# IDI-HCP-009

Thank you for agreeing to take part in this key informant interview,

Facility /site operation

1. Please tell me about works of this facility/ site what happens to the client from the time he/she registers for service

Res: Basically this station was supposed to have a nurse counselor who works here for the whole day but unfortunately this is not the case for our hospital due to shortage, we are two but I also work in the labor ward and my colleague work assist duties in a male medical ward, so when we come in the morning we come here prepare our equipments then we go to our other duties, at around ten is when we come here to start counseling and HIV testing or sometimes a bit early depending on the duties in the ward.

Int: I see, so then what do you do when you come to this station…

Res: I start with registering their names in our VCT book ( she showed me the book) then if they are more than five, I do group counseling, but if they are few I do one by one counseling and testing one the client comes out of the room she already has the results...

Int: Is facility offering care and treatment services?

Yes, this is a district hospital, so when there is a positive clients I refer them to CTC which is not far from here, you can see other people waiting over there that is the CTC

Int: What are procedures for referral at this facility/site?

Res: I write the details of the client in this form (showing the form) and give it to the client to show it to CTC staff, for them to continue with care.

Int: Are there official documents or guide lines /processes for Referral at the site? Res: mmh… I only know this form, I have not seen any other guideline unless it has not brought to my attention.

Int: Please tell me what happens after the client registers at HIV care clinic or CTC?

Res: I guess the staff from CTC will be in good position to give those details but, the way , I understand they also register the patient in the CTC book and give them a CTC care number and they give a Card for the patient to bring it every time he/she comes for care. They send them to see the doctor for staging and CD4 test and when the results come they may start ART if CD4 count is low or they will be followed up after every three months.

Int: How do you follow up clients after HIV positive result? Pre ART and also on ART?

Res: in the past days there was follow up by the HBCs but since the project ended, they are no longer active but you may ask at the CTC may be they still work ( I later Checked with the CTC staff currently there no active follow ups)

Int: Are there some of the clients who are reluctant to enter HIV care after diagnosis?

Res: yes there are few but most of them because they come here while sick … they are in pain so they go to CTC, though there few patients who will say, I want to first go home and tell my relatives then I will come on another day and they never show up

Int: In your opinion what make it difficult for a client to enter or join HIV care?

Res: I guess most patient …They do not understand that is importance being in care even if they are not sick yet; I’m not sure but I think may be education is still low, they do not understand that is important to start ART while you are still strong than when very weak

Int: What makes it easier for client to enter HI V care?

May be we should keep on educating patients and explaining to them

Int: What do you think can be done to improve things here with regards to linkage and continuity in HIV care?

Res: I don’t know may be the other thing here is too long queues of patients waiting for care,….at the CTC now patients have to come in blocks, like the morning group is attended between 8.00- 10.00, then the second group to 1.00 and then the last group in the afternoon, buts still it does not help the clinic is always full morning to evening, most of the time they finish at four even five.

so even when you tell a client to go and join the cue, he will just say, there too many people, I will come tomorrow and that is it, They disappear , we don’t know whether they go to other places or what happens to them

Int: but during registration you write their phone numbers, is there any arrangement for the staff to call just to check on them?

Res: Yes we record the phone numbers but how do you call using who’s airtime , there is no budget for patient tracking at all., though occasionally if may be you know the patient or you are close you may call but is not a usual practice

Int: Thank you for your time, I’m done with my questions, do you have any question for me before we close the discussion!

Res: yes but this is not about your study, is about a certain project in … (it was not related to the discussion but I did respond accordingly).