

## Alternative Entry Point POC EID Pilot Supervision Visit Guide

**SOP Purpose:** To guide the supervision and mentorship of HCWs (including POC device operators) at healthcare facilities implementing POC EID testing at alternative entry points in Uganda.

Facility name & District:

\_\_\_\_\_

Mentorship Team Names: \_\_\_\_\_

Date mentorship is conducted: \_\_\_\_\_

Previous supervision date (*if applicable*): \_\_\_\_\_

.....

Follow-up Items from Previous Supervision Visit (*if applicable*)

Problems Identified	Corrective Actions Recommended (note person responsible for corrective action on-site)	Current Status

### Supervision Visit Procedures:

- Upon arrival to the facility, meet with the facility in-charge for courtesy and provide briefly the purpose and expectations of the visit. Meet with the MBCP, AEPs (pediatric inpatient and malnutrition ward), Lab, and ART clinic to determine availability of HCWs.
- Please speak to HCWs participating in the program and ask for general feedback to capture overall issues with program that may not be mentioned in the checklist.
- Fill out the supervision checklist for **HCWs (Annex 1)** and **POC Device Operators (Annex 2)**
- Fill out the **Documentation Checklist & Tracking Tool (Annex 3)**
- Fill out the **Facility Information Form (Annex 4)**
- Fill out the **Facility Issues Requiring Follow-up (Annex 5)**

**Annex 1. Supervision Check List - Questions for Alternative Entry Point Ward HCWs**

1	<p>Are all infants admitted to Nutrition clinic being screened for HIV status -If No, please note why and any further comments.</p> <p>1a. Is there a standard tool to screen infants for HIV status? Y N 2b. Is there a standard process used to screen infants for HIV status Y N If yes briefly describe the process</p>	Y	N
2	<p>Are all symptomatic infants in Pediatric ward being offered screened for HIV status? 2a. Is there a standard tool to screen infants for HIV status? Y N 2b. Is there a standard process used to screen infants for HIV status Y N If yes briefly describe the process</p> <p>2. What is done to infants screened with an unknown HIV status?</p> <ul style="list-style-type: none"> <li>• All infants are offered a rapid HIV test to ascertain exposure status</li> <li>• Only infants below 4 months of age are offered a rapid HIV test to ascertain exposure status</li> <li>• All infants are offered an EID test irrespective of age</li> <li>• Only infants older than four months and infants less than 4 months with a positive rapid HIV test are offered an EID test</li> </ul>	Y	N
2a	<p>If No, please discuss with the HCWs in the wards what would need to happen to allow routine testing at pediatric and nutrition ward. Note feedback and corrective actions below.</p>		
3	<p>As a HCW, do you approach mothers in AEPs to determine HIV status?</p>	Y	N
3a	<p>If mother has unknown status, do you offer a rapid test to the mom?</p>	Y	N
4	<p>Who is able to request an EID test? <i>(please circle answer)</i></p> <p>Clinician      Nurse      Midwife      Phlebotomist      Lab Technician</p> <p>Other (please specify)</p>		
5	<p>Where are the infants referred to for EID sample collection and testing? <i>(please circle answer)</i></p> <p>MBCP      Lab      Midwife      Nutrition Ward      Pediatric Inpatient Ward</p> <p>Other (please specify)</p>		

6	Which primary register are you using the document EID referral and Point of entry? Other than this register, are any other registers or logbooks being used to document this?		
6a	How are HIV-positive infants referred to clinical care? Does someone from the ward/lab follow-up on patients to see if they received ART?		
1	Are clients informed on the purpose of sample collection and clearly consent before collection? <i>If No, note feedback and corrective actions below.</i>	Y	N
2	Which health cadre performs sample collection from infant? <i>(please circle)</i> :		
	Clinician or nurse in ward		
	Ward phlebotomist		
	Lab Technician (patient is walked to the lab)		
	Other (please specify)		
3	Is the sample dispatched to the testing point on the same day as it is collected?	Y	N
3a	If No, please discuss with the HCWs in the wards what would need to happen to allow same day sample dispatch. Note feedback below.		
4	Where is the testing point for EID this facility? <i>(Please circle answer)</i>  <i>Laboratory   Nutrition Ward   Pediatric Inpatient Ward</i>  Other (please specify)		
	(A) Who is responsible for delivering the sample from the ward to the testing point? <i>(Please circle answer)</i>  Clinician      Nurse      Phlebotomist      Linkage Facilitator  Other (please specify):		
	(B) If the sample collection and testing point is the Lab, who walks the patient to the lab?  Clinician      Nurse      Phlebotomist      Lab Technician		

