



Society for Family Health Standard Operating Procedures for HIV Self-Screening Distribution Models

Facility Based Distribution

Purpose of the standard operating procedures:

The main purpose of this SOP is to provide a standardized approach to the distribution of HIV Self-Screening (HIVSS) kits across SFH distribution sites. This SOP is to be used by HIV self-screening (HIVSS) distributors, HIV Counsellor Testers, healthcare providers, trainers and managers on how to implement the HIVSS distribution channels and modalities within the HIVSS program. It should be used as a guide in the implementing districts and it is meant to provide guidance in targeting hard to reach or undiagnosed individuals. The distribution modalities, implemented through self-screening, outlined are not meant to replace but rather to complement traditional blood-based testing service.

1. Facility Based Distribution (Partner Notification)

a. Primary Distribution

- The healthcare provider will distribute HIVSS kits to clients who may be high risk or have not tested in past 12-months, but their visit to the facility is to seek other non-HIV related healthcare.
- Clients will be given a self-screening kit and will be shown the instructional video, on a tablet, smartphone, or instructional poster and will be encouraged to screen onsite and share their screening device result with the healthcare provider.
- Clients who screen negative will complete their visit to the facility and will be encouraged to regularly screen for HIV.
- Clients who screen positive will be provided with confirmatory services using the national validated algorithm on the same day and referred for further

managed healthcare.

- SFH will work closely with facilities, treatment and care implementing partners and referral coordinators to ensure clients are successfully linked to care
- Basic information will be collected from the client using REDCap™ data capturing application system and will include demographics and history of HIV testing.

b. Secondary Distribution

- HIVSS will be distributed to clients, for their regular sexual partner/s, who attend the antenatal clinics (ANC), individuals who visit the clinic for sexually transmitted infections (STIs), family planning, adherence clubs and support groups. No more than 2 kits will be distributed per client for their sexual partner/s.
- Clients will be encouraged to check with their partner if they may want a self-screening kit, and to check if the partner is happy to have their contact details passed on to program staff.
- The healthcare provider will administer a social harm questionnaire and index consent form to the recruited client prior to issuance of the kit/s for his or her regular sexual partner/s (refer to figure 1).
- In addition to the kit and HIVSS IEC materials (a WhatsApp version of the video, if he/she has WhatsApp) will be shared.
- A referral card and information slip addressed to partner/s will be enclosed to provide details on the process to follow should the partner/s screen positive.
- Basic information will be collected from the client, including demographics and history of HIV testing; the data will be collected using REDCap™ and the data will be recorded as secondary distribution for partners of key or high-risk populations.
- In situations where the partner is afraid to approach their partner/s the option of testing together as a couple will be offered to the client.
- Clients will be advised that a healthcare provider using the national validated algorithm should confirm a positive self-screening result.
- Clients will be informed about the places where confirmatory testing can be accessed, if needed.
- One week post collection of HIVSS kit, the client will be telephoned to ask if he/she gave the kit to the partner/s, whether the partner/s accepted it, whether the partner self-screened, and whether the result of the self-screen if known.

- If the self-screen was positive, they will be asked whether, when and where the partner sought confirmatory testing.
- Failure to confirm the above, where possible, clients will be followed up at the next ANC or FP visit to ascertain and confirm the HIVSS results and linkage to further managed care.
- SFH will work closely with facilities, treatment and care implementing partners and referral coordinators in the areas of implementation to ensure successful linkage to care.