



# MINISTRY OF HEALTH AND SANITATION

## NATIONAL HIV/AIDS CONTROL PROGRAMME (NACP)

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### **COVID-19 GUIDANCE ON COMPREHENSIVE HIV SERVICE DELIVERY**

At present, there is no specific information/data about COVID-19 in people living with HIV (PLHIV). However, according to the World Health Organization (WHO), PLHIVs who are not on antiretroviral therapy (ART) or with unsuppressed viral load and low CD4 cell count are considered high-risk groups.

In light of the COVID-19 Pandemic, the National HIV/AIDS Control Programme aims to guide service providers offering HIV services and implementing partners to ensure continuity of HIV services for PLHIVs during the public health emergency for COVID-19. The following is advised:

#### **AT Triage**

1. All facilities should ensure that clients wash their hands with soap and water OR at least 60% alcohol-based hand sanitizers at arrival.
2. All patients presenting to the HIV clinic should be subjected to triage for COVID19
3. All health care workers providing HIV services shall maintain IPC measures including; correct use PPE, practise hand hygiene and observe social distancing recommendations with every client.
4. Avoid queues inside health facilities by setting up queues outside of health facilities and separate patients by at least 1.5 meters (arm span distance).

In case of a suspected COVID-19 case, please contact the emergency number below:

**078-690-563**

## **HIV Testing Services (HTS)**

HTS should continue; however, HCWs should adhere to IPC measures to prevent the spread of COVID-19.

- ALL OUTREACH SERVICES HAVE BEEN SUSPENDED DURING THIS PANDEMIC

## **Antiretroviral Therapy (ART)**

To reduce clinic attendance and drug refill frequencies, the following is recommended:

- COVID-19 prevention information, as well as HIV treatment adherence support and patient education, should be done at each visit
- Patients not on ART to start ART immediately; same-day ART initiation for newly diagnosed clients with one month or three-month refill (according to the WHO recommendations)
- Supply all patients who are on ARVs with 3-month ARV drug refill following the criteria below, as well as provide instructions to call the HCWs if the client has any concerns with their treatment:

All clients newly initiated on ART should receive the following:

- Monthly (or three-monthly) ARV refills
- Clinical and adherence assessment at each visit
- Viral load monitoring as per national guidelines (align the VL testing with the clinic visits)
- Adherence counselling

Pregnant women on ART should receive the following:

- Monthly (or three-monthly) ARV refills – *ACCORDING TO THE ANC VISIT SCHEDULE*
- Clinical and adherence assessment at each visit
- Viral load monitoring as per national guidelines
- Adherence counselling

Children on ART should receive the following:

- three-monthly) ARV refills
- Clinical and adherence assessment at each visit
- Viral load monitoring as per national guidelines
- Adherence counselling

HIV/TB co-infected clients should receive the following:

- Follow protocol as per national guidelines and TB Operational guidance for SL
- Synchronize drug refills for ART and TB

## **Laboratory Services**

- Early Infant Diagnosis (EID) and Viral load monitoring should continue as per national guidelines
- TB Screening and test should also be maintained as per guidelines
- Ensure IPC measures are observed at ALL times

## **Commodity Management**

Facilities should closely monitor ARV stock as well as perform a monthly physical stock count level to aid decision regarding multi-month dispensing of ARVs. NACP should be informed at least TWO WEEKS prior to complete stock out of commodities. NACP to ensure ad-hoc emergency distribution of drugs to all the facilities when required and to supply six (6) months stock of ARVs and Test Kits during the next integrated distribution which will be done in April 2020 by NMSA (**IF AVAILABLE**).

## **Drop-in Centers (DICs) for Key Population**

DICs should ensure that all clients at these centres follow IPC recommendation and ARV refills options are offered following guidelines as stipulated above. Social distancing of at least one meter (3 feet) is recommended at all times.

**ALL OUTREACH DONE BY KPS ARE SUSPENDED**

## **IN THE CASE OF A COMPLETE LOCKDOWN**

- All district supervisors must work with KP organizations in their districts to arrange lockdown passes for KP staff to move with ARVs when there is a shortage of drugs.
- All supervisors and counsellors to work with KP organizations to supply drug refills to their DICs.
- District focals must coordinate with KP organizations before the Lockdown for drugs refills and making sure all the organizations are supported
- NETHIPS to ensure that all their members are aware of the Multi-month dispensing and make use of this service.
- NACP and NAS District and regional staff work with partners at district level for adhoc drug distribution

### **NOTE:**

This guideline is recommended **ONLY** during COVID-19 Pandemic. NACP will provide further guidance as the situation continues to evolve.