Oral PrEP Introduction Planning Toolkit

STEP 4: READINESS ASSESSMENT
About this toolkit

**WHAT IS THE PURPOSE AND CONTENTS OF THIS TOOLKIT?**

- This toolkit was developed and used by the OPTIONS Consortium to support planning for the introduction of oral PrEP for HIV prevention in Kenya, Zimbabwe and South Africa.
- This toolkit is designed to help users in other countries plan for the introduction of oral PrEP

**WHO SHOULD USE THIS TOOLKIT?**

This toolkit will be most relevant for:

- **National governments and ministries of health/HIV agencies** to inform national and regional oral PrEP rollout and provide high-level guidance to counties/districts on what factors should be considered to ensure they are prepared to rollout oral PrEP

- **Implementing organizations (e.g., NGOs)** to understand national and regional needs related to PrEP delivery and to support effective resource allocation

- **Donors (e.g., USAID)** to initially scope country-specific needs and resource requirements

**HOW COULD THE TOOLKIT BE MORE USEFUL?**

If you have thoughts, feedback, questions, requests for additional information or other resources that you would like to add to this toolkit, please contact us at info@PrEPNetwork.org.

Please acknowledge USAID/OPTIONS with use of this toolkit.
Value Chain for oral PrEP Introduction

The templates, frameworks and tools included in this toolkit are organized along a simplified oral PrEP “value chain” that charts what is needed for national and subnational introduction of oral PrEP through five major stages, from initial planning through to uptake and ongoing monitoring.

While this toolkit is intended to support users primarily with the first stage of the value chain: planning, it is important to analyze assets and gaps at each stage to inform a comprehensive and robust planning process. This framework can also be adapted for other HIV prevention products.

<table>
<thead>
<tr>
<th>Value Chain for oral PrEP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PLANNING AND BUDGETING</strong></td>
</tr>
<tr>
<td>Plan developed to implement WHO oral PrEP guidelines for end user populations</td>
</tr>
<tr>
<td><strong>SUPPLY CHAIN MANAGEMENT</strong></td>
</tr>
<tr>
<td>Oral PrEP produced, purchased, and distributed in sufficient quantity to meet projected demand</td>
</tr>
<tr>
<td><strong>PREP DELIVERY PLATFORMS</strong></td>
</tr>
<tr>
<td>Oral PrEP services delivered through appropriate channels with access to end user populations</td>
</tr>
<tr>
<td><strong>INDIVIDUAL UPTAKE</strong></td>
</tr>
<tr>
<td>End user populations seek and are able to access oral PrEP and begin use</td>
</tr>
<tr>
<td><strong>EFFECTIVE USE &amp; MONITORING</strong></td>
</tr>
<tr>
<td>End users adhere to PrEP in recommended frequency and time period; use is effectively monitored</td>
</tr>
</tbody>
</table>
This is the fourth tool in a series of six:

<table>
<thead>
<tr>
<th>No.</th>
<th>Tool</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SITUATION ANALYSIS</td>
<td>Understand current context for oral PrEP - Identify existing assets, gaps, challenges, and key questions for PrEP rollout - Develop a landscape of key stakeholders and ongoing efforts</td>
</tr>
<tr>
<td>2</td>
<td>PROJECT LANDSCAPE</td>
<td>Assess findings &amp; gaps in projects - Survey current and planned studies and implementation projects - Identify key questions to inform implementation and assess gaps</td>
</tr>
<tr>
<td>3</td>
<td>ROLLOUT SCENARIOS</td>
<td>Inform where and how to rollout PrEP - Define rollout scenarios that differ by counties/districts or population groups - Highlight considerations and trade-offs between different scenarios</td>
</tr>
<tr>
<td>4</td>
<td>DISTRICT READINESS ASSESSMENT</td>
<td>Assess district readiness for oral PrEP - Assess district/county readiness to introduce and scale oral PrEP - Support sub-national planning for oral PrEP rollout and scale-up</td>
</tr>
<tr>
<td>5</td>
<td>FACILITY READINESS ASSESSMENT</td>
<td>Assess facility readiness for oral PrEP - Assess the readiness of healthcare facilities to deliver oral PrEP - Identify areas that require additional investment</td>
</tr>
<tr>
<td>6</td>
<td>PRIVATE SECTOR ASSESSMENT</td>
<td>Identify opportunities for oral PrEP in the private sector - Understand if private sector channels could expand PrEP access - Compare across channels for ability to effectively deliver PrEP</td>
</tr>
</tbody>
</table>
READINESS ASSESSMENT
Overview of contents

This tool helps decision-makers assess readiness to deliver oral PrEP at the sub-national level (e.g., for districts, counties, or states). This can be used as a tool to enable assessments and comparisons across regions or as a self-assessment tool for decision-makers at the regional level to identify assets and gaps for oral PrEP delivery. While evidence of readiness for oral PrEP delivery is still early and incomplete, this analysis was developed based on hypotheses for what factors could indicate readiness.

