professional health worker]***

*...I only wish we can have some people like lab technicians that can be doing the bleeding part I think in that way it (Fast Track) can work out better **[Patient]***



# RESULTS CON'T

## Importance of sensitization

- HCWs emphasized the importance of sensitization and information dissemination to foster a sense of ownership. This was because there was a tendency of some professional health workers thinking that Fast Track model was not part of the general ART set up but was a stand alone clinic that required additional staff and equipment support.

*...there should be orientation to all staff about fast track so almost everyone at the clinic knows about fast track and we can own it [Professional health worker]*

# CONCLUSION

- Overall, the FT model was reported to be highly appropriate and acceptable and showed the ability to decongest the clinic and provide freed up time to both patients and the health workers.
- Integration of clinic services was highly recommended to provide streamlined and convenient services for the patients'.
- Sensitization is key to promote ownership of new programs the clinics by health workers