## **Infectious Diseases Institute**

# **College of Health Sciences**

# **Makerere University**

# **Programmes - Key Performance Indicators**

For period ending 31st March 2021

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### List of Acronyms

ACREM	Applied Clinical Research and Evidence-based Medicine Acute Febrile Illness
AFI ANC	Acute Februe Inness Antenatal Care
ART	Antiretroviral Therapy
ATIC	Advanced Treatment Information Center
BD	Becton Dickinson
BHP	Bunyoro HIV Project
	Caesarean Section
C-section	
CSF	Civil Society Fund
DMM DOD	Department of Medical Microbiology United States Department of Defense
EID	-
EKKP	Emerging Infectious Diseases Expanded Kiboga-Kibaale Project
GHSA	Global Health Security Agenda
HCIV	Health Centre IV
HIV	Human Immunodeficiency Syndrome
IDCAP	Integrated Infectious Diseases Capacity Building Evaluation
IDI	Infectious Diseases Institute
IDSR	Integrated Disease Surveillance and Response
ІНК	International Hospital Kampala
IPC	Infection Prevention and Control
КНР	Kampala HIV/AIDS Project
KCCA	Kampala Capital City Authority
MAPD	Malaria Action Plan for Districts
MARPS	Most at Risk Populations
MCH	Maternal Child Health
M&E	Monitoring and Evaluation
MJAP	Makerere University Joint AIDS Program
PEPFAR	US Presidential Emergency Fund for AIDS Relief
PNFP	Private Not For Profit
RRHs	Regional Referral Hospitals
QA	Quality Assurance
QC	Quality Control
SDS	Strengthening Decentralisation for Sustainability
SHARE	Sharing HIV/AIDS Responsibilities and Efforts
SMGL	Saving Mothers, Giving Life
SMP	Stop Malaria Project
ТВ	Tuberculosis
UNHLS	Uganda National Health Laboratory Services
WHO	World Health Organization
WHP	West Nile HIV/AIDS Project

### **List of General Definitions**

Active ART Clients : Visited the clinic at least once in the last 3 months

Active Pre ART Clients : Visited the clinic at least once in the last 6 month

Direct Support: HIV care support provided directly by IDI through the IDI Adult Infectious Diseases Clinic (AIDC), Mulago

Indirect Support: HIV care support provided by IDI through other clinics not directly managed/run by IDI.

**IDI – Run Specialist Clinics**: Adolescents, Sexual Reproductive Health, Senior Citizens, Non Communicable Diseases, Kaposi Sarcoma, TB/HIV, Discordant, MARPs, Hepatitis B and Mental Health

Full Time Staff: Staff providing 100% staff effort to the organization/project

Saving Mothers Giving Life (SMGL): This is an IDI implemented Health Systems Strengthening project that aims at improving maternal child health (MCH) in specific health facilities in Kibaale district

Trainee: A course participant who receives a certificate of completion of, or attendance at, an IDI course.

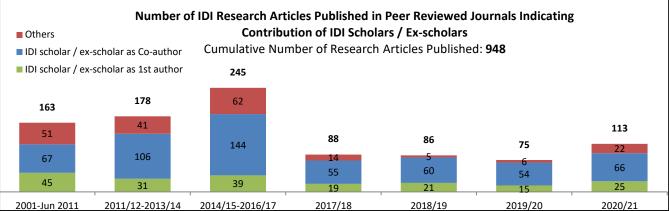
Kampala Capital City Authority facilities supported by IDI: Komamboga, Kisugu, Kawempe Home Care, Kawaala, Kiswa, Kitebi, Kisenyi, Kawaala, Hope Clinic and Kiruddu. Due to renovation of some government facilities, Kawempe HCIV and Kiruddu HCIV were dropped after September 2013. Hope Clinic was also dropped after March 2016. From October 2016, IDI Mulago clinic was also considered one of the KCCA clinics. However, data from the IDI Mulago site is reported separately.

**Eight Districts in Western Uganda supported by IDI:** Kibaale, Kagadi, Kakumiro, Kyankwanzi, Hoima, Buliisa, Masindi and Kiryandongo.

Eight Districts in West Nile supported by IDI: Adjumani, Arua, Zombo, Maracha, Nebbi, Yumbe, Koboko, Moyo

**Civil Society RRH Capacity Building Project supported RRHs**: Soroti RRH, Moroto RRH, Gulu RRH, Lira RRH, Fort Portal RRH, Hoima RRH, Masaka RRH, Mubende RRH, China Uganda Friendship Hospital, Kibuli Moslem Hospital and Kasangati HCIV. Implementation of this project ended in September 2015.

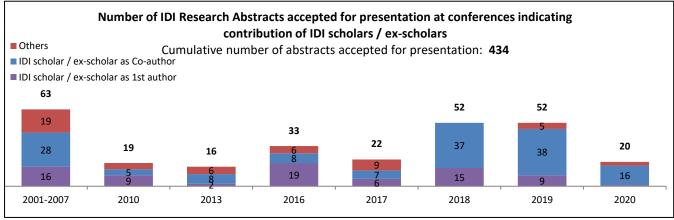
#### **IDI RESEARCH PROGRAMME**



Indicator Definition: Number of IDI research articles published in peer reviewed journals disaggregated by contribution of IDI scholars and IDI ex-scholars. Unit of measure: Number. Disaggregated by: IDI scholar/ex-scholar as 1st author, co-author, others

Data Source: Research department. Frequency of data acquisition: Quarterly and annually

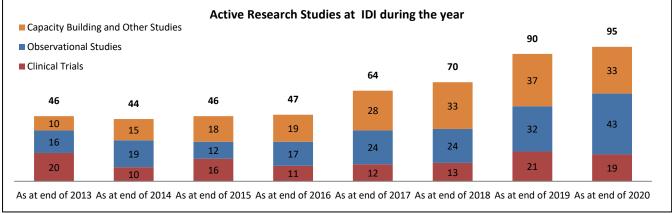
Additional Notes: 1) An article is counted as a publication by IDI if one or more of the authors cites IDI as their institutional affiliation (or one of their affiliations). Such authors may or may not be employed by IDI. 2) IDI trainees, in this context, are mainly Sewankambo Scholars who were pursuing PhDs, or post-doctoral studies, or Masters in Medicine. Most Sewankambo Scholars on completion of their scholarships (and usually their PhDs) have remained at IDI as staff members or have continued some other close connection with the Institute through involvement in IDI research projects: these individuals are counted as IDI ex-trainees. 3) Publications by staff in departments other than research at IDI are not counted on this chart.



Indicator Definition: Number of IDI research abstracts accepted for presentation, indicating contribution of IDI scholars and ex-scholars Unit of Measure: Number. Disaggregated by: IDI scholar/ex-scholar as 1st author, co-author, others Data Source: Research department

Frequency of data acquisition: Quarterly and annually

Additional Notes: 1) From 2013, number of abstracts presented during conferences were tracked. 2) There were no abstracts in 2021 due to the global pandemic which has resulted in fewer conferences.



Indicator Definition: Number of research studies active at IDI during the year by type.

Unit of Measure: Number

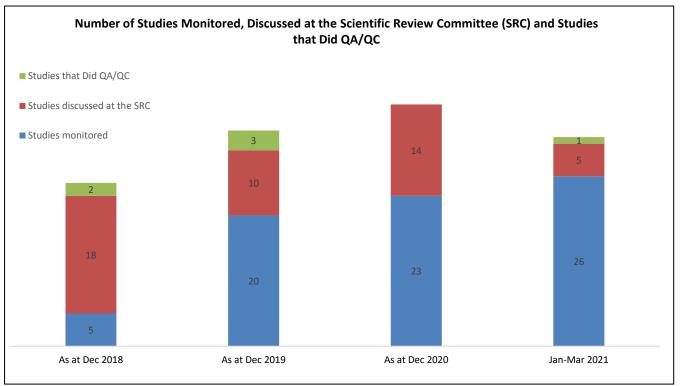
Disaggregated by: Capacity building, observational studies, clinical trials

Data Source: Grants Register

Frequency of data acquisition: Quarterly and annually.

