This package of tools includes the Appointment Register, Appointment Register Monthly Report and Defaulter Tracing Form. These tools are designed to help CHWs trace and track patient appointments to ensure that they are retained in care and adherent to their ART. Instructions for using each of the tools is described below in the following sections.

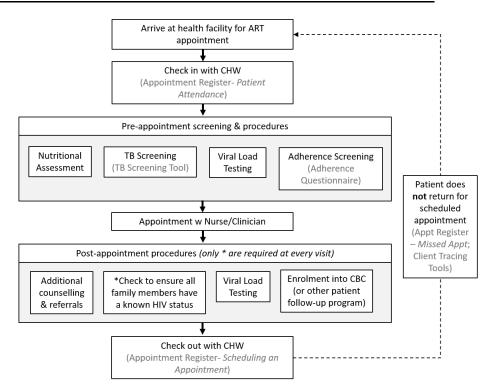
Section 1: Overview of the Case Management Process and Corresponding Tools

Section 2: Appointment Register

Section 3: Appointment Register Monthly Report

Section 4: Defaulter Tracing Tool

SECTION 1: OVERVIEW OF THE CASE MANAGEMENT PROCESS AND CORRESPONDING TOOLS



SECTION 2: APPOINTMENT REGISTER

The purpose of the missed appointment/defaulter tracing program is to identify patients who have missed ART appointments and thus are at risk for poor outcomes. CHWs will be instrumental in tracking missed appointments and counseling patients on the importance of returning to care. This register is intended for use by health facilities that do not already have a way to monitor and track patient appointments.

Definitions:

<u>Missed appointment:</u> For this program, a client should be traced by a CHW if s/he misses the scheduled appointment date by > 2 weeks. <u>Client Tracing:</u> Activities to locate the client and provide counseling/information, either phone calls or physical visits (at home or other meeting place)

Procedure:

- 1. All scheduled HIV clinic appointments should be entered in the appointment register. Each date will have one or more designated pages in the appointment register & the client's information should be entered on the page for the scheduled follow up date.
- 2. Complete the name, ART number, age, sex.
- 3. On the scheduled date of the appointment, the CHW should circle "S" in the Patient Attendance column for all patients who attended clinic on their scheduled appointment date.
- 4. If a patient does not attend, the Patient Attendance column can be left blank on the date of the scheduled appointment.
- 5. If a patient comes at a later date for their appointment, the Patient Attendance outcome should be updated on the patient entry for the date of the scheduled appointment. If they are late but <2 weeks, circle "WK" for within two weeks of date; if they are late by >2 weeks, circle "MA" for missed appointment by more than two weeks.
- 6. Every Friday, the focal person for Client Tracing (CHW) should check the appointment register for the previous week. All clients who have not come to clinic for > 2 weeks (circled MA) should be assigned to CHWs for client tracing.

- 7. The column for the name of the responsible for client tracing should be completed at this time in the 'Responsible CHW' column. Details of the client tracing procedure can be found in the 'Client Tracing Tools' section.
- 8. The tracing outcome should be recorded by the next monthly reporting period or sooner if the tracing procedure has been fully exhausted. It is possible that this outcome could change in future, however the outcome in the appointment register is the outcome on that date when it is assigned by CHW.

Example: If the scheduled appointment was in January and by reporting in the first week of March, the CHW tried but not able to trace the client by phone or home visit, then the outcome is "Attempted, but not found" and the CHW should enter the date in March.

- 9. The column results should be totaled for the designated columns in the Appointment Register.
- 10. If the client returns for their appointment >2 weeks, the CHW should update the appointment register with the date they attended their appointment.

Design of Register:

Each sheet of the appointment register is designed to be one day. Sheets can be bound together in a traditional register form or in a binder to allow for pages to be removed or added as needed. Alternatively, the dates can be pre-filled to ensure only a certain number of patients are entered for each clinic day. This promotes a better quality of care because clinic dates are not overbooked to ensure clinic staff can comfortably manage the number of patients.

The process works best when there is a CHW assigned to be responsible scheduling at every clinic day – checking in patients as they arrive for clinic and recording their next appointment before leaving. The register should be stored at the ART clinic.

