|  |  |  |  |
| --- | --- | --- | --- |
| **SOP NO. 3** | TITLE: | Community Mobile Secondary Distribution of HIV Self-Screening Kits for partners of all newly diagnosed  HIV positive clients | |
|  | PROJECT: | **Wits RHI STAR SA** |  |
| **EFFECTIVE DATE:**  **April 2018** | | **SUPERSEDES #:** | |
| **APPROVED BY:** | | | **DATE: March 2018** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Review Date** | **Revision Date** | **Reason for Revision** | **Signature** |
| **March 2018** | **March 2018** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# PURPOSE

This standard operating procedures document (SOP) provides detailed information on procedures associated with offering and distributing HIV self-screening (HIVSS) kits to all newly diagnosed HIV positive clients for their current sexual partners through the Community HIV Testing Mobile service run by the Wits RHI Community Health System Strengthening Team (Community HSS). This channel of distribution, known as the Mobile HIV Positive Secondary Distribution Model is part of the UNITAID/PSI HIV Self-testing Africa (STAR) Project.

# RESPONSIBILITIES

The Field Site Co-ordinator and Community HSS Professional nurse shall be responsible for training the Wits HSS community team on this SOP.

The Field Site Co-ordinator and Community HSS clinical manager shall be ultimately responsible for this distribution model.

The Community HSS Nurses and Counsellors shall be responsible for implementing this SOP.

The STAR Field logistics supervisor and Community HSS mobile nurse will be responsible for stock management and control and data process flow for the Intervention as detailed in supporting SOP 3.1 (Annexure 2).

# DETAILED PROCEDURES

*The HIV self-screening kits used in this study will be the OraQuick Advance Rapid HIV 1/2, oral fluid test.* The Community Mobile HIV testing service locations distributing HIVSS kits are located throughout Region F in Johannesburg in Gauteng Province and DKK district in North West Province. Secondary self-screening kit distribution will be integrated within the existing Community Mobile HIV testing service run by Community HSS.

## Offer of HIV self-screening

The following clients will be offered HIVSS:

* + - All confirmed HIV-positive clients will be offered HIVSS kits to take and offer to their current sexual partner up to a maximum of 3 HIVSS kits.

## Preparation for Integrated mobile model:

1. HIVSS take home kits:
   * Prepacked kits in disposable bags with:
     + HIVSS positive referral card for clinic including contact number of Community HSS nurse and counsellor
     + Referral information sheet specific to distribution site
2. IEC materials:
   * Fast Facts
   * FAQs
3. DCFs:
   * Partner only HIVSS distribution

## HIVSS Integrated Mobile algorithm

The diagram in Appendix 1 sets out the process flow algorithm which is more fully described below.

* + 1. Offer of HIVSS kits for partners
       - As part of post-test counselling, all newly diagnosed HIV positive clients will be offered HIVSS kits to take for their current sexual partners to improve partner notification and index testing services.
    2. Demonstration
       - Where the client accepts offer, the counsellor will demonstrate for the client how the HIVSS is done.
       - The counsellor will also provide the client with the frequently asked questions (FAQ) leaflet and advise that the client’s partner can watch a demonstration video on [www.](http://www/) selfscreening.org.za or carefully follow the IFU in the HIVSS kit.
       - The counsellor will also inform the client that the client’s partner can access confirmatory testing at any of the sites on the referral information sheet or can access the mobile HIV testing service on Esselen Street every Thursday.
       - The counsellor will inform the client that both the Community HSS nurse and counsellor’s contact details are on the referral card.
    3. Completion of DCF
       - The counsellor will complete the Partner only HIVSS distribution DCF
    4. Issue HIVSS kits
       - The counsellor will then issue the client with 1-4 HIVSS kits depending on their number of current sexual partners.
    5. Follow-up of clients issued with HIVSS kits for their partners
       - All Community HSS nurses initiating newly diagnosed HIV positive clients on ART will follow- up whether client took up offer of HIVSS for partners and the outcome of the offer to their partners.

## After mobile HIV testing service:

* At the end of each mobile HIV testing service day, all Partner only HIVSS distribution DCFs will be given by counsellors to Mobile HSS Nurse.
* For further detail see associated SOP 3.1 managing HIVSS stock and data collection system.

## Data flow

* DCF are completed by the HSS counsellors for every reactive client issued with the kit.
* All counsellors submit the completed DCF to the Senior counsellors to compile a weekly report on the distributed kits and report sent to the STAR Site Coordinator
* The STAR Site Coordinator collects the completed DCF from HSS senior counsellor and compile the summary sheet.
* DCFs are filled with other distribution DCFs of the same date and an accountability form is completed
* DCFs are issued to the Data Capturers who counts the DCFs and verify with the accountability form and signs if they match .
* Data is captured by the Data Capturers on the STAR Database.

