

USAID DISCOVER- Health

PrEP Tools



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PrEP Indicators

PrEP Indicators And Their Definitions

01

Number of clients returning for 1 month follow up visit

Number of clients who return for a 1 month follow up visit to obtain a refill of PrEP.

02

Number of clients returning for any subsequent follow up visits

Number of clients who return for a 3 month (or later) follow up visit to obtain refill for PrEP.

03

Number of clients restarting PrEP

Number of clients who have taken oral PrEP in the past and discontinued, for whatever reason, who are reinitiated on PrEP.

04

Number of Seroconversions

Number of clients on PrEP who return for refills, maintaining continuous use, and then test HIV positive.

HowTo Collect PrEP Indicators

All the indicators can be collected from the **PrEP Register**.

A PrEP client returning for their 1 month follow up visit is recorded in the PrEP Register under the **Follow up Visit #1 – 1 month after initiation** section.

The process to collect this indicator at the end of the reporting month is:

- Check for all clients initiated on PrEP the previous month.
- Count how many have a 1 month follow up visit recorded in the reporting month.
Example: When reporting for February, refer only to clients who were initiated in January (Figure 1, page 6).
- The total number of clients reported should be equal or less than the new clients (PrEP_NEW) initiated in the previous month.

Number Of Clients Returning For 1 Month Follow Up Visit

Figure 1: Pre-Exposure Prophylaxis (PrEP) Client Register

(a) Date	(b) Client ID Number	(c) Client Name & Surname	(d) Client Contact Number (Cell/Tel)	(e) Sex (M/F/TG)	(f) Age (years)	(g) Key populations client	(h) If key population (KP): KP group classification (MSM/DC/FSW/AGYW/PLM/YM - tick all that apply)	Initial HIV Test			(l) Creatinine (eGFR)	(m) STI syndrome (see codes). If STI: Date started treatment	(n) PrEP (ARVs) prescribed	(o) Number of tablets	Follow-up Visit #1 - 1		
								(i) Date tested	(j) Result: (R/NR)	(k) Date Client Received Result					Date	HIV Re-testing	
						<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No	<input type="checkbox"/> MSM <input type="checkbox"/> DC <input type="checkbox"/> FSW <input type="checkbox"/> AGYW <input type="checkbox"/> PLM <input type="checkbox"/> YM					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC		2/2/2019			

Number Of Clients Returning For Any Subsequent Follow Up Visits



The process to collect this indicator at the end of the reporting month is:

- Check for all clients ever initiated on PrEP.
- Count how many have a subsequent follow up visit recorded (post 1 month follow up visit) in the reporting month. Example: when reporting for February, count only those clients whose subsequent follow up visit occurred in February (Figure 2, page 8).
- The total number of clients reported should not be higher than PREP_CURR.

Number Of Clients Returning For Any Subsequent Follow Up Visits

Figure 2: Pre-Exposure Prophylaxis (PrEP) Client Register

Follow-up Visit #2 - 3 months after initiation						Follow-up Visit #3 - 6 months after initiation						Follow-up Visit #4 - 9 months after initiation						Follow-up Visit #5 - 12 months after initiation						
Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date
	Date	Result: (R/NR)					Date	Result: (R/NR)					Date	Result: (R/NR)					Date	Result: (R/NR)				
20/2/19				<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC						<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC						<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC			
				<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC		13/2/19				<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC						<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC			

Number Of Clients Restarting PrEP

A client restarting PrEP is one who has missed an appointment (clinical or pharmacy visit) for a **period of 30 days or more**. This client's details will be recorded into a new row of the register in the month when the client is restarted. The old client ID will be used and "Restart" as indicated in Figure 3.

