**Module 3: How to Use the Adult Flipchart**

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| https://d30y9cdsu7xlg0.cloudfront.net/png/1303-200.png **Time: 90 minutes****Session Objectives**By the end of this session, participants will be able to use the Adult Viral Load Monitoring and Enhanced Counseling flipchart in order to:* Interpret and explain to patients the meaning of a viral load result <1,000 copies/ml
* https://d30y9cdsu7xlg0.cloudfront.net/png/16392-200.pngInterpret and explain to patients the meaning of a viral load result >1,000 copies/ml
* Assess adherence among those with viral load >1,000 copies/ml
* Develop targeted interventions to improve adherence assessment and support
* Manage next steps based on repeat viral load results

**Session Overview*** + - Orientation to the Adult Viral Load Monitoring and Enhanced Adherence Counseling Flipchart
		- Viral load results, interpretation, and explaining meaning to patients
		- Assessing adherence for those with elevated viral load
		- Developing an individualized adherence intervention plan
		- Repeat viral load testing and follow up on results

**Materials Needed*** Slides
* Adult Counseling Flipchart
* SOP Algorithm
* Enhanced Adherence Plan Tool
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| 55 minute Lecturehttps://d30y9cdsu7xlg0.cloudfront.net/png/128330-200.png | Trainer will:* Conduct an orientation to the Adult Viral Load Monitoring and Enhanced Adherence Counseling Flipchart and Enhanced Adherence Plan Tool
* Discuss viral load results, interpretation, and explaining meaning to patients
* Describe how to assess adherence for those with elevated viral load
* Explain the process of developing an individualized adherence intervention plan
* Describe the schedule for repeat viral load testing and follow up on results
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| 5 minute Wrap-up | Key points to emphasize in summary:* The Counseling Flipchart and Enhanced Adherence Plan are two tools that can help you support patients who are monitoring their viral load
* Patients with VL >1,000 copies/ml should undergo adherence assessment using the Viral Load Monitoring Flipchart
* Based on identified barriers, an Enhanced Adherence Treatment Plan with specific, targeted interventions should be developed
* Use cards 5-18 in the Adult flipchart to assist you in conducting the Enhanced Adherence Assessment
* The patient should have at least 3 sessions on a monthly basis, ideally with the first one at the time of delivering Viral Load test results
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| https://d30y9cdsu7xlg0.cloudfront.net/png/33918-200.png30 minutes Activity | **Activity: Instructor Demonstration – Enhanced Adherence Assessment**  |

**Methodologies**



* Lecture
* Activity: Instructor Demonstration – Enhanced Adherence Assessment

**Advance Preparation for Trainers**

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* Trainers should be able to demonstrate using the Counseling Flipchart
* Trainers should be able to demonstrate using the Enhanced Adherence Plan Tool
* Trainers should be prepared to demonstrate an enhanced adherence assessment

**Activity: Facilitator Demonstration**

Instructions:

* Facilitator will use the flipchart to demonstrate the following sessions: 1) initial viral load test, 2) explaining viral load results and conducting enhanced adherence counseling, 3) explaining follow-up viral load test results and reviewing the enhanced adherence counseling plan.
* A co-facilitator (or volunteer), will play the role of Grace, a character who is introduced in the previous module.
* For each card, the facilitator should demonstrate the following:
	+ Using **key messages** to emphasize important points
	+ Covering the **talking points** listed on the card
	+ Using **Let’s Review** questions (as applicable) to ensure that Grace understands the information they have discussed
	+ Using **Provider Instructions** (as applicable) to guide their interactions with Grace
	+ **Documenting** information (as applicable) on the Enhanced Adherence Plan Tool

Grace

* 28 years old
* Found out she was HIV+ 3 years ago while pregnant with her youngest daughter
* Has three children (8, 6, and 3 years old) who are all HIV-
* Took her medications every day while pregnant and breastfeeding, but has not been on ART since, and is presenting to the clinic today.

**Visit 1: Initiating ART**

* Facilitator uses *Card 1: You’re Starting ARVs* to explain how ARVs work in the body and what their benefits are.

**Grace has been on ART for 6 months and is now at the clinic for her visit, when viral load will be sent.**

**Visit 2: Viral Load Test**

* Facilitator uses *Card 2: What is a viral load?* to explain the concept of viral load.
	+ Instructor ensures that Grace knows when to come back for her viral load test results.

