

MONITORING HIV QUALITY CARE

Making a Case for Clinical Mentoring and Supportive Supervision

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July 26th, 2017

- The Monitoring Program and Supervised Visits are initiatives of the National AIDS Program, linked to the HIV treatment working group that meets quarterly at the national level. As part of the Quality Care program is intended to ensure:
 - Quality of Care/ Best Practices
 - Adherence to National Guidelines
 - Proper documentation and reporting across all regions of Guyana

- There are 22 Care and Treatment sites in Guyana, distributed among the 10 administrative Regions.
- Nine sites are located in Region 4, the largest region in the country.
- Every other Region has at least one treatment site.

How it is Done

- A team of experienced physicians conduct visits to treatment sites.
- There is direct interaction with health care providers: doctors, nurses, medex, social workers, pharmacist.
- Difficult cases are discussed
- Updates on guidelines are reinforced

Chart Review

- ❖ **Documentation:** From general patient information to physical examination
- ❖ **Follow up visits:** Adequacy, patient's compliance, counseling, interventions to bring back LTFU.
- ❖ Timely ARV's initiation
- ❖ **Appropriateness of ARV's regimen:** Adequacy of line of treatment, identification of treatment failure, adjustment in the presence of toxicity

- ❖ Availability of Laboratory testing on site.
- ❖ Monitoring of patients:
 - ❖ *Laboratory monitoring*: appropriate and timely request of laboratory investigations
 - ❖ *Clinical monitoring*: assessment of TB status, OI's monitoring and management, cervical cancer screening

Debriefing

- The full team meets at the end of the visit's period where findings are discussed
- Observations are made on achievements from previous visits, difficulties experienced by staff and patients at the site and new challenges.
- The national program identifies areas where assistance can be rendered and recommendations for interventions are made.
- A National report is prepared -

Dissemination of Findings

- Sites are provided with report on the findings and recommendations for improvement
- General findings are presented at a national level at the Quarterly Feed Back Meeting, where all the relevant stake holders are present.
- Representatives from VCT, NPHRL, PMTCT, Blood bank , MMU /supply chain etc, will have the opportunity to respond to any issues raised.

Mentoring

- Ongoing training of physicians at NCTC, the National Reference Site for HIV and other STI's
- Refresher Training of physicians already on care and treatment.
- Training of new physicians deployed to hinterland or treatment sites on the coastal areas.

Challenges

- The relative large geographical area in relation to population with difficult access.
- Continuous loss of trained personnel due to rapid staff turnaround.
- Doctors are deployed to hinterland areas without training on HIV/AIDS management.

Way Forward

- Continue and increase frequency of visits
- To include a comprehensive module on HIV at our Medical School
- Train every physician assigned to care and treatment sites specially those to be deployed to the hinterland, before their departure.

THANK YOU