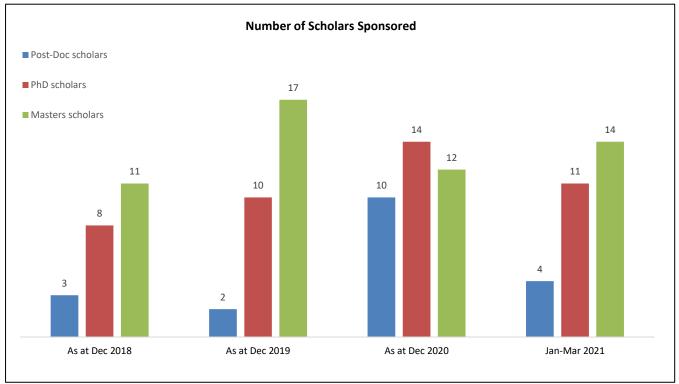
Additional Notes: 1) 'Active' means projects which are being implemented during the reporting period regardless of their start or end dates. 2) Start date used is the start date stated in the research project contract, not necessarily the date of signature of the contract. 3) End date used is the end date stated in the research project contract; not necessarily the date by which all activities related to the project end. 4) Definition and source of active research projects starts 2013. Data source used is the SIGMMER generated grants register. 5) Due to evolving systems of data management, there may be a few discrepancies in the number of projects over the years.

#### **IDI RESEARCH PROGRAMME**



Indicator Definition: Number of research studies monitored by the IDI research team and number of studies discussed at the Scientifiv Reveiwe Committee during the quarter.

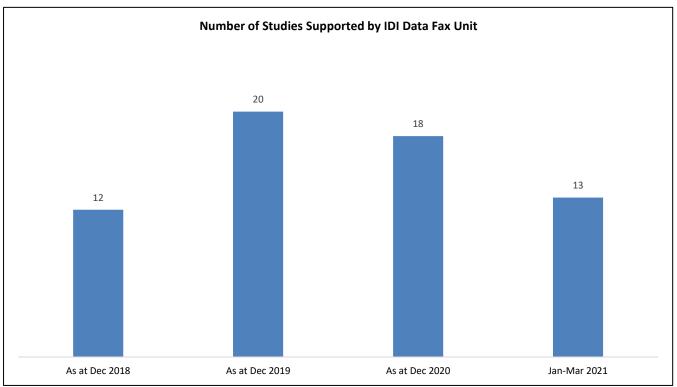
Unit of Measure: Number Data Source: Research Department **Disaggregated by:** QA/QC, SRC Discussions and Monitoring **Frequency of data acquisition:** Quarterly and annually.



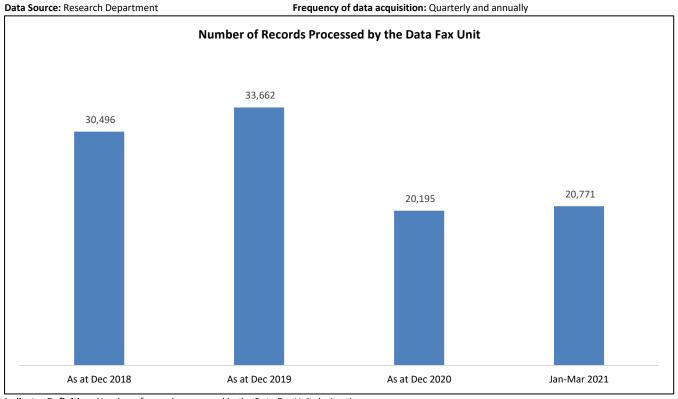
 Indicator Definition: Total number of scholars supported financially by IDI projects during the quarter.

 Unit of Measure: Number
 Disaggregated by: Post-Dec, PhD and Masters

#### **IDI RESEARCH PROGRAMME**



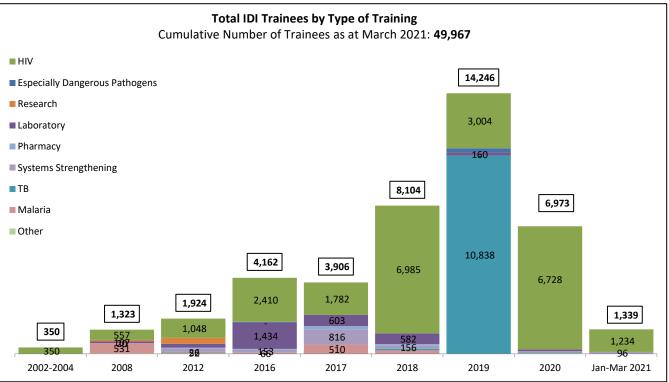
Indicator Definition: Number of Studies Supported by IDI Data Fax Unit during the year. Unit of Measure: Number Disaggregated by: Disaggregated by:



Indicator Definition: Number of records processed in the Data Fax Unit during the year.

Unit of Measure: Number Data Source: Research Department Disaggregated by: Frequency of data acquisition: Quarterly and annually

#### **IDI TRAINING PROGRAMME**



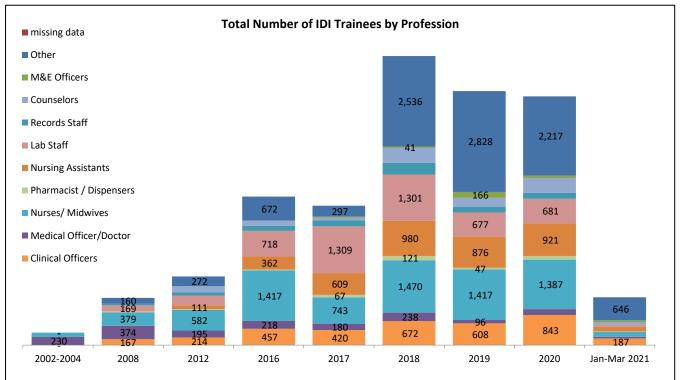
Indicator Definition: Total number of IDI trainees disaggregated by the type of training received.

Unit of Measure: Number Disaggregated by: Type of training

Data Source: Training reports Frequency of data acquisition: Quarterly

Additional Notes: 1) Systems strengthening includes: Grants Management, Monitoring and Evaluation and Data management courses. 2) Research courses include: ACREM, Good Clinical Practice (GCP) and Longitudinal Data analysis courses. 3) Medical student training placements and participants of Continued Medical Education (CME) are not included since they are not awarded IDI certificates. 4) Figures below 100 are left out of the graphic.

5) About 15% of IDI course participants have returned to IDI for further training as an endorsement of the quality and relevance of the training. 6) In 2009, the training department started a policy known as 'Academic Social Responsibility (ASR)' where IDI admits (without payment of tuition fees) course participants with resource challenges, especially health workers from 'hard to reach' areas in Uganda. 7) Training numbers do not include a significant number of trainees under the UCSF research programme.



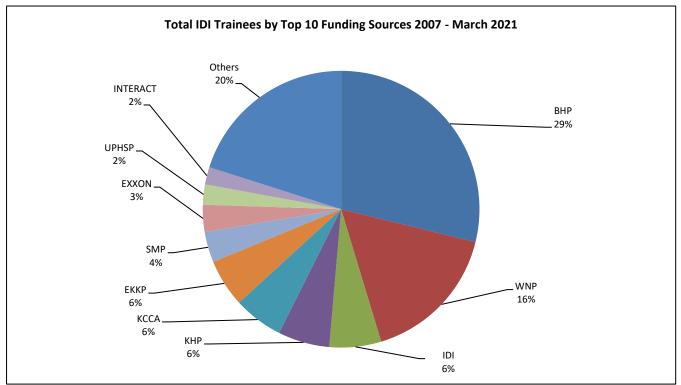
Indicator Definition: Total number of IDI trainees disaggregated by type of profession of trainees.

Unit of Measure: Number Disaggregated by: Type of profession

Data Source: Training reports Frequency of data acquisition: Quarterly

Additional Notes: Figures below 100 are left out of the graphic.