Time to	Heading	Description	Response Options
While scheduling	Name	first name of the client	
their next ART refill	Surname	last name or family name of the client	
appointment	ART Number	Unique ID given to a patient by the MOH when initiated on ART	
	Sex	the gender and/or current pregnancy state of the client	M = male; FNP = female non-pregnant; FP = pregnant female
	Age	Age of the client	A= aged 0 to 11 months; B= aged 1 to 14 years; C=aged 15 to 24 years; D = aged 25 years or more
On or within 2 weeks of the patient's scheduled appointment date	Patient Attendance	Indication that the patient attended their scheduled appointment	S = on scheduled date; WK = within two weeks of scheduled appointment date; MA = has not attended scheduled appointment within two weeks and needs tracing
Two weeks after scheduled	Needs Tracing	Indication (with an X) that the patient has not attended their scheduled appointment within two weeks and requires tracing by a CHW	If tracing is required, fill this section with an 'X'
appointment	Responsible CHW	The CHW appointed to trace the client	Write CHW first and last name
Following tracing attempt (all must be completed by end of reporting month)	Final Tracing Outcome	The final tracing outcome (i.e. outcome after one successful tracing attempt or two unsuccessful attempts)	D= died; I = Found through tracing and client has said they intend to return to clinic (fill date attended apt w rescheduled); M = moved; AE = client is now receiving ART at a different health facility; R = client has declined or refused to return to ART clinic; AT = tracing attempts were made, but the client could not be found/traced; NT = no tracing was attempted
On the date the patient	Date Attended Appointment	If the patient did not attend clinic within two weeks of their scheduled appointment, write the	DD/MM/YYYY

attended their rescheduled appointment		date of the date that they actually attended clinic (will usually be after tracing)	
	Comments	Any comments. Specific comments are required for those that indicated 'No Tracing Attempt'	

SECTION 3: APPOINTMENT REGISTER MONTHLY REPORT

This form is a reporting tool to help programs monitor and evaluate a health facility's progress toward Appointment Register goals. This tool is designed to be filled using data from the Appointment Register.

- The Monthly Report should be completed by the 5th day of the following month (Example: Monthly Report for October should be submitted by November 5th).
- Two staff at the site should complete the report by recording data in the Site Result column, and signing their names on report.
- The Site Supervisor will also review the report for data quality, sign and date.
- Comments sections are to be used to explain any unusual or incomplete data.
- Appointment Register data is collected from the Tingathe Program Appointment Register.
- All missed appointment data is reported for the previous month. The Reporting Month is the month you are filling the
 monthly report, and the Outcome Reporting Month (ORM) is the month the data is from.

			S	ex		A	ge		Patie	ent Atte	ndance					Final	Tracing	Outcome				
urname	First Name	ART Number	Male	Female	0-11 mo	1-14y	15 - 24 y	25 + y	On scheduled date	Within 2 weeks of date	Missed appointment > 2 wks	Needs tracing (Mark X)	Responsible CHW	Died	Found, intends to return	Moved	ART at another Facility	Declined/Refused	Attemped, but not found	No tracing attempt* (Give reason in comments)	Date attended appointment	Comments
											12			0	9	3	0	0	0	0		
											A1			B1	B2	B3	B4	B5	В6	B7		
																				Total # MA		
Possible reaso	ns for no tracing	attempted: no	conta	ct inf	fo/file	not f	ound:	natio	nt cam	o for fol	llow up be	oforo tr	acing attempt; released tra	cina: CUM	l error					clients who attended appointment	8	

	Miss	ed Appo	ointr	nen	5- L	lse	Арр	ointı	nen	t Re	gist	er (E	lep:	ort D	ata	for l	Previ	ous	Month	1
nstructions: The following data will be filled from the outcome reporting month (ORM) from the Appointment Register. Please see to letermine the ORM. After determining the ORM, write both the reporting month and the ORM below.																				
determine tl	ne ORM. Afte	<u>r determinii</u>	ng the	<u>: ORI</u>	<u>4, wri</u>	<u>te bo</u>	<u>th the</u>	repo	<u>rting i</u>	<u>nont</u>	<u>n and</u>	the C	PIN	below	<u> </u>					
Reporting Month Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec																				
		ORM	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	`					
Re	porting Mo	nth:						0	utco	me	Rep	ortin	g M	onth	(OF	₹М):				
MA1	Total Num	nber of Clie	ents F	Regis	tere	d Ap	poin	tmen	t Re	gister									10	0
	Number	of clients (vith a	a Mis:	sed	Т													_	П
MA1.1	appointr	nent>2 wk	(S			Ap	poin	tmen	t Re	gister	(Bo	x A1)							1	2
MA 2.0	Died					Ap	poin	tmer	it Re	gister	(Bo	x B1)								0
MA 2.1	Found, inte	ends to ret	um			A	poin	tmen	it Re	gister	(Bo	x B2)		\top						9
MA 2.2	Moved					A	poin	tmen	it Re	gister	(Bo	х В3)		T						3
MA 2.3	ART at and	ther Facil	ity			A	poin	tmen	it Re	gister	(Bo	х В4)		1						0
MA 2.4	Declined/ F	Refused				A	poin	tmen	it Re	gister	(Bo	x B5)		1						0
MA 2.5	Attempted	, but not fo	ound			Αp	poin	tmen	t Re	gister	(Bo	x B6)		1						0
MA 2.6	No Tracino	Attempt				Αp	poin	tmen	it Re	gister	(Bo	x B7)								0