	Other (please specify):		
1	<p>Who is the first person to receive the EID test result back from the testing point? <i>(Please circle answer)</i></p> <p>Clinician      Nurse      Midwife      Phlebotomist      Linkage Facilitator</p> <p>Other (please specify):</p> <p>(A) Is this person responsible for recording results?</p>		
	(B) Is the primary register (POC EID Testing Logbook [Blue book]) being used to capture the results received date by the HCW? If not, what alternative register or log book is being used to ensure proper recording?		
2	<p>Who is responsible for delivering the test result to the patient? <i>(Please circle answer)</i></p> <p>Clinician      Nurse      Midwife      Phlebotomist      Linkage Facilitator</p> <p>Other (please specify):</p>	Y	N
3	Does the patient receive the test results on the same day the ward staff first receives the test result?	Y	N
3a	If No, discuss with the clinical ward staff to understand the reasons why the test results are delayed in being given to the patient/caregiver. Brainstorm with staff to improve result return. Ensure that you agree what would work best to ensure timely result return and <b>note corrective action needed to achieve this below and in Annex 5.</b>		
4	Describe the process of giving a test result back to the patient.		

4a	Is the process of delivering patient results different for positive vs. negative EID test results? If Yes, can you please describe how?	Y	N														
5	Where is the POC EID testing logbook (blue book) placed and is it being completed? <i>(please complete and refer to Annex3: Documentation checklist)</i>	Y	N														
5a	If not, please explain why.																
1	Are linkage facilitators present at this healthcare facility to help positive patients? If so, who are they (mother volunteer, expert client, community HCW et.c), what is their exact role, and how are they notified to provide help?	Y	N														
2	If there are no linkage facilitators, how do positive infants and their caregivers get linked to the ART clinic?																
3	Is a clinical consultation required before infant is initiated on ART?  (A) If No, what is the process for initiating ART on HIV-positive infants? (B) If Yes, do clinical consultations for the ART regimen initiation occur on the same day as EID test result?	Y	N														
	If Yes, do clinical consultations for the ART regimen initiation occur on the same day as EID test result? If not, please discuss with clinical staff reasons why clinical consultation for the ART regimen is delayed. Note feedback below.	Y	N														
	<b>Please list the primary source for finding ART initiation dates, as well as alternative data sources below.</b>																
	<table border="1"> <thead> <tr> <th>Primary Source</th> <th>Primary Source Location</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <th>Alternative Data Sources</th> <th>Alternative Source Location</th> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>	Primary Source	Primary Source Location			Alternative Data Sources	Alternative Source Location										
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	<b><u>Annex 2: Supervision Checklist - Questions for Device Operators at the Testing Point</u></b>		
1	Who is responsible for receiving the EID sample at the testing point?		

2	Are infant EID samples tested the same day as receiving from the ward? (A chart or register review to validate this, may be required)	Y	N
2a	If No, please discuss with lab staff what would need to happen to allow immediate POC EID testing. Note feedback below.		
3	Is the POC EID testing performed by staff who received formal POC EID training? If No, how were they trained? <i>(Please circle answer)</i> <ul style="list-style-type: none"> <li>• On-site training by previously trained staff</li> <li>• Self-trained</li> <li>• Others (please specify):</li> </ul>	Y	N
4	Have there been any device breakdowns in the three months?	Y	N
4a	If yes, please describe what caused these breakdowns, how long they lasted, and state if problems were resolved. <i>(Note: If not resolved, also flag in Annex 5 List of Problems to follow-up on)</i>		
5	Are their adequate POC supplies? (E.g. test cartridges, sample collection kits, lancets) <i>(Note: Please physically check remaining stocks to determine stock level and EXPIRIES)</i>	Y	N
5a	If not, please describe which items are missing and/or have expired.		
6	Are POC EID test results dispatched from the testing point same day the test result is available from the device?	Y	N
6a	If No, discuss with the lab staff to understand the barrier and options. Note feedback below.		
7	Who is responsible for delivering the test results back to the ward?		
8	Is the POC EID testing activity register (red book) placed in the lab and is it being completed? <i>(please complete and refer to Annex 3: Documentation checklist at this time)</i>	Y	N
8a	If not, please explain why.		

### **Annex 3: Documentation Checklist & Tracking Tool**

<b>Key Indicators</b>	<b>Primary Data Source Used at Facility</b>	<b>Alternative Data Sources and accompanying label (if different than primary register)</b>	<b>How Completely is indicator filled? (n completed entries / n patient records)</b>	<b>Corrective Actions Taken?</b>
Infant Name				
Infant ID No.				
Infant Date of Birth (DOB)				
Infant Sex				
Infant Entry point for EID testing				
If Other Entry Point, please specify				
Mother's HIV status				
Date of patient visit or admission				
Date of sample collection for EID				
Date sample received by testing point (lab or ward)				
Date EID test performed				
Type of POC EID Device				
Date of Lab Dispatch of Test results				