**Grace returns to the clinic within 1 week after high VL results have been received.**

**Visit 3: Explaining Results & Enhanced Adherence Counseling**

* Grace’s viral load test result is 25,000 copies/ml.
* Facilitator uses *Card 4: The Viral load is HIGH* to explain the results.
	+ Explains potential reasons for high viral load.
	+ Discusses with Grace the dangers of having a high viral load.
	+ Demonstrates using non-judgmental and respectful language to explain the results to Grace, and does not criticize or blame her for having high viral load results.
* Facilitator uses *Card 5: How are you taking ARVs?* to understand how many missed doses Grace has had.
	+ Facilitator demonstrates asking questions outlined in Provider Instructions.
	+ Grace shares with the facilitator that she often forgets to take her ARVs, sometimes up to 3 days a week.
	+ Facilitator documents the results on the Enhanced Adherence Plan Tool.
* Facilitator uses *Cards 6-8: What are the challenges in taking your ARVs?* to assess what specific barriers are making it hard for Grace to take her ARVs.
	+ Facilitator uses OARS skills (Open-ended Questions) to ask Grace about the different challenges she faces.
	+ Facilitator asks Grace about the different types of barriers she may be facing:
		- Individual
			* Grace shares that sometimes her ARVs make her nauseated when she takes them in the morning **(side effects).** It is also difficult to remember to take them in the morning because she is so busy with her three children **(forgets).**
		- Household
			* Grace has not been experiencing any household-level barriers.
		- Community
			* Grace shares that sometimes she avoids going to the clinic because she is fearful that people in the community will find out she is HIV positive **(stigma).**
	+ Facilitator uses OARS skills (Affirmations, Reflective Listening, Summary Statements) to summarize what Grace has said.
	+ Facilitator documents the barriers identified with Grace on the Enhanced Adherence Plan Tool.
* Facilitator uses *Cards 9-11: Tips to improve taking ARVs* to offer suggestions to overcome the barriers that Grace has identified (side effects, forgot, stigma).
	+ Side effects: review suggestions on Card 9, then discuss in further detail using Card 14 (Understanding your ARVs) to discuss managing side effects, health beliefs, and how medications work.
		- Facilitator suggests to Grace that since nausea is a concern for her, and she has identified dinner as a good time to take ARVs, that she take ARVs at this time since taking with food can also alleviate these side effects.
		- Grace agrees that this sounds like a good plan.
		- Facilitator documents intervention on the Enhanced Adherence Plan Tool.
		- Facilitator summarizes the plan made and has Grace repeat it back.
	+ Forgot: review suggestions on Card 9, then discuss in further detail using Card 13 (Remembering to take ARVs) to develop a better plan for taking ARVs.
		- Facilitator uses Provider Instructions to identify some daily activities that she can schedule taking her pills around.
		- Grace suggests dinner and bedtime since her husband is usually home and she has help with her children by then.
	+ Stigma: review suggestions on card 9, then discuss in further detail using card 15 (Managing Privacy and Support) to discuss the ways in which sharing her status with someone can in fact help her to take her ARVs regularly.
		- Facilitator uses Provider Instructions to ask Grace how helpful the tip seems, how likely she is to try the tip, and whether she has any other ideas.
		- Grace agrees to try to think of someone in addition to her husband to whom she can disclose.
		- Facilitator documents intervention on the Enhanced Adherence Plan Tool.
	+ Facilitator tells Grace when her next two follow up adherence counseling sessions will be.

**Grace has two additional adherence sessions (visits 4 and 5) and at both her adherence has improved to “good.” She is given a date for a repeat viral load (visit 6) and it is successfully sent on that day.**

**Grace returns to the clinic to get her repeat viral load results.**

**Visit 7: Explaining Follow Up Viral Load Test Results and Reviewing Enhanced Adherence Counseling Plan**

* Grace’s next viral load test result is 900, which means that she has successfully reduced her viral load.
* Facilitator uses *Card 17: You’ve successfully reduced your viral load* to discuss the results.
	+ Facilitator documents results of repeat viral load on the Enhanced Adherence Plan tool.
	+ Facilitator asks Grace about which parts of the adherence plan have been helpful for her.
	+ Facilitator asks if there are new barriers she wants to discuss.