SLIDES 7 - 9
Data collection table with key indicators along the oral PrEP value chain

Guide data collection on key indicators across districts / counties to inform a high-level assessment of local readiness to deliver oral PrEP

SLIDES 11 – 15
Templates to synthesize and present collected data

Provide a high level snapshot of readiness for each county/district along the PrEP value chain, highlighting areas of strength and gaps to address in preparation for PrEP rollout
To guide data collection for the readiness assessment, users will need to define a set of readiness factors and decide how to assess or score counties / districts on those factors.

- Readiness factors should be identified by considering what assets across the value chain will be critical to deliver oral PrEP to target users. While this is not fully known for oral PrEP, there are some hypotheses for what factors are indicative of readiness for oral PrEP delivery included here.
- Selecting ~10 – 15 factors should provide enough information without making the exercise too complex
- Factors can be either quantitative or qualitative, but should include information / data that is easy to collect
- Defining how to assess counties/districts will require setting thresholds for each factor to define what “strong,” “moderate,” or “weak” performance would be for the delivery of oral PrEP.

This process can be done by one central organization or as part of a broader stakeholder consultation (e.g., through a national technical working group as was done in Kenya).

Guidance for this process is included on the following slides and in a related Excel file.
READINESS ASSESSMENT
Sample Indicators

PLANNING AND BUDGETING
- County political will to introduce PrEP
- County engagement in the oral PrEP planning process
- Funding for HIV prevention and treatment

SUPPLY CHAIN MANAGEMENT
- HIV prevention commodity management (stockouts)
- Plan for integration of oral PrEP into the local supply chain

PREP DELIVERY PLATFORMS
- Experience with oral PrEP delivery (# of users involved in studies/implementation projects)
- Sufficient oral PrEP delivery capacity (HTC site coverage)
- Capacity to reach end user populations

INDIVIDUAL UPTAKE
- Likely oral PrEP demand (Uptake of HIV testing)
- Likely oral PrEP demand (Uptake of ART services)
- Presence of HIV communication
- Knowledge of HIV prevention methods
- Uptake of PEP
- Uptake of STI services
- Uptake of family planning services

EFFECTIVE USE & MONITORING
- Likely PrEP adherence (Viral load suppression)
- Environment conducive to effective use of oral PrEP (Stigma Index)
- Presence of NGO programs
- Monitoring system to support data collection and ongoing learning

**Bold indicators** represent key indicators to assess county PrEP delivery readiness

**Italicized indicators** represent additional indicators to aid county level PrEP planning

Sample readiness factors that could be included
See Excel file linked on next slide for additional detail
Additional guidance on readiness factors, definitions, and thresholds is included in the related Excel file that can be found here.

The Excel file also includes a template for county / district data collection.

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>FACTOR</th>
<th>POTENTIAL INDICATOR (s)</th>
<th>IMPLICATION FOR &quot;READINESS&quot; TO DELIVER ORAL PREP</th>
<th>POTENTIAL DATA SOURCE(s)</th>
<th>ASSESSMENT: WEAK / MAY NEED INVESTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Planning and</td>
<td>1A: County political will to introduce PreP</td>
<td>Inclusion of PreP in county HIV strategy document and prioritization of at risk populations in county strategy</td>
<td>Counties with PreP included in strategic plan may be more likely and able to incorporate PreP into their HIV prevention planning processes</td>
<td>County HIV strategy document; Interviews with CASCOP</td>
<td>No Interest in including</td>
</tr>
<tr>
<td>Budgeting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1B: County engagement in the PreP planning process</td>
<td>Engagement with key political and community leaders and potential PreP users in planning, implementation and monitoring of PreP delivery</td>
<td>Counties with greater engagement of key community leaders may be able to more effectively plan for PreP delivery</td>
<td>Interviews with county executive or health and county health director; Office of controller of budgets; National/County, financial audit reports</td>
<td>No Interest in engagement</td>
</tr>
</tbody>
</table>

**Thresholds have been defined for use.**

Note: Some thresholds include both quartiles.
The following slides include templates to assess and score counties based on the defined set of readiness factors.