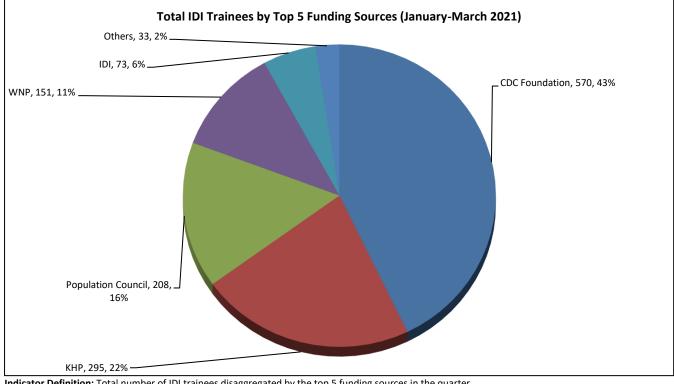
#### **IDI TRAINING PROGRAMME**



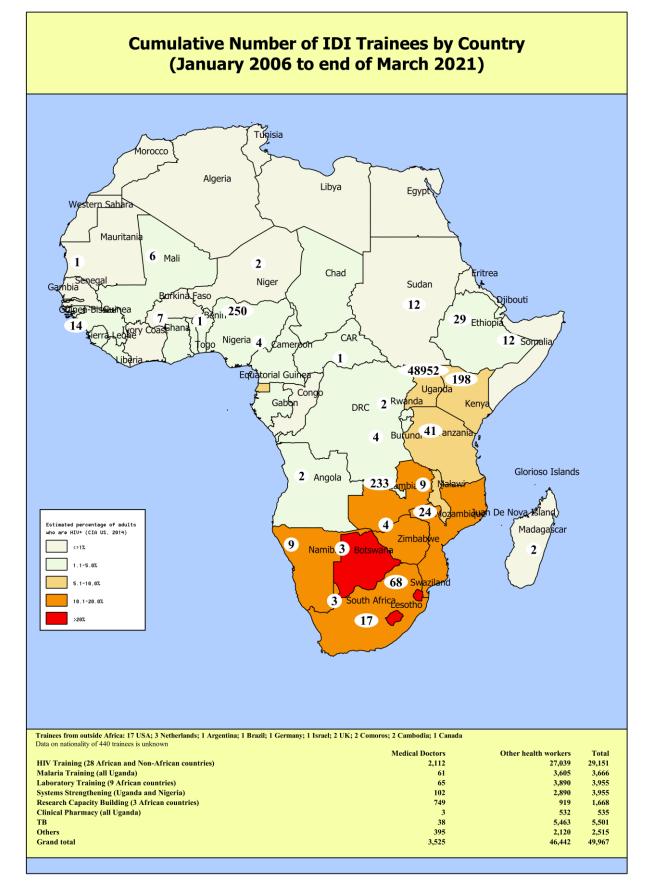
Indicator Definition: Total number of IDI trainees disaggregated by the top 10 funding sources over time. Unit of Measure: Numbers/Percentages Disaggregated by: Funders

Data Source: Training reports Frequency of data acquisition: Quarterly

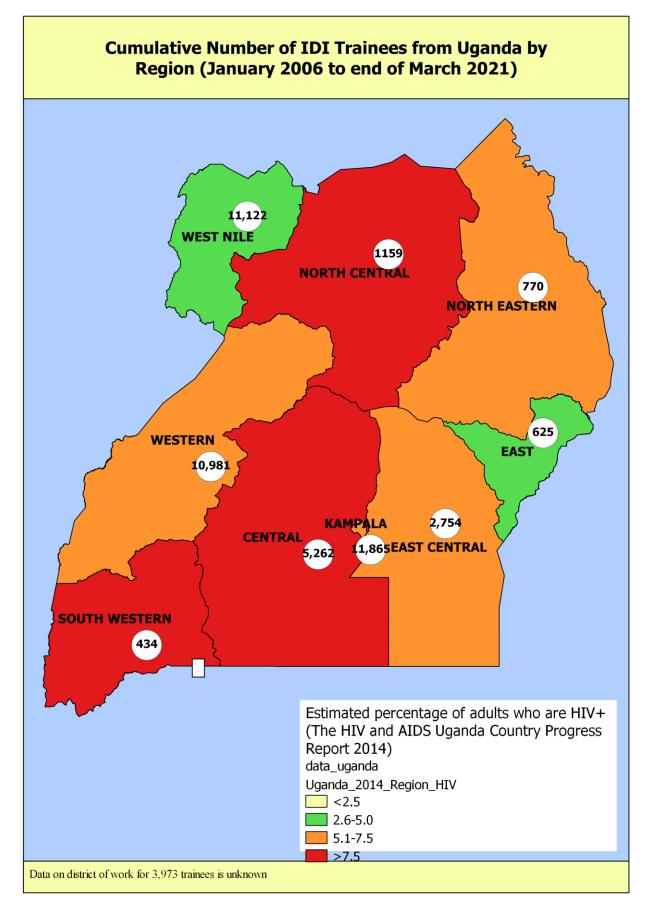
Additional Notes: 1) In January 2006, the tuition fees were increased and IDI scholarship fund (with preferential treatment for candidates with insufficient funds) was established according to the IDI strategic plan. 2) The figures for 'trainees' currently include newly qualified medical officers from Mulago Hospital who attend a one-week taught course at IDI. 3) IDI trainees figures exclude: undergraduate students from the Faculty of Medicine, Makerere University who follow a one week, problem-based curriculum; healthcare workers attending short (two day) Continuing Professional Education events at IDI; IDI currently funds both the above forms of training. 4) Booked trainees who do not attend are usually charged. 5) In the others category is an aggregate of all the training funding sources which did not make it in the top 10 including; BD, CSF, Presidential malaria initiative (PMI), WA-IDI, WHO-TB Reach, I-TECH among others.



Indicator Definition: Total number of IDI trainees disaggregated by the top 5 funding sources in the quarter.Unit of Measure: Numbers/PercentagesDisaggregated by: FundersData Source: Training reportsFrequency of data acquisition: Quarterly



Indicator Definition: Cumulative number of IDI trainees disaggregated by country of origin in Africa, type of training and profession of trainees.Unit of Measure: NumberDisaggregated by: Country of origin, Type of training and ProfessionData Source: Training reportsFrequency of data acquisition: Quarterly



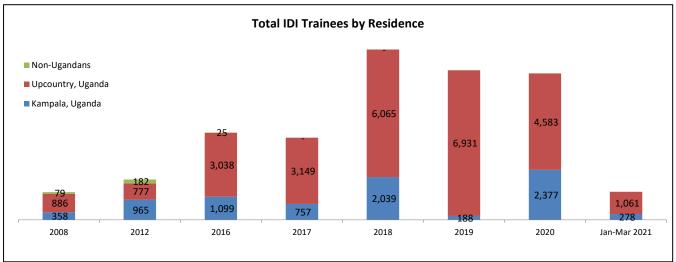
Indicator Definition: Cumulative number of Ugandan IDI trainees disaggregated by region of origin.

Unit of Measure: Number Disaggregated by: Regions

Data Source: Training reports Frequency of data acquisition: Quarterly

Additional Notes: Data on the district of work for 3,972 trainees is not available for earlier years, as it was not being captured then.

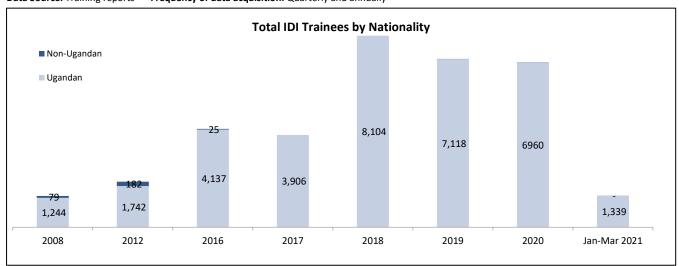
#### **IDI TRAINING PROGRAMME**



 Indicator Definition: Total number of IDI trainees disaggregated by location of residence.