Date test result received at clinic/ward				
Results received by patient/caregiver				
Date result returned to caregiver				
EID Test Result				
EID Test Result Error				
If child HIV-positive, were they referred to ART services?				
Date of ART Referral				
Infant initiated on ART				
Date of ART initiation for infant				
Date of follow-up visit post-ART initiation (~ 3 months post initiation)				
Infant Admission or Visit Outcome <i>1 - Discharged</i> <i>2- Transferred out</i> <i>3- Died</i> <i>4- Loss-to-follow-up (LTFU)</i>				

**Annex 4: Facility Information Form**



1 What is the infant admission rate for the pediatric inpatient ward at this hospital? (expected number of tests) (chart review: Review the last 30 admissions and assess if they had a documented HIV status)

2 What is the infant admission rate for the malnutrition ward at this hospital? (expected number of tests) (chart review: Review the last 30 admissions and assess if they had a documented HIV status)

3 Does this hospital accept off-site referral samples?

(A) If Yes, how does the facility prioritize testing between on-site and off-site referral?

If EID samples from other facilities are accepted, what is the process of returning results to other facilities?

4 Roughly how many staff work in the MBCP, pediatric inpatient, and malnutrition clinic at the facility?  
*(Note if malnutrition and pediatric inpatient staff are the same HCWs)*  
Clinician          Nurse          Midwife          Phlebotomist          Linkage  
Facilitator

4a How many of these clinical staff are trained and participate in POC EID testing?

5 Roughly how many staff work in the lab at the facility?

5a How many of these lab staff have been trained to operate the POC EID device and how many are responsible for testing?

6a How do HCWs interpret the entry point indicator and how is it recorded?

7 **Where does sample collection take place for EID when:**

- 7a Samples are sent to the centralized conventional lab? (in the clinic or in the lab or somewhere else?)
  
- 7b Samples are tested using on-site with POC testing device?
  
- 8 How does the POC EID Request form flow happen? (E.g. where does each of the 3 triplicate copies go and where are they retained for record-keeping?)
  
- 9 [SUPERVISION TEAM] Check how many POC tests were run since Jan 1st, 2019, based on how many infants are tested/recorded in the POC EID Testing Logbook (BLUE Book)
  
- 10 [SUPERVISIONTEAM] Check how many POC tests were run since Jan 1st, 2019, , based on how many infants are tested/recorded in the POC EID Testing Lab Activity Register (RED Book)
  
- 11 Are there discrepancies in patients between red and blue book? If so, how many?
  
- 12 How many HIV-positive infants have been identified since POC testing began?
  
- 12a Of these positive infants, how many have been initiated on ART?
  
- 12b If ART initiation date is missing for positive infant, are we able to track the status?

**Annex 5. Use of lab information systems, supplies and equipment uptime**

- 1. Is the POC device connected to a laboratory information system? Yes\_\_\_\_ No\_\_\_\_
  
- 2. How often do the staff at this POC site use the Laboratory Information System (LIS) to record tests done?

daily	Weekly	Monthly	Real time	Not in use
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Tick here	Tick here	Tick here	Tick here	Tick here
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3. How many staff among the different cadres have user accounts for the LIS on site?

Clinician	Nurse/midwife	Lab Technician	Phlebotomist

4. a) Has there been an interruption in the use of the LIS for the following reasons since January 2019

Issue	Yes or No	How often? (Daily, weekly, monthly quarterly, not at all)	For how long
Computer breakdown issues			
Lack of internet bundles			
Software breakdown			

4 b). Check the LIS to see when the last results were uploaded onto the central dashboard at CPHL. Write down the date of most recent upload \_\_\_\_\_

5 a). Has the facility experienced any stock out of cartridges in the last 3 months? Yes \_\_\_ No \_\_\_

b) If yes to the above question, what steps were made to mitigate the stock out?

6 a). Has the facility experienced any Computer/software breakdown in the last 6 months? Yes \_\_\_  
No \_\_\_

b) If yes to the above question, what steps were made to resolve the Computer/software breakdown?

7 a). Does the facility have a stock card to document the consumption of cartridges? Yes \_\_\_ No \_\_\_

b). what is the average consumption of cartridges in the last six months?

Total received divided by total used (including wastage) in the 6 months

8. Where are the cartridges stored within in the facility including at alternative entry points?

\_\_\_\_\_

**Annex 6. Facility Issues Requiring Follow-up**

Problems Identified	Corrective Actions Recommended	Person Responsible for Corrective Action (add name and contact No.)	Deadline for Correction and Date for Follow-up (note if follow-up is phone or site visit)


**\*Note: Items not addressed by deadline will be added to the follow-up items list for next on-site visit.**

Mentorship Lead Name: \_\_\_\_\_

Date of next mentorship/Supervision visit: \_\_\_\_\_

Signature: \_\_\_\_\_