Figure 3: Pre-Exposure Prophylaxis (PrEP) Client Register

(a) Date	(b) Client ID Number	(c) Client Name & Surname	(d) Client Contact Number (Cell/Tel)	(e) Sex (M/F/TG)	(f) Age (years)	(g) Key populations client	(h) If key population (KP): KP group classification (MSM/DC/FSW/AGYW/PLM/YM - tick all that apply)	Initial HIV Test			(l) Creatinine (eGFR)	(m) STI syndrome (see codes). If STI: Date started treatment	(n) PREP (ARVs) prescribed	(o) Number of tablets	Follow-up Visit #1 -		
								(i) Date tested	(j) Result: (R/NR)	(k) Date Client Received Result					Date	HIV Re-testing	
																Date	Result: (R/NR)
	78					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> MSM <input type="checkbox"/> DC <input type="checkbox"/> FSW <input type="checkbox"/> AGYW <input type="checkbox"/> PLM <input type="checkbox"/> YM					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					
	79					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> MSM <input type="checkbox"/> DC <input type="checkbox"/> FSW <input type="checkbox"/> AGYW <input type="checkbox"/> PLM <input type="checkbox"/> YM					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					
	24 Restart					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> MSM <input type="checkbox"/> DC <input type="checkbox"/> FSW <input type="checkbox"/> AGYW <input type="checkbox"/> PLM <input type="checkbox"/> YM					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					

The process to collect this indicator at the end of the reporting month is:

- Check for all clients entered into the PrEP Register in the reporting month.
- Check the Client ID Column and count those with the "Restart" label.

Number Of Seroconversions

A PrEP client who sero-converts is one whose HIV test result performed in any follow-up visit (1 month after initiation and any subsequent visit) is found HIV+ in the reporting month.

Figure 4: Pre-Exposure Prophylaxis (PrEP) Client Register

Follow-up Visit #2 - 3 months after initiation						Follow-up Visit #3 - 6 months after initiation						Follow-up Visit #4 - 9 months after initiation						Follow-up Visit #5 - 12 months after initiation						
Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date	HIV Re-testing		Side effects (see codes)	PrEP (ARVs) prescribed	Number of tablets	Date
	Date	Result: (R/NR)					Date	Result: (R/NR)					Date	Result: (R/NR)					Date	Result: (R/NR)				
				<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC			4/2/19	R		<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC						<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC					<input type="checkbox"/> TDF/FTC <input type="checkbox"/> TDF/3TC			

PrEP Service Delivery



Minimum Standards: Service Delivery Pathway



- Community awareness
- Whole site orientation
- Facility mapping, including redesigning client flow as necessary
- Training of PrEP mentors, mobilizers and clinicians
- Ensure availability of commodities, tools and demand generation materials
- Organise demand generation activities
- Enrol clients
- Client monitoring and follow up
- Adherence support
- Supervision and client mentorship

Minimum Standards: Facility Readiness Assessment

- **PrEP Forms:** Client Locator Form, Initial History Form, PrEP Follow Up Form, Adherence Checklist Form, Refill Cards, Consent Form, Client Referral Form.
- **Labs and baseline, reagents and commodities:** HIV test kits, Urea and Creatinine, Urinalysis Strips, Urine Specimen Bottles, Red Tops, Needles, Syringes, Methylated Spirit, Condoms.
- **Supply chain management process:** including Truvada.
- **PrEP Registers:** PrEP Adherence Register, Daily Activity Register, Register of Referral Out.
- **Appointment Diary**
- **Individual client files**
- **Refill cards**
- **Counselling checklist**
- **Lockable cabinets**
- **Trunks**
- **Suggestion Box**
- **Box Files**
- **Electronic Tablets**

File Placement In The PrEP File

Left Side

- Non-Clinical Screening Tool
- HIV Result Slip
- PrEP Patient Locator
- PrEP Consent Form
- PrEP Initial Form
- PrEP Pharmacy Form
- PrEP Lab results

Right Side

- PrEP Follow Up Visit Form
- PrEP Adherence Form
- PrEP Initial Form (Restart)

Adherence Support

Process	Focus of Adherence Intervention	Tools	Responsible
Step 1: Community Awareness/ Demand Generation	Integrate adherence in health promotion/ mobilization messages	<ul style="list-style-type: none"> • Standard Discussion guide • Informational video • IEC Materials & Brochures 	<ul style="list-style-type: none"> • Mobilizer/ Mentor
	Collect all details of the client from inception	<ul style="list-style-type: none"> • Client locator form 	<ul style="list-style-type: none"> • Mobilizer/ Mentor
Step 2: Risk Assessment Tool	Give client option to sign up to various support groups	<ul style="list-style-type: none"> • Self-assessment tool (clients that understand their risk are more likely to adhere) 	<ul style="list-style-type: none"> • Mobilizer/ Mentor