 Unit of Measure: Number
 Disaggregated by: Kampala, outside Kampala, international

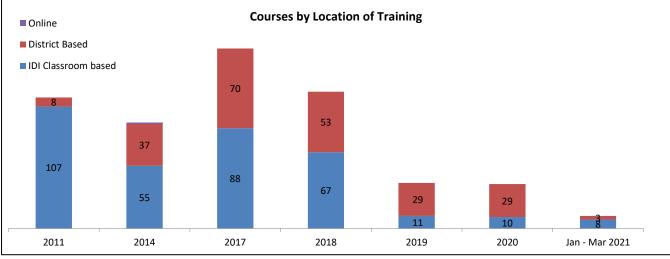
 Data Source: Training reports
 Frequency of data acquisition: Quarterly and annually



 Indicator Definition: Total number of IDI trainees disaggregated by citizenship.

 Unit of Measure: Number
 Disaggregated by: Ugandan, Non-Ugandan

 Data Source: Training reports
 Frequency of data acquisition: Quarterly and annually



Indicator Definition: Total Number of courses conducted disaggregated by location of training.

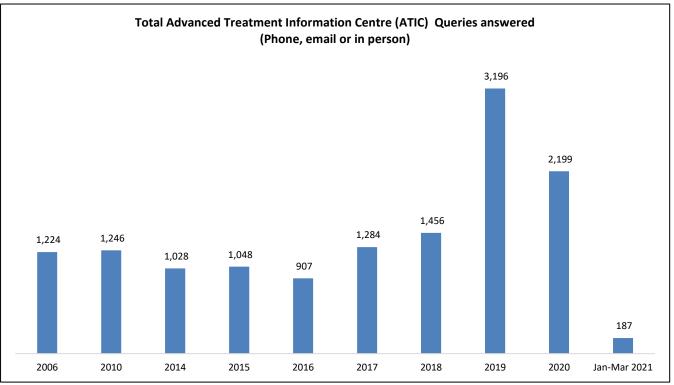
Unit of Measure: Number Disaggregated by: Online, district based, IDI classroom based training

Data Source: Training department

Frequency of data acquisition: Quarterly and annually

Additional Notes: Courses/trainings conducted before 2011 were not categorized by location of training. There were no online trainings for 2016 due to postponement of trainings to 2017 by the funder.

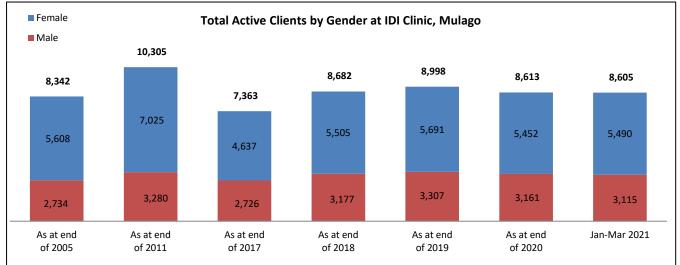
#### **IDI TRAINING PROGRAMME**



Indicator Definition: Total number of queries answered by Advanced Treatment Information Centre (ATIC), formerly known as the AIDS Information Centre. Unit of Measure: Number Disaggregated by: None

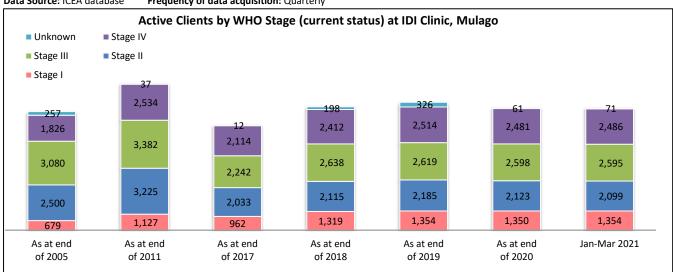
Data Source: ATIC database Frequency of data acquisition: Quarterly

Additional Notes: 1) Queries include calls from alumni and non-alumni, clinicians, clinical service support staff, laboratory staff and dispensing staff from over 20 countries. 2) Queries on therapeutics, drug interaction, adverse drug reactions and switching therapy. 3) Queries handled by the ATIC come in through phone, email and in person.



Indicator Definition: Total number of active clients in care (both Pre- ART and ART) at the IDI clinic, Mulago. Unit of Measure: Number Disaggregated by: Gender

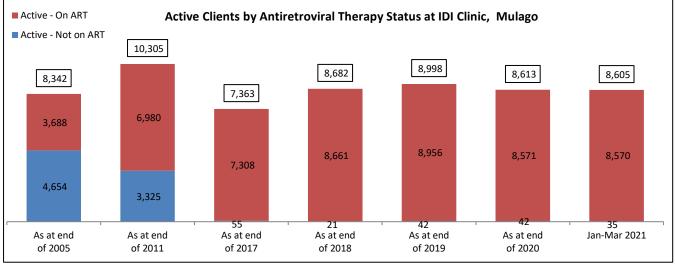
Data Source: ICEA database Frequency of data acquisition: Quarterly



Indicator Definition: Total number of active clients in care (both Pre- ART and ART) by WHO staging at the IDI clinic, Mulago. Unit of Measure: Number Disaggregated by: Stage I, II, III, IV, Unknown

 Data Source: ICEA database
 Frequency of data acquisition: Quarterly

Additional Notes: 1) Data reflects active client WHO stage at the most recent visit. 2) The number of patients with an unknown stage is often less than 5% of the total active clients at the end of each reporting period.

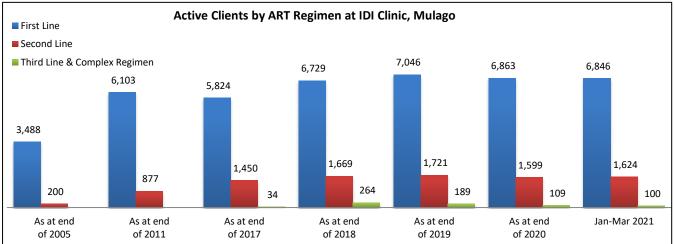


Indicator Definition: Total number of active clients by ART status in the IDI clinic, Mulago.

Unit of Measure: Number Disaggregated by: On ART, Not on ART

Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: The data reflects each active client's ART status at their most recent IDI visit.

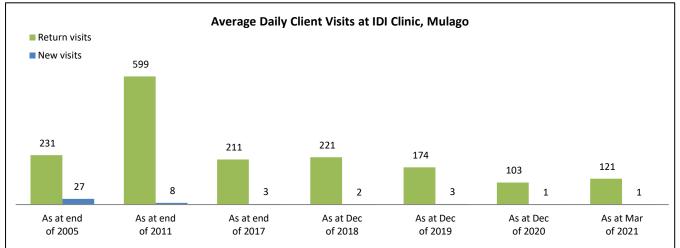


Indicator Definition: Total number of active ART clients by regimen in the IDI clinic, Mulago.

Unit of Measure: Number Disaggregated by: First line, second line, third Line & complex regimen

Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: 1<sup>st</sup> line: ART regimen given to a client at ART initiation; 2<sup>nd</sup> line: ART regimen given to a client non-responsive to 1<sup>st</sup> line regimen; 3<sup>rd</sup> line: ART regimen given a client non-responsive to 2<sup>nd</sup> line regimens; Complex: ART combinations given to a client non responsive to 1st, 2nd and 3rd line regimens.

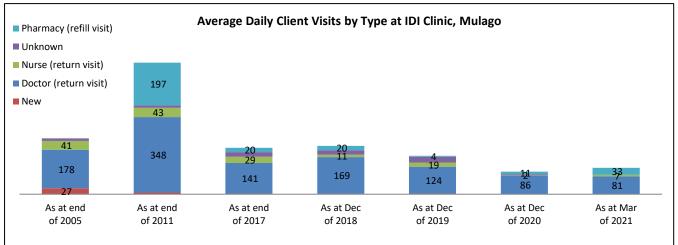


Indicator Definition: Average number of new client visits and daily return visits at the IDI clinic, calculated as a proportion of the total number of client visits and the number of days the IDI clinic, Mulago is open.