This assessment can be done for an individual county (Slides 12 – 14)

Or this assessment can be conducted across counties. (Slide 15)

Included are examples of both types of assessments for select counties in Kenya. (Slides 16 – 17)
### Key indicators to assess county/district oral PrEP delivery readiness

**Note:** These “key indicators” are designed to be primarily quantitative so that they are (1) easy to compile and (2) easy to compare across counties.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PLANNING &amp; BUDGETING</strong></td>
<td>County/district political will to introduce oral PrEP&lt;br&gt;Indicator: Oral PrEP included in county/district HIV plan</td>
</tr>
<tr>
<td><strong>SUPPLY CHAIN MANAGEMENT</strong></td>
<td>HIV prevention commodity management&lt;br&gt;Indicator: Incidence of ARV and/or test kit stockouts</td>
</tr>
<tr>
<td><strong>PREP DELIVERY PLATFORMS</strong></td>
<td>Experience with PrEP delivery&lt;br&gt;Indicator: # of oral PrEP users reached by studies/projects&lt;br&gt;<strong>Sufficient oral PrEP delivery capacity</strong>&lt;br&gt;Indicator: Coverage of HIV testing, ART&lt;br&gt;<strong>Capacity to reach target populations</strong>&lt;br&gt;Indicator: Coverage of relevant delivery channels</td>
</tr>
<tr>
<td><strong>INDIVIDUAL UPTAKE</strong></td>
<td>Likely oral PrEP demand&lt;br&gt;Indicator: Uptake of HIV testing and ART</td>
</tr>
<tr>
<td><strong>EFFECTIVE USE &amp; MONITORING</strong></td>
<td>Likely oral PrEP adherence&lt;br&gt;Indicator: rates of viral suppression&lt;br&gt;<strong>Environment conducive to effective use of oral PrEP</strong>&lt;br&gt;Indicator: HIV Stigma Index</td>
</tr>
</tbody>
</table>

**COLOR KEY**
- **Strong**
- **Moderate**
- **Weak**
- **No data**

Score each of the factors according to the color key and then average the factors to form an overall assessment. Scoring helps effectively compare across regions.
### READINESS ASSESSMENT

### Additional Readiness Factors Along Value Chain

**Note:** These additional indicators (in blue) are a mix of quantitative and qualitative data. They can inform planning but would be difficult to compare easily across counties.

<table>
<thead>
<tr>
<th>PLANNING &amp; BUDGETING</th>
<th>SUPPLY CHAIN MANAGEMENT</th>
<th>PREP DELIVERY PLATFORMS</th>
<th>INDIVIDUAL UPTAKE</th>
<th>EFFECTIVE USE &amp; MONITORING</th>
<th>Readiness of county/district to deliver PrEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>County/district political will to introduce PrEP</td>
<td>HIV prevention commodity management</td>
<td>Experience with oral PrEP delivery</td>
<td>Likely oral PrEP demand</td>
<td>Likely oral PrEP adherence</td>
<td>OVERALL ASSESSMENT</td>
</tr>
<tr>
<td>Funding for HIV prevention and treatment</td>
<td></td>
<td>Capacity to reach target populations (DICES, SRH, CCCs)</td>
<td>Knowledge of HIV prevention methods</td>
<td>Presence of NGO programs</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Coverage of SRH and family planning services</td>
<td>Uptake of PEP</td>
<td>Monitoring system to support data collection and ongoing learning</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Healthcare worker training and support</td>
<td>Uptake of STI services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**These additional factors (in blue) may support planning but some will likely be difficult to quantify.**
READINESS ASSESSMENT
County/District Profile

PrEP Rollout Approach

<table>
<thead>
<tr>
<th>County/District:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Incidence</td>
<td>Incidence level: HIGH/MEDIUM/LOW (% incidence, # of annual new HIV infections)</td>
</tr>
<tr>
<td>County Readiness</td>
<td>County/District readiness level based on scoring below: STRONG/MODERATE/WEAK</td>
</tr>
</tbody>
</table>

County/District Readiness Assessment

**PLANNING & BUDGETING**
- County/district political will to introduce PrEP
- HIV prevention commodity management

**SUPPLY CHAIN MANAGEMENT**
- Experience with oral PrEP delivery
- # of PrEP users involved in studies/projects
- Sufficient oral PrEP delivery capacity
- HTC site coverage
- Capacity to reach target populations

**PREP DELIVERY PLATFORMS**
- Likely oral PrEP demand
- Uptake of HIV testing
- Likely oral PrEP demand
- Uptake of ART services

**INDIVIDUAL UPTAKE**
- Likely PrEP adherence
- Rate of viral suppression
- Environment conducive to effective PrEP use
- Stigma Index

**EFFECTIVE USE & MONITORING**
- Readiness of county/district to deliver PrEP

**OVERALL ASSESSMENT**

**COLOR KEY**
- Strong
- Moderate
- Weak
- No data

Key Findings
- Include key findings here

One option for sharing the collected information and assessment is to have a one-page profile of each county, shown here.
## READINESS ASSESSMENT
Readiness Score Assessment – Comparison Across Counties

