

Adherence Standard Operating Procedure

Step 1	Step 2	Step 3
<p>1.1 Conduct social, knowledge and barriers assessment for all newly enrolled clients</p> <ul style="list-style-type: none"> Assess patient understanding about modes of HIV transmission & provide information. Assess patient understanding about methods of HIV prevention & provide information. Assess patient health status, identify OIs and manage Assess potential risk behaviors, disclosure status, unsafe sex, substance use, and fear of stigma and provide information. <p>1.2 Introduction to HIV services</p> <ul style="list-style-type: none"> Engage the patient & establish trustful relationship. Explain chronic care follow up to the patient. Identify patient needs and social support system to make appropriate referrals. <p>1.3 Provide adherence counseling</p> <ul style="list-style-type: none"> Introduction to ART regimens Explain the Goals & benefits of ART Discuss about HIV medication Discuss about medication adherence Review ARVs side effects with patients Explain when to start ART Explain importance of adherence Explain the goals of adherence Explain risks of suboptimum adherence Explain nonadherence & its consequences Assess how patient is going to manage routine medication taking <p>1.4 WHO Staging</p> <ul style="list-style-type: none"> Clinical staging Immunologic staging 	<p>2.1 Assess patient Readiness to initiate ART</p> <ul style="list-style-type: none"> Assess patient perception, attitude, knowledge and skills towards HIV treatment. Assess potential barriers to adherence Explore patient's disclosure status Assess patient's living conditions Assess depression/ mental status <p>2.2 Initiate ART if patient is eligible</p> <ul style="list-style-type: none"> Set treatment goal with patient Ensure how patient take drugs Identify and manage drugs side effects Develop a simple and concrete daily medication taking plan Discuss family support system Develop reminder strategies Provide reminder card <p>2.3 If patient is not eligible, defer ART initiation & continue counseling and reassess.</p> <ul style="list-style-type: none"> Explain reasons for deferring ART initiation Encourage the patient to continue care follow up Support patient to develop care plan and address barriers 	<p>3.1 Assess adherence to medication at every visit</p> <ul style="list-style-type: none"> Ask open-ended questions Review the reasons for missed dose/ s If the patient missed doses, calculate the adherence rate Review reminder strategies Evaluate ARVs side effects and manage Identify patient's existing/ new adherence barriers & address Provide positive reinforcement for those with good adherence by acknowledging for efforts to reduce VL and increase CD4 count Provide ongoing adherence case management Link to ACM for those not achieving adherence goal/ s Provide written appointment reminder card
		