# Progress on DMOC in South Africa

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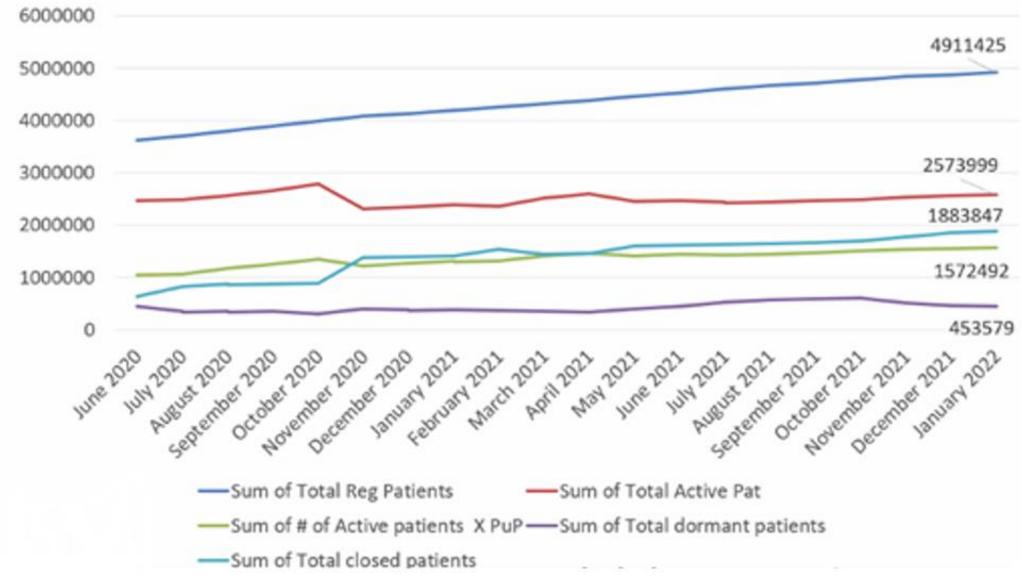
Division of Global HIV & TB



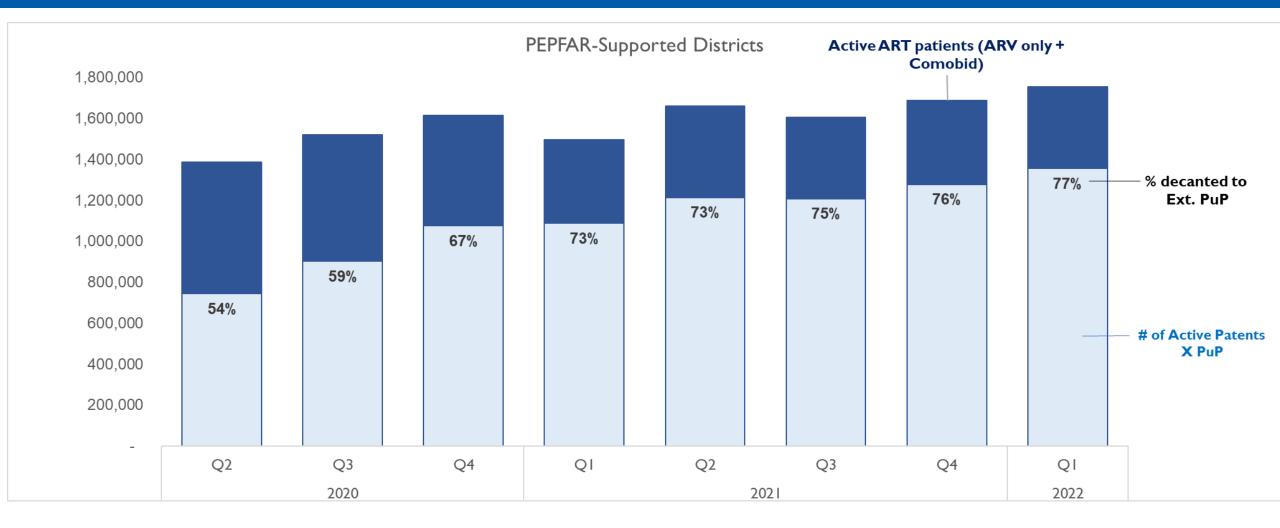
## Outline

- National overview of CCMDD
- CCMDD progress amongst PLHIV
- CCMDD and 3MMD update
- Barriers and potential solutions to progress
  - ➢ Reducing dormant and increasing active through SyNCH
  - >TLD to TEE transitions in CCMDD
- Conclusion