**Readiness indicators for select counties**

<table>
<thead>
<tr>
<th>Plan/Budget</th>
<th>Supply Chain</th>
<th>Delivery Platforms (Coverage of potential PrEP delivery sites)</th>
<th>Individual Uptake (Uptake of HIV services)</th>
<th>Effective Use (ART adherence + stigma)</th>
<th>Overall Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metric #1</td>
<td>Metric #2</td>
<td>Metric #3</td>
<td>Metric #4</td>
<td>Metric #5</td>
<td>Metric #6</td>
</tr>
<tr>
<td>COUNTY 1</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td>COUNTY 2</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
<tr>
<td>COUNTY 3</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
<td>#</td>
</tr>
</tbody>
</table>

**COLOR KEY**
- Strong
- Moderate
- Weak
- No data

Note: Thresholds were defined by segmenting data on each indicator into quartiles across all counties. 1\textsuperscript{st} quartile = strong (3 points); 2\textsuperscript{nd} quartile = moderate (2 points); 3\textsuperscript{rd} quartile = weak (1 point); 4\textsuperscript{th} quartile = weak (0 points).

A second option to share assessment data is to compare key indicators across several districts/counties.
**Overview**

**County/District:** Homa Bay

**HIV Incidence**
HIGH (2% incidence, 9.6K annual new infections)

**County Readiness**
STRONG

**County/District Readiness Assessment**

<table>
<thead>
<tr>
<th>PLANNING &amp; BUDGETING</th>
<th>SUPPLY CHAIN MANAGEMENT</th>
<th>PREP DELIVERY PLATFORMS</th>
<th>INDIVIDUAL UPTAKE</th>
<th>EFFECTIVE USE &amp; MONITORING</th>
<th>Readiness of county to deliver PrEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>County/district political will to introduce PrEP</td>
<td>HIV prevention commodity management</td>
<td>Experience with PrEP delivery</td>
<td>Likely PrEP demand</td>
<td>Likely PrEP adherence</td>
<td>OVERALL ASSESSMENT</td>
</tr>
<tr>
<td>Sufficient PrEP delivery capacity</td>
<td>HTC site coverage</td>
<td>Uptake of HIV testing</td>
<td>Rate of viral suppression</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capacity to reach target populations</td>
<td>DICES coverage</td>
<td>Likely PrEP demand</td>
<td>Environment conducive to effective PrEP use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to reach key populations</td>
<td>SRH coverage</td>
<td>Uptake of ART services</td>
<td>Stigma Index</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to reach women and AGYW</td>
<td>CCC coverage</td>
<td>to reach sero-discordant couples</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Key Findings**

- Homa Bay has high overall readiness to deliver PrEP amongst other HIV prevention interventions
- Low uptake of ART relative to other counties suggests that additional investment in demand generation may be needed
- In addition, if SRH services are a priority channel to reach AGYW, additional capacity may be needed

**COLOR KEY**

- Strong
- Moderate
- Weak
- No data

**OVERALL ASSESSMENT**

**Strong**
### KEY TAKEAWAYS

- Homa Bay has the most favorable characteristics among the three counties, although relatively low ART uptake may signal need for strong demand generation to accompany oral PrEP introduction and investment in SRH services may be needed if oral PrEP is to be added to that delivery channel.
- Nairobi largely scores moderate across indicators although the low # of DICEs may be a challenge given the likely focus on key populations.
- Nakuru has the lowest scores across indicators and may require greater investment in delivery capacity.

### Readiness Indicators for Select Counties

<table>
<thead>
<tr>
<th></th>
<th>Plan/Budget</th>
<th>Supply Chain</th>
<th>Delivery Platforms (Coverage of potential oral PrEP delivery sites)</th>
<th>Individual Uptake (Uptake of HIV services)</th>
<th>Effective Use (ART adherence + stigma)</th>
<th>Overall Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Progress on plan</td>
<td>Stockout freq.</td>
<td>Demo project reach (#)</td>
<td>15+ pop. per HTC site</td>
<td>Key pop. per DICE</td>
<td>15+ pop. per SRH site</td>
</tr>
<tr>
<td>HOMA BAY</td>
<td>3,499</td>
<td>8,399</td>
<td>701</td>
<td>2,473</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAIROBI</td>
<td>2,410</td>
<td>15,105</td>
<td>1,705</td>
<td>3,101</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAKURU</td>
<td>0</td>
<td>15,416</td>
<td>2,805</td>
<td>3,005</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**COLOR KEY**
- Strong
- Moderate
- Weak
- No data

**Note:** Thresholds were defined by segmenting data on each indicator into quartiles across all counties. 1st quartile = strong (3 points); 2nd quartile = moderate (2 points); 3rd quartile = weak (1 point); 4th quartile = weak (0 points).