- 1. Fill the top of the monthly report with the site name, district, reporting month and reporting year.
- 2. Collect the Appointment Register.
- 3. Count the total number of clients the appointment register by counting each name registered. Write this value in MA1 'Total number of clients registered'.
- 4. Tally and complete the total section at the bottom of each Appointment Register sheet for the reporting month.
- 5. Add the total boxes across each sheet (e.g. add the Box A total from page 1 to Box A total from page 2, etc).

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- 6. Enter the calculation totals into the corresponding row on the Monthly Report in the 'Site Result' column.
- 7. Once all sections have been completed, sign and date the report, then give it to the site supervision for a data check.

SECTION 4: DEFAULTER TRACING SHEET

While defaulters should be identified through the appointment register system, the defaulter tracing program will provide extra attention to those who have defaulted from care.

Definitions:

<u>Defaulter:</u> A client who has missed a scheduled ART refill appointment by more than 2 months

Procedure:

- 1. Each quarter, the ART clinic and Tingathe staff (clinical mentors and CHW with support of district M&E officer) should complete an audit of patient records to determine those who have defaulted from care.
- 2. Clients who have defaulted should be documented on the Defaulter Tracing Sheet.
- 3. The defaulter tracing focal person should assign a CHW to each patient for tracing. Details of the client tracing procedure can be found in the 'Client Tracing Tools' section.
- 4. Weekly, the defaulter tracing focal person should follow up with CHWs about their final tracing outcomes. Outcomes for all patients should be recorded by the next monthly reporting period or sooner if the tracing procedure has been fully exhausted.
- 5. Extensive adherence counselling is necessary for all traced patients. If the patient was traced via phone, CHWs should ensure the patient receives the counselling when they return to the health facility. If traced at home, counselling can be done there.

Design of Sheet:

Complete the top of the sheet with the date of the audit and the name of the health facility.

Time to Complete	Heading	Description	Response Options
At time of audit	Date of Last Scheduled ART Refill (>2 mo ago)		
	Name	first name of the client	
	Surname	last name or family name of the client	
	ART Number	Unique ID given to a patient by the MOH when initiated on ART	
	Village	Name of the patient's village	
	Phone Number	Phone number of patient	
	Sex	the gender and/or current pregnancy state of the client	M = male; FNP = female non-pregnant; FP = pregnant female
	Age	Age of the client	A= aged 0 to 11 months; B= aged 1 to 14 years; C=aged 15 to 24 years; D = aged 25 years or more
Immediately after audit by defaulter focal person	Responsible CHW	The CHW appointed to trace the client	Write CHW first and last name
At time of final outcome (follow up CHWs weekly for	Final Tracing Outcome	The final tracing outcome (i.e. outcome after one successful tracing attempt or two unsuccessful attempts)	D= died; I = Found through tracing and client has said they intend to return to clinic (fill date attended apt w rescheduled); M = moved; AE = client is now receiving ART at a different health facility; R = client has declined or refused to return to ART clinic; AT = tracing attempts were

			<u> </u>
outcomes, final			made, but the client could not be found/traced; NT = no tracing was attempted
completion by end of following	Date of Outcome	Date of the final tracing outcome. If 'Found, intends to return', then the date that the patient returned to clinic	DD/MM/YYYY
month)	Comments	Any comments. Specific comments are required for those that indicated 'No Tracing Attempt'	