Unit of Measure: Number Disaggregated by: Type of visit

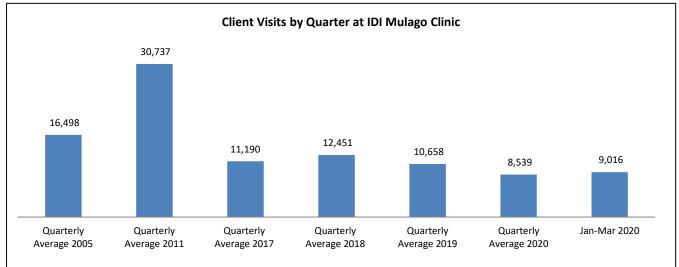
Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: New client visits exclude referrals from other health centers to IDI Mulago.

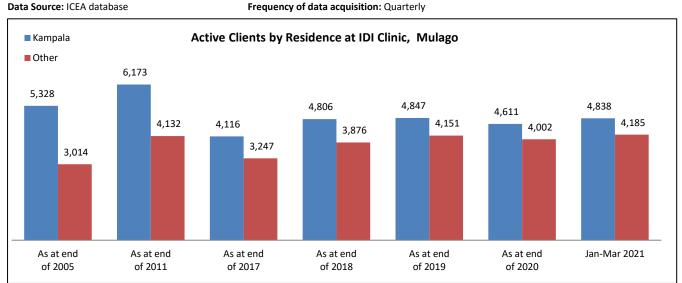


Indicator Definition: Average daily number of client visits at IDI clinic, calculated as a proportion of the total number of client visits by type and the number of weeks the IDI clinic, Mulago is open. Unit of Measure: Number Disaggregated by: *Type of Visit*: New, Return and Unknown; *Type of Service*: New; Return (doctor, pharmacy, nurse). Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: 1) New visits include comprehensive package (doctor, nurse, counsellor, pharmacy). 2) The introduction of 'nurse only' and 'pharmacy refill' visits contributes to lower health worker workload and shorter waiting times for clients. 3) From 2011 to 2012, the average daily clients at the IDI clinic who came for pharmacy refill visits reduced by half while a notable increase in those who returned to see a nurse and doctor was observed due to changes in case mix and the clinic's increasing focus on managing more complex patients.



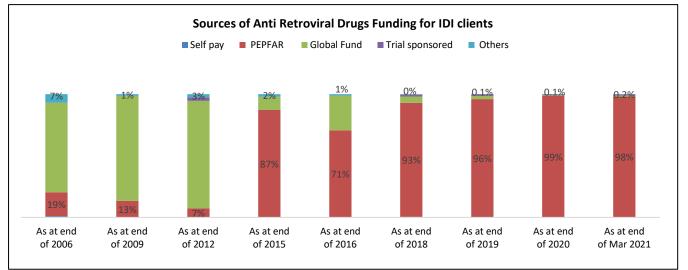
Indicator Definition: Average number of client visits at the IDI clinic in Mulago.
Unit of Measure: Number
Disaggregated by: IDI clinic Mulago
Data Source: ICEA database
Frequency of data acquisition: Qua



Indicator Definition: Total number of active clients in care (both Pre- ART and ART) at the IDI clinic, Mulago disaggregated by location of residence. Unit of Measure: Number Disaggregated by: Kampala, Other

Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: Quality of data is dependent on the accuracy of information provided by clients at the time of treatment.

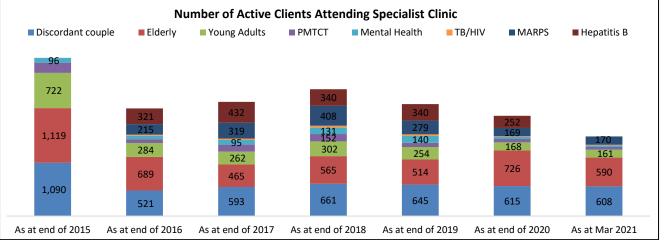


Indicator Definition: Percentage of contribution of funders for ARVs.

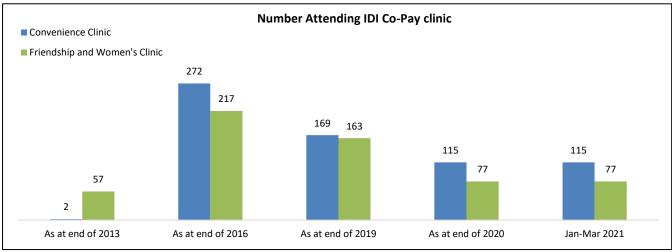
Unit of Measure: Percentage Disaggregated by: Self pay, PEPFAR, Global Fund, trail sponsored, others

Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: 1) ARVs are procured mainly by GFATMP and PEPFAR and supplied to the Ministry of Health. 2) IDI maintains a contingency budget in case of interruption of supply. 3) Figures below 1% are not displayed.



Indicator Definition: Number of active clients attending the IDI specialist clinics as a percentage of the total number of active clients in the reporting period.Unit of Measure: PercentageDisaggregated by: Specialist clinicsData Source: ICEA databaseFrequency of data acquisition: Quarterly



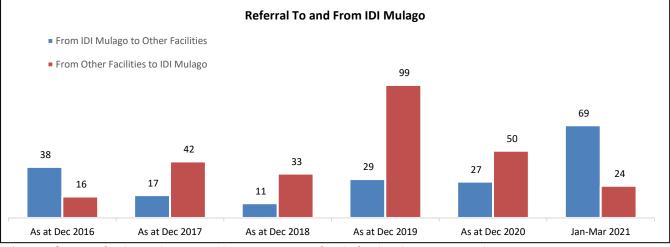
Indicator Definition: Number of active clients attending the IDI Co-Pay clinics

Unit of Measure: Number

Disaggregated by: Convenience clinic, Women's clinic, Friendship clinic

Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: Co-Pay clinics run 3 times a week, Monday (Convenience Clinic), Tuesday (Women's Clinic) and Wednesdays (Friendship Clinic). Token fee of Ugx 50,000 at 1<sup>st</sup> visit; Ugx 20,000 for the Convenience clinic, Ugx 35,000 for the Women's clinic, Ugx 35,000 for the Friendship clinic. Effective Jan-Mar 2017, the women's clinic was merged with the Friendship clinic

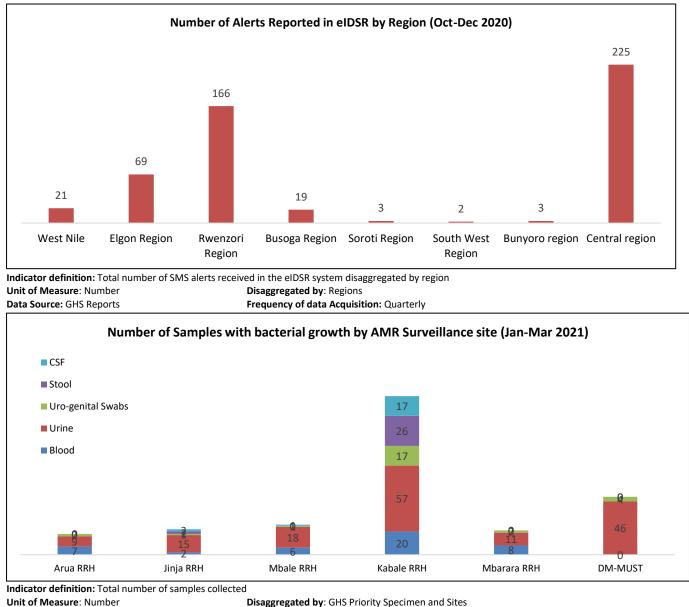


Indicator Definition: Referrals To and From IDI, Mulago as a percentage of total referrals in the reporting period.