Adherence Support

Process	Focus of Adherence Intervention	Tools	Responsible
Step 3: Clinical Service Provision	Risk reduction and adherence counselling integrated into service provision. Reinforce the importance of clinical and pill-uptake at each visit.	• Job Aide	• Service Provider
	Clients to fill-out consent/ acknowledgement form to use PrEP that reinforces adherence.	• PrEP Consent/ acknowledgement form	
	Verify contact details at each visit.	• Client locator	• Service Provider
	Ensure adequate stocks of medication, so as not to interrupt supply.	• Supply Chain Tools	
Step 4: Adherence Support	Zone clients and allocate them to CHWs for follow up.	<ul style="list-style-type: none"> • Client lists/ schedule by zone (PrEP System/ Demand generation register) • Job Aide 	<ul style="list-style-type: none"> • Mobilizer/ Mentor • Facility PrEP Focal Point
	Monthly adherence support groups.	• Job Aide	• Mobilizer/ Mentor
	SMS reminders, can be automated or CHW sends on the actual day.		<ul style="list-style-type: none"> • Automated • Mobilizer/ Mentor

Human Resource Requirements

Focus Area	Human Resource Needs
Demand Generation And Adherence Support	10 – 20 short-term mobilizers hired on a monthly basis for 3 – 5 days
	2 permanent mobilizers that work 3 days a week
Clinical Services	ART/ PrEP Nurse/ Clinician
DREAMS Or Other External Partner	Ensure linkage with DREAMS staff i.e. centre manager and other staff

PrEP Forms And Registers

No.	Type of PrEP Form	Objective	Modality	Responsible Person
1	HIV Risk Assessment tool	Assess clients who are at risk of contracting HIV	Indexing; or Community mobilization	Partner HTS CHW; DREAMS / Open Doors Mentors
2	PrEP Counselling Kit	Educate and counsel on PrEP to mobilise clients that are interested in being initiated on PrEP. *All clients mobilized should be entered in the Mobilization Register	Community Outreach	DREAMS / Open Doors Mentors
3	PrEP Screening Tool	Assess clients for risk and behavioural eligibility for PrEP	Community or facility	DREAMS / Open Doors Mentors CHW
4	HIV Test Result Slip	Ascertain HIV status of client	VCT at Facility	Counsellor DREAMS / Open Doors Mentors
5	Client Locator /Client Profile	Enter client details including landmark and map of client's location *Open PrEP file for client		DREAMS / Open Doors Mentors CHW
6	PrEP Initial	Screen the client for clinical baseline and laboratory tests to assess for clinical eligibility		ART/TP Specialist RMNCH Specialist
7	PrEP Initial –Plan	Prescribe client on PrEP * Enter client in the PrEP Register * Enter PrEP client ID		ART/TP Specialist RMNCH Specialist

PrEP Forms And Registers

No.	Type of PrEP Form	Objective	Modality	Responsible Person
8	PrEP Consent Form	Seek authority from client to provide PrEP services to them		ART/TP Specialist RMNCH Specialist
9	PrEP Pharmacy Form	Dispense PrEP to client – Initiate Client on PrEP Complete for clients that return for their Pharmacy visit		ART/TP Specialist RMNCH Specialist
10	Appointment Card	Indicate next client appointment, Pharmacy or Clinical follow up, so as to remind the client of their next visit. Indicate all drugs the client is on and the PrEP client ID.		ART/TP Specialist RMNCH Specialist
11	PrEP Adherence Form	Use for clients that are just initiated on PrEP and also for clients that are non-adherent.	Counselling	Psychosocial Counsellor; DREAMS / Open Doors Mentors
12	PrEP follow up	Form to be completed for clients who return for their clinical follow up visit		ART/TP Specialist RMNCH Specialist
13	Mobilization register Adherence Support Register Appointment Diary PrEP register PrEP summary Sheet* ALL other forms as indicated above	Ensure availability, utilisation and completeness of forms and registers Compile and verify reports Provide technical support on issues arising from these	Monitoring Visits TSS Visits	Data Specialists Community Mobilization Officers Health Promotion Specialists *ART/TP Specialist *RMNCH Specialist

PrEP Surges



Guidance On PrEP Surges In The Community



- Use locations to zone clients
- Mobilizers to be assigned to specific zones and specific clients. This information to be entered on Locator Form.
- Mobilizers to provide in-person client visits in the community and advise clients on service provider availability.

Adherence Strategy

A blue-tinted photograph of a person's face and hand. The person is holding a small white pill between their fingers, positioned over a glass of water. The image is used as a background for the title.