Complete this Information when Scheduling Appointment															COM	PLETE ONL	Y FOR PA	ATIENTS WI	ED APPOINTN	ENT > 2 WEEKS		
			S	ex		A	ge		Patie	nt Atte	ndance					Final	Tracing (Outcome				
Surname	First Name	ART Number	Male	Female	0-11 mo	1 - 14 y	15 - 24 y	25 + y	On scheduled date	Within 2 weeks of date	Missed appointment > 2 wks	Needs tracing (Mark X)	Responsible CHW	Died	Found, intends to return	Moved	ART at another Facility	Declined/Refused	Attemped, but not found	No tracing attempt* (Give reason in comments)	Date attended appointment	Comments
			М	F		В	С	D	S	WK	MA	*		D	_	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	*		D	I	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	•		D	I	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	*		D	I	М	AE	R	AT	NT		
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			М	F	Α	В	С	D	S	WK	MA	•		D	I	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	•		D	I	М	AE	R	AT	NT		
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			М	F	Α	В	С	D	S	WK	MA	•		D	-	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	•		D	1	М	AE	R	AT	NT		
			М	F	Α	В	С	D	S	WK	MA	*		D	ı	М	AE	R	AT	NT		
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			М	F	Α	В	С	D	S	WK	MA	•		D	I	М	AE	R	AT	NT		
											A1			B1	B2	B3	B4	B5	B6	B7		

^{*}Possible reasons for no tracing attempted: no contact info/file not found; patient came for follow up before tracing attempt; refused tracing; CHW error

Total # MA clients who attended appointment

Date of A	Date of Audit: Health Facility Name: Sex Age Final Tracing Outcome																				
						S	ex		Ą	ge				Fir	nal T	racir	ıg O	utco	me		
Date of Last Scheduled ART Refill (>2 mo ago)	Surname	First Name	ART Number	Village	Phone Number	Male	Female	0-11 mo	1 - 14 y	15 - 24 y	25 + y	Responsible CHW	Died	Found, intends to return	Moved	ART at another Facility	Declined/Refused	Attemped, but not found	No tracing attempt* (Give reason in comments)	Date of Outcome (if 'intends to return', write date of return)	Comments
						≥ M	F	Á	В	C	D 2			<u> </u>	<u>≥</u>			ΑT	NT NT		
						M	F	Α	В	С	D		D	<u> </u>	М	_		AT	NT		
						М	F	Α	В	C	D		D	Ħ	M	_	_	AT	NT		
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	ngathe Appointment Register Monthly Report																
Tingathe Ap	<u>opointment Registe</u>	r Month	ly Repo	<u>rt</u>													
Site:)istrict:									
Reporting N	Month:			Reporti	ng Year	:											
Instruction	ons: Site supervisor quality ch													inal until all data			
Appointme	nt Register																
	Missed Appointments- Use Appointment Register (Report Data for Previous Month) ions: The following data will be filled from the outcome reporting month (ORM) from the Appointment Register. Please see table below																
	ions: The following data will be filled from the outcome reporting month (ORM) from the Appointment Register. Please see table below to e the ORM. After determining the ORM, write both the reporting month and the ORM below.																
	Reporting Month Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec													-			
	ORM	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov				
I	Reporting Month: _			Outcome Reporting Month (ORM):													
	Descrip				D	ata Loca	ation		Accı	ıracy ch	eck	Site	Result	M&E Check			
MA1	Total Number of (Registered in OR			Appointr	mant Pa	aietor											
IVIAI	Number of clier		a	Дрропп	Helit IXE	gistei											
MA1.1	Missed appoint	tment >2	wks	Appointr	ment Re	gister (B	ox A1)										
MA 2.0	Died			Appointr	ment Re	gister (B	ox B1)										
MA 2.1	Found, intends to re	eturn		Appointr	ment Re	gister (B	ox B2)										
MA 2.2	Moved			Appointr	ment Re	gister (B	ox B3)										
MA 2.3	ART at another Fac	ility		Appointr	ment Re	gister (B	ox B4)										
MA 2.4	Declined/ Refused			Appointr	ment Re	gister (B	ox B5)										
MA 2.5	Attempted, but not f	ound		Appointr	ment Re	gister (B	ox B6)										
MA 2.6	No Tracing Attempt			Appointr	nent Re	gister (B	ox B7)										
Comments:																	
Report Con	npleted by			Date Su	bmitted	: <i>J</i>	_/	_ Sigr	nature:					_			
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Entered by	(for M&E only)			Date E	ntered_		\$	Signatur	e								