Patient Tracking Standard Operating Procedure

1. Standard Appointment System is defined as list of standard procedures practiced in all pediatric/Adult Pre-ART, ART, PMTCT, and HEI FU service providing facilities:

1.1 Appointment is given as per national ART/PMTCT guidelines:

- **Pre-ART:** Clients will be appointed every 3 months for care and every 6 months for CD4 count.
- **ART adult and pediatric**: Clients will be appointed for two weeks after starting ART, then every month for the first 3 months, then after every 2 months for ART refill if adherent, and every 6 month for CD4 count.
- **PMTCT:** Four focused ANC follow-up and every month for HIV positive pregnant mother, and every 6 months for CD4 count.
- **HEI:** At birth, every month for the first 6 months, then every three months until confirmed for HIV status.

1.2 Appointment calendars will be used for all clients enrolled in pre-ART, ART, PMTCT, and HEI Follow-up and next appointment date will be recorded on "Appointment Calendar".

1.3 Every client enrolled in pre-ART, ART, PMTCT, and HEI Follow-up will have an Appointment Reminder Card.

1.4 Every client enrolled in pre-ART, ART, PMTCT, and HEI FUs will be communicated his/her next appointment date verbally and in written form using Appointment Reminder Card.

1.5 Appointment calendar will daily be reviewed by pre-ART, ART, PMTCT, and HEI to monitor clients' failure to attend their follow-up visit as per appointment date set during last visit.

1.6 Clients missed appointment will be identified, listed out, traced, and tracing outcomes will be recorded accordingly.

2. Missed Appointment is defined as clients' failure to attend pre-ART, ART, PMTCT, and HEI FU appointment date within 7 days. Assumption is the appointment date set during last visit have not been either cancelled or rescheduled.

2.1 **Missed Appointment Identification:** is defined as a process whereby clients who fall in "Missed Appointment" category are identified, listed out, and basic information with regard to their full name, address, etc, is generated from facility database or patient medical chart on the 8th day for tracing. Missed appointment identification process will require:

2.2 Daily checking of appointment calendar to ensure clients' attendance as per the appointment date set during last visit.

2.3 Marking "✓" sign on the appointment calendar in the attendance column if clients manage to attend their appointment on the scheduled date; write the date if the clients attended their appointment during the subsequent 7 days and marking **"X"** sign if clients failed to attend their appointment on the 8th day.

2.4 Identifying and listing out clients who fall in "Missed appointment" category and register their full name, complete addresses, etc, using Defaulter Tracing Register.

2.5 **Missed Appointment Tracing:** is referred to active tracing of clients who missed their appointment for more than 7 days and less than one month period based on pre-defined clients' care plan: Telephone address, Contact Person, and Home visit.

3. LTFU is referred to patients who interrupted their pre-ART, ART, PMTCT, and HEI FU for more than one month from that of their appointment date.

3.1 **LTFU Identification:** is defined as a process whereby clients who fall in "LTFU" category are identified, listed out, and basic information in terms of name, address, etc, is generated from facility database or patient medical chart after 30th day for tracing and recorded using Defaulter Tracing Register.

3.2 **LTFU Tracing:** is referred to passive tracing of patient who LTFU for more than one month based on pre-defined clients' care plan: Telephone address, Contact Person, Home visit, and LTFU tracing campaign for facilities with high LTFUs.

Roles and Responsibilities of MDAT in Patient Tracking

1. **ART Providers**
- Set pediatric/Pre-ART/ART, PMTCT, and HEI appointment date and record it on appointment calendars and provide appointment reminder card.
- Communicate clients' appointment date verbally and in written form using appointment reminder card.
- Review appointment calendars daily to ensure clients have attended their follow-up visit as per their appointment date set during last visit and marking "✓" sign on the appointment calendar in the attendance column if clients manage to attend their appointment on the scheduled date; write the date if the clients attended their appointment during the subsequent 7 days and marking **"X"** sign if clients failed to attend their appointment on the 8th day.
- Identifying and listing out clients who fall in "Missed appointment" category and register their full name, complete addresses, etc, using Defaulter Tracing Register.
- Re-engage and manage patients who returned to care accordingly. (see below the details)

2. ART Data Clerk
- Retrieve full address of clients identified as a missed appointment by the ART nurse.
- Trace missed appointment clients by phone call and contact person.

3. ACM / AS
- Record name, full address, etc, of clients identified as missed appointments using Defaulter Tracing Register.
- Trace missed appointments based on pre-defined clients' care plan: Telephone, Contact Person, and Home Visit.
- Register the outcome of the tracing using Defaulter Tracing Register.

4. Health Facility/ICAP RO
- Ensure regular active missed appointment tracing in all health facilities.
- Organize and implement passive LTFU tracing campaign for facilities with high LTFUs

Management of patients who returned to care by MDAT

1. **Re-engage patients** who returned to care by establishing trustful relationship
2. **Assess** reasons why patients missed their appointment/lost to follow up and manage accordingly
3. **Assess for adherence barriers including:** Depression/mental disorder, Living conditions, Substance use, Fear of stigma and Use of traditional remedies and manage accordingly.
4. **Evaluate patient's health status:** Clinical staging, Routine CD4 investigation, Assess for treatment failure and for OIs and manage accordingly
5. **Ensure family and social support system:** Encourage disclosure, family testing and patient to recruit treatment partner
6. **Educate and empower the patients to self-manage their care follow up and medications:** Ensure adherence assessment and counseling, collaborative goal setting and care plan development with patient, ensure adherence readiness to restart ART and restart ART with strict follow up

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