Defining Adherence



Adherence to a drug(s) means that an individual is taking prescribed medications *correctly and consistently*, it involves taking the drug:

- in the **correct dose**
- at a **consistent frequency**
(number of times per day)
- at a **consistent time of day**

Adherence with a follow up means clients attend *all* scheduled clinical visits/procedures, including:

- Clinic and lab assessments
- Drug collection/repeat prescription



Simply put...

PrEP works when taken
CORRECTLY and **CONSISTENTLY**

Mobilizer Tools For Adherence Visits



PrEP Adherence Support Register



USAID DISCOVER-Health PrEP Adherence Support Register



Date Adherence Visit made	Client Name	Gender	PrEP No.	Type of Adherence support provided (phone call; home visit; adherence support group)	Outcome of visit (continuing PrEP or not continuing PrEP)	Reason	Type of next visit (Clinic;home)	Name of Mobilizer/ Mentor

Support Groups



Guidance on creating PrEP Support Groups

Guidance	Detail
Purpose	<ul style="list-style-type: none">• Create an environment where clients can share their experiences of taking PrEP and provide mutual support, so as to improve adherence.• An evolving concept to be defined upon further consultation with participants.
Club Size	<ul style="list-style-type: none">• Closed group of clients• Ideal size of 5–10.
Club Membership	<ul style="list-style-type: none">• This will evolve with newly enrolled clients joining to support cross-learning and mutual support.• Members grouped into categories. For example, AGYW aged 16 – 24 years or Men aged 25 – 34 years.

Guidance On Creating PrEP Support Groups

Guidance	Detail
Inclusion Criteria	<ul style="list-style-type: none">• PrEP Client.• Able to participate in support group meetings.• For example for DREAMS: 16- 24 years, AGYW, and a member of DREAMS.
Exclusion Criteria	<ul style="list-style-type: none">• Not able to participate in support groups meetings.• For example for DREAMS: not a DREAMS member.
Frequency And Duration	<ul style="list-style-type: none">• This will evolve as lessons are learned and will be guided by group members.• Initially agree on either monthly or bi-weekly meetings.• Duration of each meeting is about 45min – 1 hour.
Facilitation	<ul style="list-style-type: none">• Facilitated by USAID DISCOVER-Health PrEP Mentor and supported by CMO.• Supported by WhatsApp Support group if required.

Guidance On Running PrEP Support Groups

Meeting types	<ul style="list-style-type: none">• Intro and welcome activity.• Carry-out bloods, clinical, scripting, routine tests.• Experience sharing with PrEP / or pick a particular topic for the session.• Closing activity.
Duration	<ul style="list-style-type: none">• Developed in consultation with groups, perhaps afternoon or weekend if at college.
Logistics	<ul style="list-style-type: none">• Provide drinks and snacks at each meeting.• Transport refund for PrEP mobilizer/ mentor to attend meeting.• Supplies for meetings i.e. register, facilitation manual, reporting forms.
Proposed discussion topics	<ul style="list-style-type: none">• Welcome to PrEP support group• Adherence• STIs• Condoms• Combination prevention• Stigma and disclosure• Healthy and unhealthy relationships• Teenage pregnancy• My future• Negotiating safe sex• Communication within relationships

Key Roles And Responsibilities

PrEP Mobilizer	<ul style="list-style-type: none">• Maintain relationship with group members• Arrange for meetings with group members• Run meetings for group members
PrEP Mentor	<ul style="list-style-type: none">• Day to day oversight of group activities• Ensure relevant logistics in place for group meeting
CMO	<ul style="list-style-type: none">• Overall supervision of support groups
DREAMS Centre Coordinator	<ul style="list-style-type: none">• Linkage with DREAMS in general
USAID DISCOVER-Health Clinical Team	<ul style="list-style-type: none">• Ensure service delivery to groups as appropriate i.e. bloods, pharmacy pick-ups etc.
PBI Team HQ	<ul style="list-style-type: none">• Capacity building in various areas• Ensure budgets available for running clubs
QA/QI	<ul style="list-style-type: none">• Ensure quality assurance and quality improvement of support groups

Key Considerations



- Find out disclosure status of client **BEFORE** they join the group, for example when mobilizer goes to visit the client.
- Confidentiality is critical. Run the group in a secure space and with the same facilitators each time.
- Facilitator will need to undergo additional training to be able to run groups.
- Tools required: attendance register, registration form, facilitator manual etc.

Key Considerations



