As a health care worker, your work is critical to protecting and caring for your community from COVID-19, especially people living with HIV.
EVERYONE IS AT RISK OF CONTRACTING COVID-19

However, the outcomes are worse for:

- HIV positive people if low CD4 count or not on ART
- Heart disease
- Respiratory disease
- Older adults (60+)
- Diabetes
- Malnutrition
**Prevention - Educate Clients**

Protect yourself and others

1. Wash hands with soap / detergent for 20 seconds with running water
2. Avoid touching your face
3. Avoid surfaces that could be contaminated

For you and your clients - practise physical distancing.

Stay 1 metre away
Remember to provide HIV prevention messages and services to your walk-in clients.

HIV TESTING SERVICES (HTS)

Provide HIV Self-Test (HIVST) kits where applicable as a way of minimizing direct contact with clients.

Facility-based HIV testing should be prioritized for the following groups of people:

- Pregnant women
- Illness suggestive of HIV infection
- Individuals with TB, STIs and malnutrition
- Early infant diagnosis (EID)
- Key populations programming, especially if not facility-based
- Partner/index/family testing but not only for individuals already presenting at the facility
- Suspected COVID-19 clients

*Please note that HIV testing should not be conducted where Personal Protective Equipment (PPE) is not available.*
PreExposure Prophylaxis (PrEP)

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Clients already on PrEP should be given a 3-month supply of the PrEP medicines.

Consider innovative ways to assess side effects, adherence and other risk assessments usually performed at the clinic.

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<th>Text messaging (SMS)</th>
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<td>Phone call</td>
<td>Or other platforms available other than physical contact</td>
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How to help people living with HIV in the context of COVID-19

The following measures can help ensure high quality care for HIV Recipients of Care (RoC) as more information becomes available:

1. **Decongest health facilities:**

   Consider giving clients 3 - 6 months supply based on your current stock-status. ENSURE that all patients are fully catered for when you do so.

   Priority groups for receiving more than 3 months of ARV supply are:

   - PLHIV on ART 50 years of age and older
   - People with comorbidities i.e. diabetes, cancer, hypertension/cardiovascular disease
   - Adolescents

   50+
Stagger ART Clinic Appointments

Book clients using specific dates and time.

Please note that maximum number of clients to be seen in an hour is 10 clients per clinician.

For PLHIV on ART who need more intense support e.g. those requiring EAC sessions can still be seen and social distancing maintained.
VIAC SCREENING

VIAC screening done as part of routine ART visits may continue.

The evaluation and treatment of women with high-grade lesions may also continue with their recommended medical management.

TB/TPT

For PLHIV already on TB and TPT regimens, sites are to ensure that they have the remaining doses needed to complete a full course of treatment.

Side-effects monitoring can be done remotely via phone and/or SMS and/or electronically.
DIFFERENTIATED SERVICE DELIVERY (DSD) MODELS

Strengthen DSD models such as family ART refills, community ART refill groups (One person to collect for the family/group)

Distribution of ARVs to members be done individually and not to the larger group (CARGs are discouraged from conducting their usual support-group meetings in the community until the COVID crisis subsides)

Psycho-social support given through text messages, phone calls or WhatsApp groups
WHAT ELSE SHOULD I KNOW AS A HEALTH WORKER?

- Coordinate with your District Pharmacy Manager before implementing 6MMD to ensure that stocks do not run out.
- For those receiving 6MMD, advise Recipients of Care on the need to keep the medicines secure and to open one bottle at any given time.
- Triage any clients who are unwell (flulike/respiratory symptoms, fever). These to be seen first and provide them with a face mask immediately upon arrival.
- Ensure all HIV RoC are given the Health Facility phone number so that those who become ill at home can notify facility and receive appropriate intervention.
- Where possible an ill person coming to the HF with symptoms suspicious of COVID-19 infection should call ahead to notify the in-charge, so they are aware and able to immediately separate the patient from other patients and place a face mask on them on arrival.
- Ensure clients have access to condoms and where possible, give more supplies than usual, especially during a lockdown.
- Remember to support your clients with information and services on family planning, including long term contraceptives.
- Circumcision should be limited to walk-in clients only. All clients that had been circumcised must be reviewed until complete healing has been achieved as per national guidelines.
Protect yourself and others from COVID19

ABOUT HOW IT SPREADS

Sick person to healthy person; cough, sneeze or talking droplets

Someone who doesn't seem sick to a healthy person; cough, sneeze or talking

Contaminated surface when a sick person touches a surface and then a healthy person touches the same object and touches their face
Know the symptoms of COVID-19

SYMPTOMS OF COVID-19

The most common symptoms of COVID-19 are:

- Fever
- Difficulty breathing
- Dry cough

Some patients may have aches and pains, tiredness, nasal congestion, runny nose, sore throat or diarrhoea.

These symptoms are usually mild and begin gradually. Some people become infected but don't develop any symptoms and don't feel unwell.

Most people (about 80%) recover from the disease without needing special treatment. Around 1 out of 6 people who get COVID-19 become seriously ill and develop difficulty in breathing.
Call the Ministry of Health and Child Care Hotline Numbers: 2019, or Youth Advocates Forum toll-free line 393. The lines operate 24 hours a day.

Note that you can use this job aid in conjunction with the Ministry of Health and Child Care’s ‘Rapid Guidance on HIV Service Delivery in COVID-19 Context’.