PrEP Service Delivery SoPs/tools

These materials were developed by LVCT Health as part of the Bill & Melinda Gates Foundation sponsored IPCP demonstration project and PEPFAR funded DREAMS project

Version number 001
Date 16th November 2016
The IPCP PrEP demonstration project was funded through a research grant from the Bill & Melinda Gates Foundation (Grant ID OPP1104919)

The U.S. President's Emergency Plan for AIDS Relief through the Centers for Disease Control and Prevention provided funding for the DREAMS program (Grant number U2G/PS002029-04)
DREAMS PrEP initiation flow chart

Willingness to take PrEP either through provide initiated or self request

Assess eligibility

HIV testing and Counselling

HIV +Ve

Link to HIV care and treatment

HIV -Ve

Does client meet PrEP indicated criteria?* (Screened)

NO

Risk reduction counselling

Refer for other services as appropriate

YES

Is client willing to take PrEP?

YES

Symptoms of acute HIV infections

Retest after 2 weeks

NO

Pre-existing renal impairment

HIV -Ve

Refer to renal specialist

Creatinine Clearance

<60

NO

YES

>60

Messages for client

- PrEP doesn’t;
  - Eliminate HIV infection risk
  - Prevent STIs or unintended pregnancies

- A combination prevention package:
  - Risk reduction counselling,
  - HIV testing,
  - Condoms and lubricants,
  - STI screening & treatment,
  - Contraception/FP,
  - Needle exchange & opioid replacement therapy.

PrEP initiation flow chart • Version 001 • Date.19/10/2016

Indications for PrEP*

- Known HIV + sex partner, not on ART or virally suppressed
- Sex Partner(s) of unknown HIV status & at high-risk
- Transactional sex
- Recent STI history
- Recurrent PEP use
- Sex under influence of alcohol or drugs
- Inconsistent/no condom use with persons of unknown HIV status
- Injecting drug use
- Sero-discordant couples trying to conceive
DREAMS PrEP follow-up flow chart

HTC

+VE
Care & Treatment

-VE

Explore barriers

Adherence Assessment

Unsatisfactory

Satisfactory

Assess for side effects

Manage adverse side effects (Refer to SOP for side effects)

Discontinue PrEP (Refer to PrEP discontinuation SOP)

Willingness to continue taking PrEP?

Discontinue PrEP (Refer to PrEP discontinuation SOP)

Willingness to continue taking PrEP?

YES

Encourage client to continue taking PrEP

PrEP refill prescription

Counsel/Provide other prevention interventions

Develop strategies to promote adherence

YES

Counsel/Provide other prevention interventions

NO

NO
DREAMS PrEP ADHERENCE PROTOCOL

INITIAL VISIT

1. Introduce yourself to the client, giving your name and role.
2. Provide information on PrEP as part of combination prevention per ART national guidelines.
3. Explain that PrEP must be taken daily for it to work.
4. Inform the client about possible side effects and how to handle them.
5. Discuss any challenges the client anticipates that may affect their PrEP adherence and address them.
7. Establish PrEP support mechanisms (e.g. buddy).
8. Discuss the circumstances under which PrEP may be discontinued.
9. Emphasize the need to use condoms for protection against STIs and HIV even with use of PrEP.
10. Provide an opportunity for client to ask any questions, clarifications or concerns and address them accordingly.

RETURN VISITS

1. Introduce yourself to the client, giving your name and role.
2. Assess client’s understanding of adherence - dosage and timing.
3. Explore client’s experience with taking PrEP- if she has been able to adhere
4. Check if client has any side effects and address them accordingly
5. Review any challenges the client may have faced and how they overcame.
6. If challenges still persist or client anticipates other challenges discuss strategies to overcome.
7. Emphasize the need to use condoms for protection against STIs and HIV even with use of PrEP.
8. Remind client circumstances under which PrEP can be discontinued and willingness to continue.
9. Provide an opportunity for client to ask any questions, clarifications or concerns and address them accordingly.
10. Schedule the next counseling session which aligns with next clinic/refill appointment date.
11. Provide client with any further reading materials and information on opportunities for further consultations such as telephone number.

NB: Provide condoms and lubricants as need be
Frequently Asked Questions (FAQs) on Pre- Exposure Prophylaxis (PrEP)

1. What is PrEP?
PrEP stands for Pre- Exposure Prophylaxis. PrEP is anti-HIV medication taken by HIV negative people who are at high risk of HIV infection to reduce their chances of becoming infected.

2. How is PrEP different from regular ARV drugs?
PrEP is an oral ARV drug used for HIV negative people for HIV prevention. However, the same ARV drug is used by HIV positive people when combined with other ARV drugs.

