

Transforming TB & HIV Prevention Care and Treatment in Prisons (TACT)

1. PROJECT GOAL

Strengthening capacity of the Kenya Prisons Services (KPS) to deliver a KPS-led and -managed high quality comprehensive HIV and TB prevention, care and treatment program, serving prison staff, their families, and inmates.

Strategic Objectives

- a) Provision of capacity at KPS to plan, implement, evaluate, and manage a USG-funded grant for comprehensive HIV and TB prevention, care and treatment services.
- b) Provision of evidence-based combination HIV prevention services to target population
- c) Provision of comprehensive HIV care and treatment services to HIV-infected to target population
- d) Provision of TB prevention and treatment services to target population
- e) Monitoring and evaluation program performance

2. KEY PROJECT HIGHLIGHTS

a) Systems Strengthening for Transition & Sustainability

- KPS's financial and internal control systems were and strengthened to comply with USG funding requirement
- Improved KPS leadership capacity to provide oversight and technical leadership for the HIV and TB services
- New Competency Model for health providers capacity to recruit and deployment of new clinical staff at facility levels, plugging staffing gaps and developing highly qualified technical staff to provide technical oversight in support of TACT at regional and national levels.
- Resource planning through **Twinning model**-rapid and effective skills and knowledge transfer through training and mentorship during real-time project implementation, resulting in KPS ownership of project implementation and reporting.
- Strengthening capacity in KPS in readiness towards self-reliance post donor transition
- Leveraging county systems for commodity supplies and HRH
- Advocacy
 - Increasing the direct government of Kenya (GOK)/KPS investments in HIV service delivery, in strengthening the health system
 - HS advocacy for recruitment of new healthcare workers (HCWs) resulting in Increased staffing for the AIDS Control Unit (ACU) from 110 in 2014 to 192 in 2018.

b) Improved Access to TB & HIV services among target population

- Improved access to and uptake of HIV and TB service
- KPS health facilities offering comprehensive HIV care and treatment services increased from 27 in 2014 to 42 in 2018 for improved linkage to treatment and expanded health service delivery.
- 90% of inmates receive HIV testing and counseling within 2 weeks of prison entry, with a resultant yield of 8% for female inmates and 3.2% for male inmates (KPS/MOH)

- Clients currently on ART increased from 3,008 in 2014, to 8,280 in 2019

3. PROJECT PARTNERS & ROLES

PARTNER	ROLE
Health Strat	Prime and accountable to CDC/PEPFAR for reporting, financial management, compliance
Kenya Prisons Service	Transition partner providing HIV and TB policies and protocols for KPS staff and inmates
Deloitte (up to 2017)	capacity building for KPS (systems and structures) for grant management
University of Maryland Programs (UMB) in Kenya (up to 2016)	Conceptualizing key strategies, technical capacity development in continuous quality improvement and longitudinal care

****Deloitte and UMB have since been transitioned out and their roles taken up by HS and KPS.

- **Other partners** – Ministry of Health, County Health Leadership teams

Collaboration mechanism: partnership frameworks and implementation plans developed to clarify roles among IPs, including PEPFAR (USAID and DOD-funded) and GF-funded IPs, CSOs, and