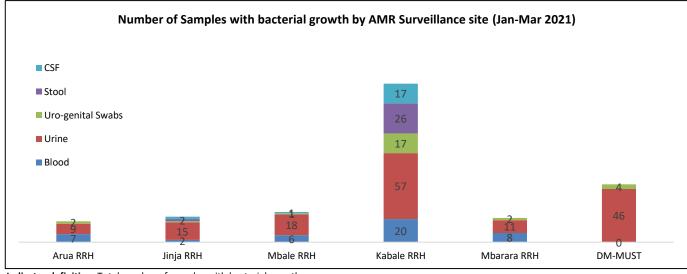
Unit of Measure: Number, Percentage Disaggregated by: Referral To, referral From Data Source: ICEA database Frequency of data acquisition: Quarterly

Additional Notes: Referrals to IDI Mulago are from: JCRC, KCCA, MUJHU Testing Program, Mulago Outpatient Dept. (VCT)/Mulago Medi, private clinics/private doctors, relative/friend/spouse, self-referral and others. Referrals From IDI are to: Alive medical center clinics, Baylor Uganda, Burundi, Butabika, ISS MJAP, JCRC, Kasana, Kasangati H/C, KCCA Kawempe, Kisenyi H/C, Kisubi Hospital, Kyantungo Health centre IV, Kyegegwa, Lacor Hospital, Mbarara Hospital, Mubende RRH, Naguru.

#### **IDI GLOBAL HEALTH SECURITY**



Frequency of data Acquisition: Quarterly



Indicator definition: Total number of samples with bacterial growth

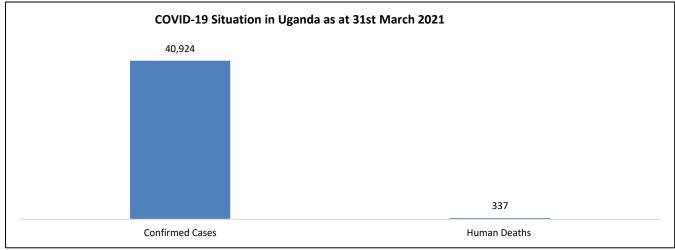
Disaggregated by: GHS Priority Specimen and Sites

Unit of Measure: Number Data Source: GHS Reports

Data Source: GHS Reports

Frequency of data Acquisition: Quarterly

#### **IDI GLOBAL HEALTH SECURITY: COVID-19**

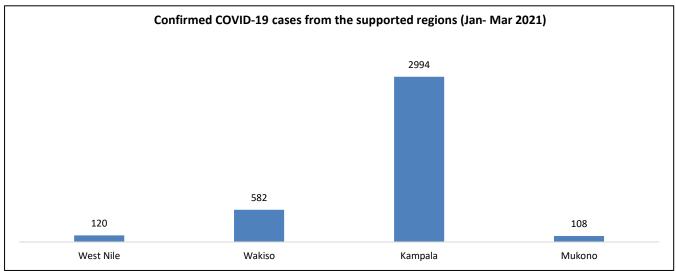


 Indicator definition:
 Total number of confirmed COVID-19 cases and deaths in Uganda.

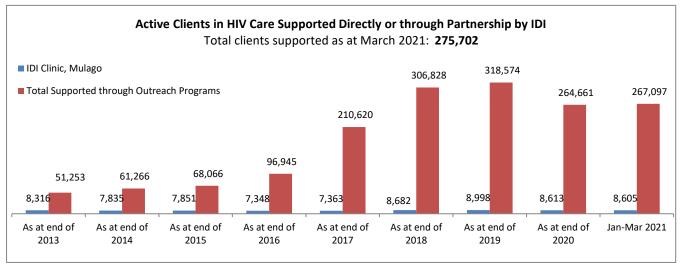
 Unit of Measure:
 Number

 Data Source:
 GHS Reports

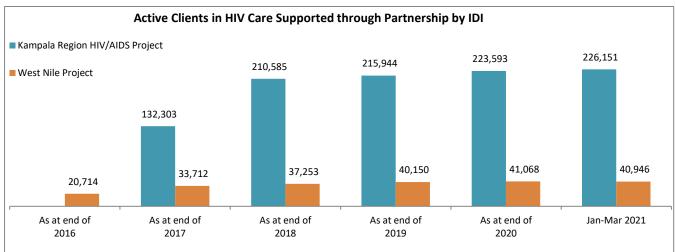
 Frequency of data acquisition:
 Quarterly



Indicator definition:Number of confirmed COVID-19 cases in IDI supported regions/districts.Unit of Measure:Disaggregated by:Data Source:GHS ReportsFrequency of data acquisition:Quarterly

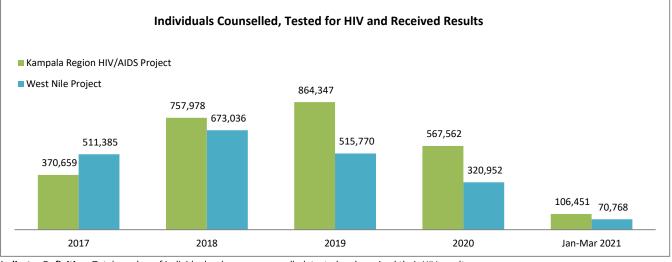


Indicator Definition: Total Number of active clients in HIV care (pre-ART and ART) directly supported or through partnership by IDI. Disaggregated by: IDI Clinic Mulago, Health Systems Strengthening Programmes Unit of Measure: Number Data Source: ICEA, Pre-ART and ART registers Frequency of data acquisition: Quarterly



Indicator Definition: Total Number of active clients in HIV care (pre-ART and ART) supported through partnership by IDI. Unit of Measure: Number Disaggregated by: West Nile, Kampala region Frequency of data acquisition: Quarterly

Data Source: ICEA, Pre-ART and ART registers

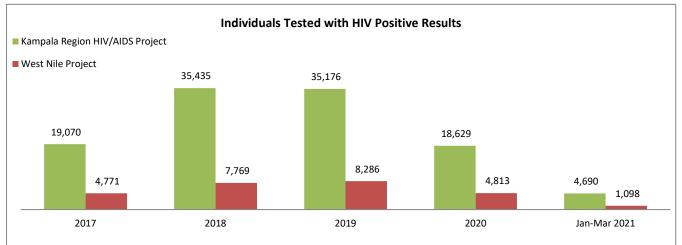


Indicator Definition: Total number of individuals who were counselled, tested and received their HIV results.

Unit of Measure: Number Disaggregated by: West Nile, Kampala region

Data Source: HCT registers Frequency of data acquisition: Quarterly

Additional Notes: 1) Successive calculations will assess the number of individuals tested as a proportion of estimated number of people living with HIV to accurately determine efforts towards achieving the global target of "95% of all people living with HIV know their status".

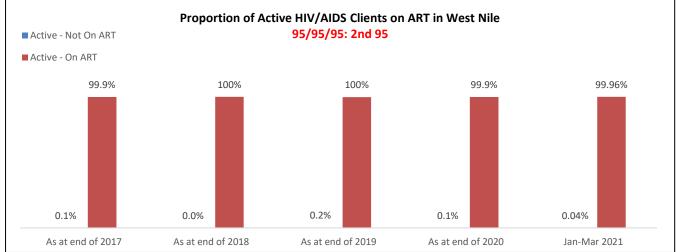


Indicator Definition: Total number of individuals counselled, tested and found HIV positive.

Unit of Measure: Number Disaggregated by: West Nile, Kampala region

Data Source: HCT registers Frequency of data acquisition: Quarterly

Additional Notes: 1) Successive calculations will assess the number of individuals tested as a proportion of estimated number of people living with HIV to accurately determine efforts towards achieving the global target of "95% of all people living with HIV know their status".

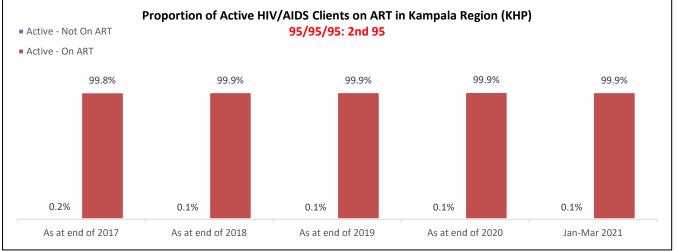


 Indicator Definition: Number of active clients in HIV care (on ART/Not on ART)
 as a proportion of total active clients in care in West Nile region of Uganda.