3. How does PrEP work?
When a person is exposed to HIV through blood, sexual intercourse or coming into contact with infected body fluid, PrEP significantly reduces the chances of being infected with the HIV.

What are the benefits of PrEP?
PrEP can help people who are HIV-negative with an ongoing risk of HIV infection to remain HIV-negative. It is more effective when combined with other prevention methods such as condoms.

4. When can I use PrEP?
Any person who is at high risk for acquiring HIV, and meets ANY of the following indications;
- Has a sexual partner who is known HIV positive and either: not on ART, has not been on ART for 6 months, Suspected of poor adherence to ART, or who has not achieved viral suppression.
- Sexual partner(s) are of unknown HIV status and are at high-risk for HIV infection i.e. has multiple sexual partners, has had STIs, engages in transactional sex, injects drugs
- Engaging in transactional sex (sex in exchange of gifts etc.)

5. When should I not use PrEP?
You should not use PrEP if:
- If you are HIV positive
- If you do not know their HIV status
- If you cannot adhere to a daily pill
- If you have been advised by a health care provider not to use PrEP.

6. How is PrEP (Pre Exposure Prophylaxis) different from Post-Exposure Prophylaxis (PEP)?
Even though PrEP and PEP are both taken by HIV negative people to prevent HIV infection, they are different. PrEP is used by HIV negative people who are at ongoing risk of HIV before exposure to reduce their chances of getting HIV. PEP is used by HIV negative people after a possible exposure to HIV but must be taken within 72 hours.

7. Should I use PEP if am taking PrEP and I suspect that am exposed to HIV?
Ideally, if you are taking PrEP every day consistently, you do not need to use PEP because PrEP already provides a high degree of protection from any potential HIV exposure. It is
advisable for you to seek guidance from a health provider for any further clarification.

8. What are the side effects of PrEP?
Some people who take PrEP experience side effects that last for a short period. These may include headache, weight loss, nausea, vomiting, and abdominal discomfort and often reduce or stop after a few weeks of taking the PrEP.

9. How should I take PrEP Pills?
The PrEP Pill should be taken once a day for as long as a person remains at risk of HIV infection (or as advised by the Health care provider). You should not take 2 pills at the same time or on the same day to make up for a missed dose.

10. Am I protected from HIV if I miss a PrEP pill or pills?
When you miss one or more pills, you are greatly reducing the ability of the PrEP to provide you with full protection against HIV infection. Evidence has showed that PrEP provides the best protection from HIV if it is taken consistently every day.

11. Can I share PrEP with others?
PrEP should only be taken by the person prescribed and should not be shared with others. Everyone who wants to use PrEP should discuss the intention with a health provider.

12. How long can I take PrEP?
Someone can take PrEP for as long as they remain at risk of HIV infection. However it is important to continue consulting a health provider for advice.

13. Can I use PrEP along with other medicines?
It is important to seek doctors’ advice on which medicines one can use together with PrEP.

14. When should I stop/discontinue taking PrEP?
You should stop/discontinue PrEP if you meet ANY of the following criteria are met:
  • HIV positive
  • If you reduce your risk for getting infected with HIV
  • If the health care provider informs you that your kidney (Renal) function is low after doing some test.
  • If you request to stop
  • If you are not adhering to the drugs well
  • If you are in a discordant relationship and your HIV positive partner has achieved sustained viral suppression. But you should continue to consistently use condom.

15. Can a pregnant woman take PrEP? What happens if a woman who is taking PrEP becomes pregnant?
Yes, if you are pregnant or intending to get pregnant and your partner is HIV positive, you can take PrEP.
QUALITY ASSURANCE & QUALITY IMPROVEMENT
PREP FOR DREAMS TOOLS

Standard operating procedures
• Commodity
• Adherence
• Risk assessment
• Client flow chart

National guidelines on ART – pages 129 – 134

Reporting tools
• Clinical tool (register)
• Appointment cards
• FCDRR & FMAPS
• Summary
• Follow up
• Consent forms
• DREAMS referral form
• PEPFAR indicator definition
• Commodity tracking tool

Tools regularly
Supervision (develop a plan)
• Support supervision
• Observed practicum (direct observation – Bi- annual)

On the job training (OJT)
Continuous medical education (CME)

PREP site support supervision checklist tool – LVCT Health
• Inputs/ infrastructural issues (youth friendly) – where, what, how should it looks?
• Process issues
• Outcome issues

Documentation and reporting
• Lessons learnt/ barriers
• Human stories
• Best practices

Client satisfaction surveys
Quality assurance & quality improvement teams with a plan (integrate PrEP QA&QI activities into the already existing community and facility QA teams and processes

Involvement of the AGYW/ beneficiaries in all activities

IEC materials

Quality Training