Client exists mobile testing service with linkage plan

## APPENDIX 2 – Mobile HIV Positive Secondary Distribution Model



Completion of DCF

Issue of HIVSS kits for partner(s)

Accepted

Offer rejected

Demonstration of HIVSS

Offer HIVSS for partner

Client tested HIV+ with counsellor

Receive HIVSS exit information

**APPENDIX 3 – Partner only HIVSS DCF**

**Partner only HIVSS distribution**

1

2

Distribution channel

Community OR

Facility OR 3 Workplace

Distribution channel type:

Name of Health Facility/Distribution site: Distributor name:

Date:

Gender:

Fixed Point Integrated mobile Other:

Male

1

2

|  |
| --- |
| 1A |
| 1B |
| 1C |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| D | D | M | M | Y | Y | Y | Y |

|  |
| --- |
| 2A |
| 2B |
| 2C |
| 2D |
| 2E |

Female

TB FP STI OPD

Other:

Transgender

3

Farm Factory

Construction Security

|  |
| --- |
| 3A |
| 3B |
| 3C |
| 3D |
| 3E |
| 3F |

Mining

Other:

Age: years OR Date of birth:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| D | D | M | M | Y | Y | Y | Y |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| When was the last time you tested for HIV? | 1 | 0-3 mnths | 2 | 3-12 mnths | 3 | More tha n 12 mnths | 4 | Never tested |
| HIV self-test demonstration: | 1 | Yes | 2 | No |  |  |  |  |

HIV status

Primary information

Pos

Neg

Unknown

**If HIV positive**: Primary Name:

1

2

3

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Primary Surname

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

Contact details:

# HIV self-screen kits given for partner/s

One

1

Two

2

Three

3

Four

4

Partner 1 Partner 3

1

2

3

1

2

3

Gender of partner:

Male

Female

Transgender Gender of partner:

Male

Female

Transgender

Age of partner: years OR Date of birth: Age of partner: years OR Date of birth:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| D | D | M | M | Y | Y | Y | Y |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| D | D | M | M | Y | Y | Y | Y |

Partner 2 Partner 4

1

2

3

Gender of partner:

Male

Female

Transgender Gender of partner:

Age of partner: years OR Date of birth:

Version 3.0

19-Feb-18

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| D | D | M | M | Y | Y | Y | Y |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

Age of partner:

|  |  |  |  |
| --- | --- | --- | --- |
| **SOP NO. 3.1** | TITLE: | **HIVSS Stock and Data Management for**: Community Mobile Secondary Distribution of HIV Self-Screening Kits for partners of all newly diagnosed  HIV positive clients | |
|  | PROJECT: | **Wits RHI STAR SA** |  |
| **EFFECTIVE DATE: 30**  **August 2018** | | **SUPERSEDES #:** | |
| **APPROVED BY:** | | | **DATE: 30August 2018** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Review Date** | **Revision Date** | **Reason for Revision** | **Signature** |
| **March 2018** | **March 2018** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# INTRODUCTION

HIV self-testing (HIVSS) kit stock supply and management system is required to ensure that HIVSS kits are adequately managed to meet operational needs and meet the reporting requirements of STAR project.

# PURPOSE

This standard operating procedures document (SOP) provides detailed information on procedures associated with **managing HIV self-screening (HIVSS) kit stock and collecting required data collection forms** from the Wits RHI Community Health System Strengthening Team (Community HSS) who will be offering and distributing HIV self-screening (HIVSS) kits to all newly diagnosed HIV positive clients for their current sexual partners through the Community HIV Testing Mobile service. This channel of distribution, known as the Mobile HIV Positive Secondary Distribution Model is part of the UNITAID/PSI HIV Self-testing Africa (STAR) Project.

It will govern the process around the following:

* + Supply of HIVSS kits to Community HSS
  + Determination of optimum levels of HIVSS kits based on weekly usage
  + Forecast ordering of HIVSS kits from STAR
  + Storage of HIVSS kits
  + Completion of data collection tools (Partner only DCF) for every HIVSS kit issued.

# RESPONSIBILITIES

Primary responsibility is vested in:

* + STAR Site coordinator
  + Community HSS clinical manager (check Monica title)

Stock management and control and data flow is vested in:

* + STAR Field logistics supervisor
  + Community HSS mobile nurse
  + Community HSS Project Manager M&E

# 4. DETAILED PROCEDURES

1. The Community HSS M&E Project Manager will provide the STAR Field Logistics Officer with the next monthly forecast (e.g. for March 2018) of new HIV positive cases on the 20th day of the previous month (e.g. Feb 2018) based on new HIV positive cases for the forecasted month the previous year (e.g. March 2017) and the previous month (January 2018).
2. The forecasted number of HIVSS kits + 20% will be pre-packed by STAR project.
3. The Field Logistics Officer will supply to the HSS Mobile nurse at Community HSS services on the 25th of the previous month:
   1. HVSS kits according to projected numbers + 20%.
   2. An equivalent number of “Partner only HIVSS DCF forms”
4. All stock received will be recorded and signed for on the stock card to be kept by the HSS Mobile Nurse.
5. The HSS Mobile nurse allocates and supplies the HIVSS kits and DCFs to the community mobile HSS team on a weekly bases.
6. For every HIVSS kits issued there has to be corresponding DCF.
7. The completed data collection forms will be returned by the counsellors at the end of each Community mobile HIV testing service day to the HSS Mobile Nurse and kept by the HSS Mobile Nurse.
8. The DCFs will be handed over to the Site Field Logistics Officer weekly on a Friday morning. The Site Field Logistics Officer will sign these out on the stock card as issued and keep a running total with the HSS Mobile Nurse of HIVSS kit stock on hand.
9. The following month’s projections+20% will be reduced by any unused HIVSS kit stock.
10. In case there is not sufficient HIVSS kits for distribution, the HSS Nurse can call/email the Field Logistics Officer and request more kits.