 Unit of Measure: Number
 Disaggregated by: On ART, not on ART

Data Source: Pre-ART and ART registers Frequency of data acquisition: Quarterly

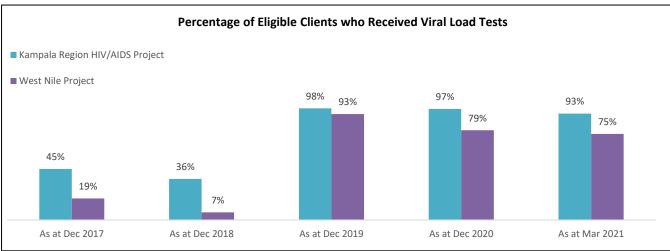
Additional Notes: Successive calculations will use the denominator 'all people diagnosed with HIV infection' to accurately determine efforts towards achieving the global target of "95% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy"



Indicator Definition: Number of active clients in HIV care (on ART/Not on ART) as a proportion of total active clients in care in Kampala region of Uganda.Unit of Measure: NumberDisaggregated by: On ART, not on ART

Data Source: Pre-ART and ART registers Frequency of data acquisition: Quarterly

Additional Notes: 1) Successive calculations will use the denominator 'all people diagnosed with HIV infection' to accurately determine efforts towards achieving the global target of "95% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy"

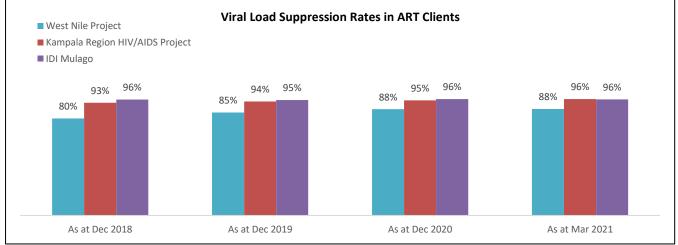


Indicator Definition: Percentage of eligible clients who received viral load tests in the reporting period

Unit of Measure: Percentage Disaggregated by: West Nile, Kamapala-Wakiso

Data Source: UNHLS/CPHL VL Dashboard Frequency of data acquisition: Quarterly

Additional Notes: 1). Viral load testing has been expanded in all IDI supported programs in order to contribute to the achievement of the third UNAIDS "95" of 95% of all PLHIV on ART virally suppressed. 2) Data is retrieved from the Uganda National Health Laboratory (UNHLS) viral load dashboard.

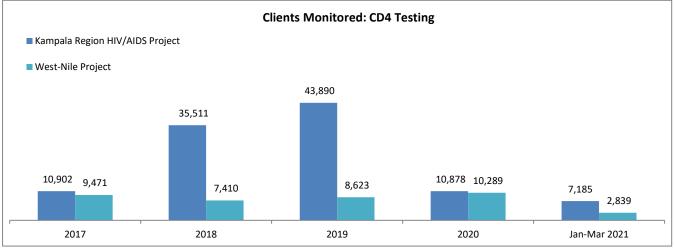


Indicator Definition: Number of clients whose VL (HIV RNA) reduced to undetectable level as a proportion of total number of clients tested.

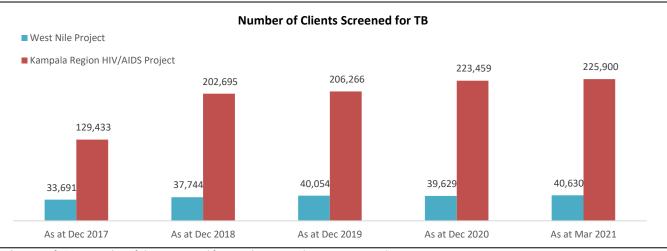
Unit of Measure: Percentage Disaggregated by: Kampala, West Nile, IDI Mulago

#### Data Source: CPHL VL Dashboard Frequency of data acquisition: Quarterly

Additional Notes: 1). Monitoring of viral load suppression rates has been expanded in all IDI supported programs in order to contribute to the achievement of the third UNAIDS "95" of 95% of all PLHIV on ART virally suppressed 2) Data is retrieved from the Uganda National Health Laboratory (UNHLS) viral load dashboard. 3).



Indicator Definition: Total number of HIV positive clients who had CD4 count tests done in the Kampala region and the 8 districts in West Nile.Unit of Measure: NumberDisaggregated by: Kampala, West NileData Source: HCT registersFrequency of data acquisition: Quarterly

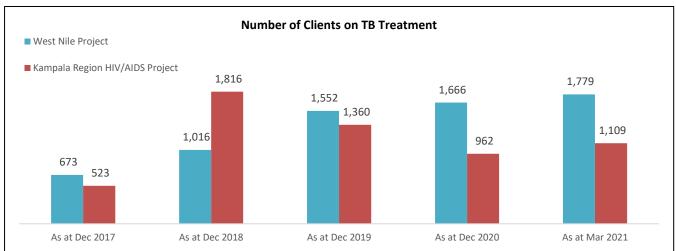


Indicator Definition: Number of clients screened for TB at last visit in the reporting period

Unit of Measure: Number

Disaggregated by: Kampala, West Nile Data Source: Health Systems Strengthening Database Frequency of data acquisition: Quarterly

Additional notes: 1). Data is aggregated from both the TB and HIV pre-ART and ART registers.

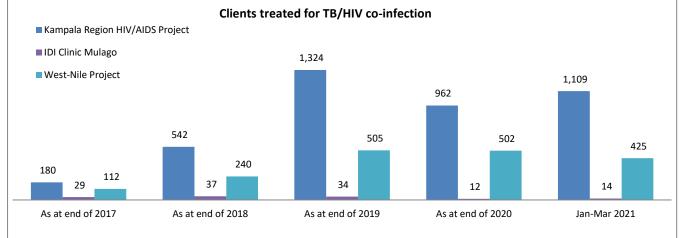


Indicator Definition: Number of clients on TB treatment at the end of the reporting period.

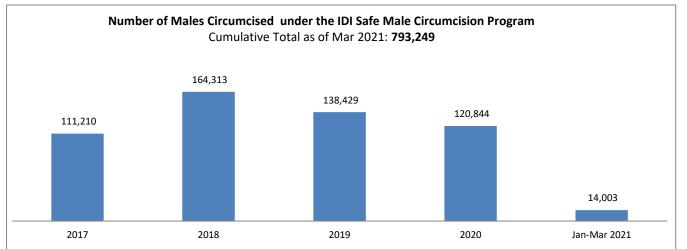
Unit of Measure: Number Disaggregated by: Kampala, West Nile

Data Source: Health Systems Strengthening Database Frequency of data acquisition: Quarterly

Additional notes: 1). Data is aggregated from both the TB and HIV pre-ART and ART registers.

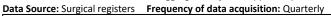


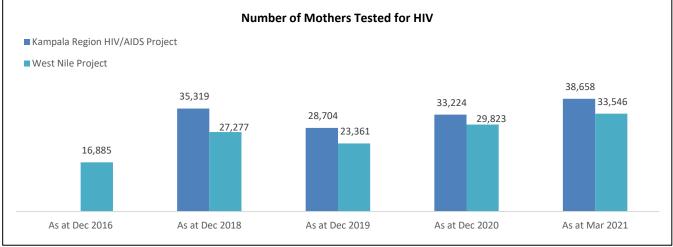
Indicator Definition: Total number of clients treated for TB/HIV co-infection in the KCCA clinics, the EKKP districts, the IDI Clinic Mulago Unit of Measure: Number Disaggregated by: KCCA, 7 Western districts, West Nile, IDI Clinic Mulago, CSF projects Data Source: HCT registers Frequency of data acquisition: Quarterly



Indicator Definition: Total number of males > 13 enrolled and circumcised under the IDI safe male circumcision programme (AMAKA). Before 2014, males above 13 were circumcised. This minimum age has been revised to 10 years as per the CDC guidelines.