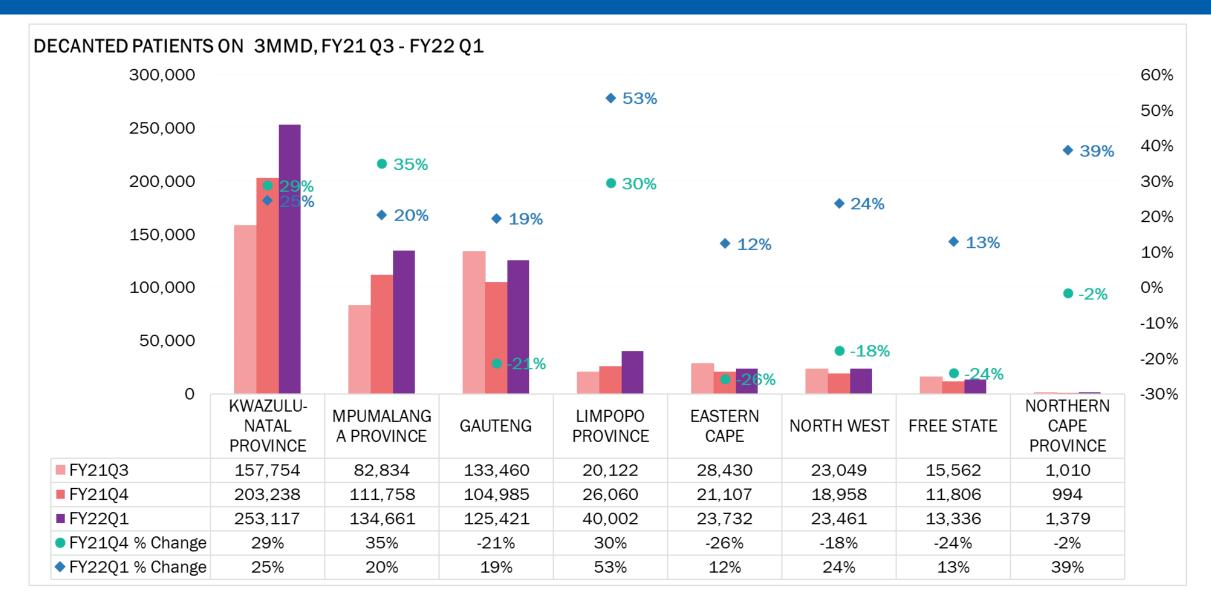
### CCMDD registered clients reach the 5 million mark



#### PEPFAR has supported CCMDD uptake among PLHIV



#### More clients in FY22Q1 are now receiving 3MMD

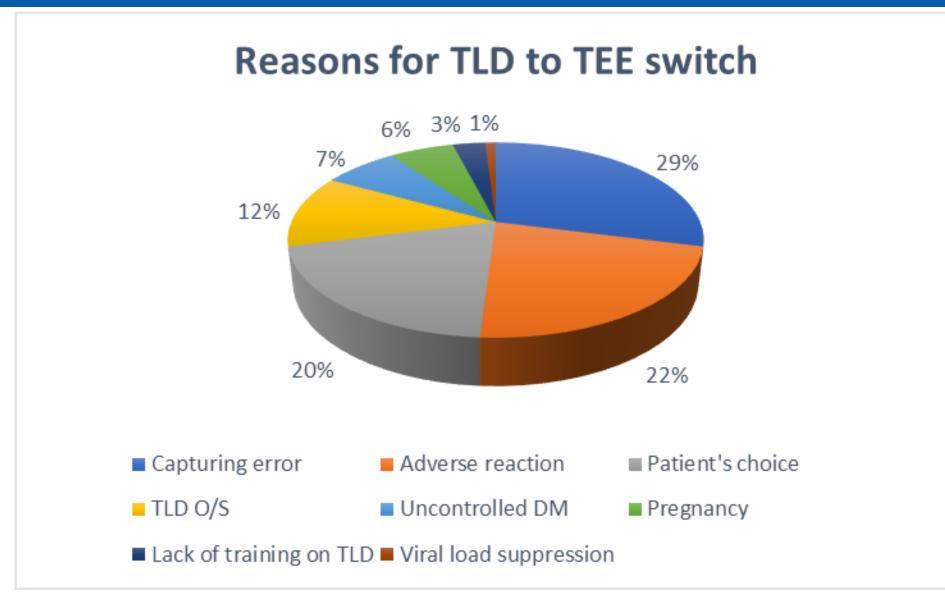


## Barriers and solutions to progress

## Monitoring of CCMDD clients through SyNCH

Home Prescrip	tions	Patient Reports 👻	Data Management 👻	Setup 🗸	Help 🗕 Logout	
Your details	ails COVID-19: Information		Extended Prescriptions Prescriptions not Extended Expected Prescriptions missed Cut off date		ent Search	
Name KZN Nurse	View and download documents relation ★ View procedure to follow during pick-	Patients Collecting PMP (14 Dec – 10 Jan) Adherence Club Patients Outreach Point Patients		ID / Passport / Asylum Seeker Number: / Passport / Asylum Seeker Number		
PERSAL No. 223	unrest			OR		
SANC No. 222	Uncollected Patient Medicin Covid-19 Extensions Report			Create	New Prescription	
Qualifications	Uncollected after 48 hours of collection date			System Changes		
Signature	Uncollected after 14 days of collection date	3		Saved Profiles		
they	Prescriptions: Rejected by C Provider	CMDD Service from "Sa		aved patient profiles are now available separately om saved prescriptions under the section titled Saved Profiles". All patient profiles that do not have rescription information will appear under this section.		
Prescribing						

#### Transitioning of clients from TLD to TEE



- CCMDD has successfully registered 5million patients, but approximately 2.5mil of these clients are either on the dormant or closed patient list;
- There needs to be more innovative approaches to decanting more clients onto the CCMDD program e.g the sticker on the file;
- We need to reduce the dormant and closed patient lists by using the available tools;
- There has been continued uptake of CCMDD by PLHIV with ePuPs being the modality of choice;
- 3MMD should be the dispensing cycle of choice for CCMDD clients to ensure fewer pick ups and consequently more convenience for clients;
- We need to monitor the TLD to TEE transitions occurring within our facilities and provide further training were needed.

## Thank you



The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.