Unit of Measure: Number Disaggregated by: IDI-supported public health facilities, IHK (till Dec 2014)

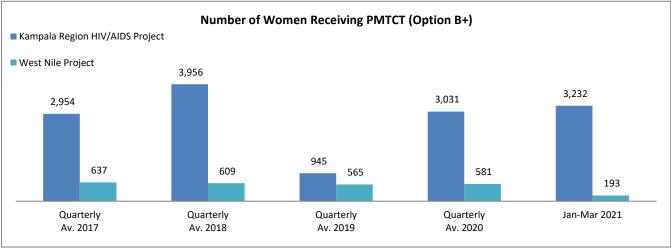




Indicator Definition: Number of mothers attending ANC tested for HIV in the reporting period.

 Unit of Measure: Number
 Disaggregated by: Kampala and West Nile Regions

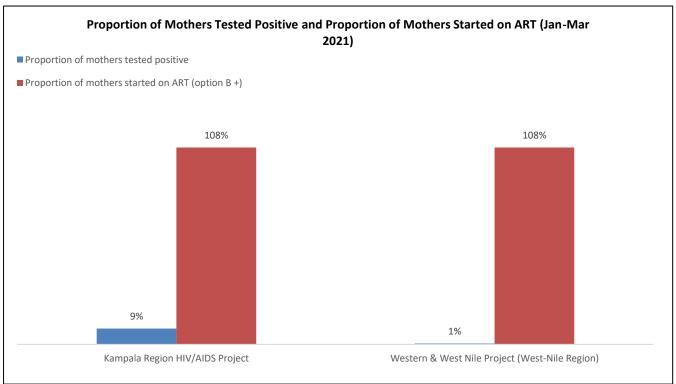
 Data Source: Health Systems Strengthening Database
 Frequency of data acquisition: Quarterly



Indicator Definition: Cumulative number of women receiving PMTCT (Option B+) in the KCCA, 7 Western districts and West Nile HIV/AIDS project clinics.Unit of Measure: NumberDisaggregated by: Kampala and West Nile Regions

Data Source: DHIS2 Frequency of data acquisition: Quarterly

Additional Notes: 1). There's a drop in figures in 2015 due to change of definition for women receiving Option B+: previous definition – all women receiving PMTCT/ Option B+ who are active in the reporting period and their care entry point is PMTCT; new definition – women who are newly initiated on ART plus those who are already on ART but pregnant during this period.

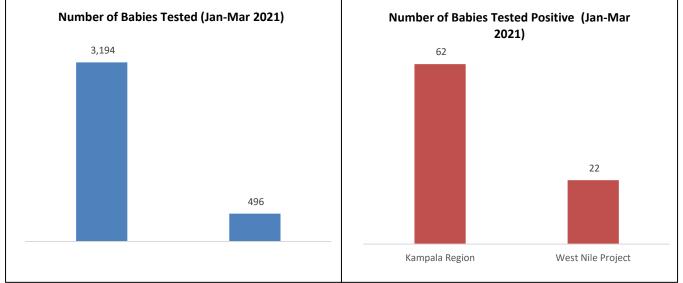


Indicator Definition: Proportion of mothers counselled, tested with HIV positive results and Proportion of mothers out of those tested positive who started on ART treatment (Option B+).

Unit of Measure: Number

Data Source: Health Systems Strengthening Database

Disaggregated by: Kampala and West Nile Regions Frequency of data acquisition: Quarterly



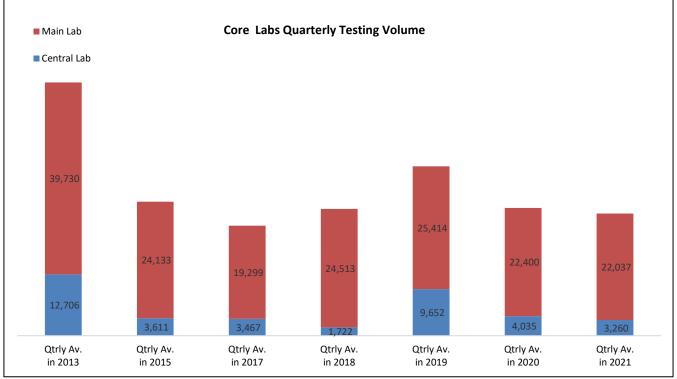
Indicator Definition: Number of babies tested for HIV and number of babies tested HIV positive

Unit of Measure: Number Disaggregated by: Kampala and West Nile Regions

 Data Source: Health Systems Strengthening Database
 Frequency of data acquisition: Quarterly

Additional Notes: For the testing of babies at 18 months the results for DNA PCR 1 and not for DNA PCR2 were used. According to the national guidelines DNA PCR1 should be conducted 6 weeks after cessation of breast feeding and then DNA PCR 2 at 18 months, however, in practice mothers will receive DNA PCR 1 even at 18 months and many do not come back for DNA PCR 2. Hence DNA PCR 1 is a better pointer for the HIV positivity rates among infants.

#### **IDI LABORATORY PROGRAMME**



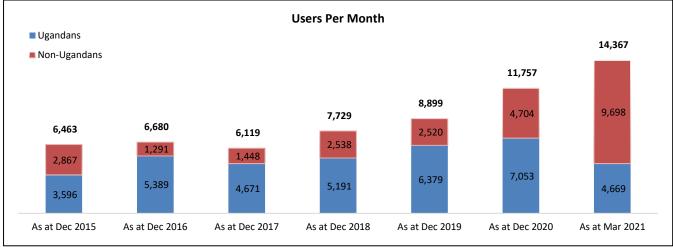
Indicator Definition: Total number of tests done at the IDI core and Central labs over the years. Unit of Measure: Number Disaggregated by: Core lab, central labs

Data Source: Core and Central laboratories

Frequency of data acquisition: Quarterly and annual Additional notes: From 2016, the central lab was combined with the stat lab and the side lab

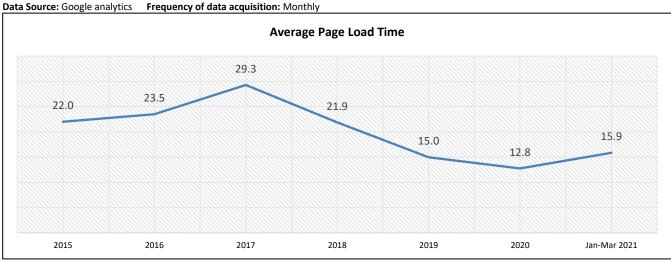
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#### **IDI WEB PRESENCE**



 Indicator Definition: Number of the people who use the IDI website per month disaggregated by location.

 Unit of Measure: Number
 Disaggregated by: Ugandans, non-Ugandans



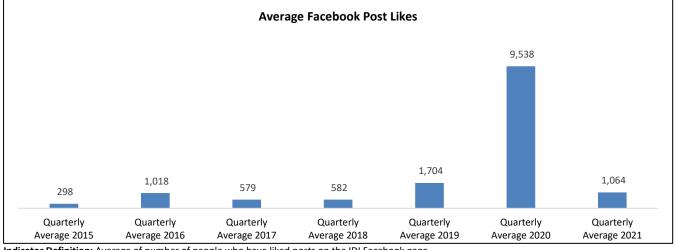
Additional Notes: There's an increase of website use in Jan-Mar 2016 due to job postings of over 20 job opportunities

Indicator Definition: The average amount of time (in seconds) it takes for the IDI web page to load, from initiation of the page view (e.g., click on a page link)4 to load completion in the browser.

Unit of Measure: Time Disaggregated by: None

Data Source: Google analytics Frequency of data acquisition: Monthly

Additional Notes: An archived website was deleted from the server in September 2014; downtime occurred during a switch in providers in February 2015.



Indicator Definition: Average of number of people who have liked posts on the IDI Facebook page.

Unit of Measure: Average Disaggregated by: None

Data Source: Facebook insights Frequency of data acquisition: Quarterly

Additional Notes: Increase of facebook likes in Jul-Sept 2018 was mainly due to AIDS Conference in Amsterdam, CDC High Level delegation visit IDI supported sites in the West Nile Region of Uganda, Voluntary Blood donation by IDI-Makerere staff and Bio-informatics (building capacity).

## ANNEX

### IDI COVERAGE IN UGANDAN DISTRICTS BY JUNE 2020 58% COVERAGE

