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# Acronyms and Abbreviations

# Definition of Terms

Lost Status – A patient is automatically marked lost if s/he has missed their Pharmacy appointment date by 30 days.

Loss To Follow Up Status (LTFU) – A patient is automatically marked lost to follow up if s/he has missed their Pharmacy appointment date by more than 90 days.

Main site – A hospital, health centre or clinic with its own EDT computer used to manage patients who come for ART services at the site.

Peripheral site – A neighbouring site (i.e. health centre or clinic), that does not have an EDT computer. Data for this site is collected using the EDT Mobile or the ART Recruitment form for new patients started at the site.

# Introduction

# Overall Objectives of the Training

## EDT Training Objectives

By the end of the training, participants will be able to:

* Use the EDT toolset to improve ART service delivery at public health facilities
* Manage patients at main sites using the EDT
* Manage ARV stock at main site using the EDT
* Manage patients at peripheral sites using the EDT Mobile
* Generate and use EDT Reports for ART Reporting

## Duration of the Training

The recommended duration of the training is two (2) days (Annex E).

## Target Learners

The training is intended for both pre-service and in-service training of pharmacy students or staff. This includes Pharmacist, and/or Pharmacy Assistant students before they go for field attachments or before they graduate from UNAM or NHTC respectively. It is also intended for training and re-fresher training of pharmacy staff already working at public health facilities as the need might arise within the MoHSS.

Training on the EDT Mobile is also intended for nursing staff at primary health care (PHC) facilities that provide full ART services.

# Training Approach

Before the training can begin, the EDT training laboratory needs to be prepared to enable trainees to be familiarised with the tool in a practical simulation environment. It is not recommended to provide this training without hands-on participation by trainees. Guidelines that the IT team require to prepare an EDT training environment are provided in Annex G.

Training is based on four (4) major EDT processes for efficient delivery of ART services (to be explored in detail in subsequent sections). The four (4) processes are further subdivided into function-specific processes demonstrating how to use the EDT to achieve the intended action.

Training involves the use of power point slides and hands-on use and practical demonstration of EDT processes on the EDT computer. The demos on the EDT computer are done simultaneously as the instructor describes the process or can be done at the end of each session.

In addition, knowledge pickup and retention is enriched through the practical sessions based on case studies given to the trainees in the EDT training laboratory. Knowledge is assessed through the introduction of pre-and-post tests before and after the training on the system.

A training programme/schedule is attached (Annex E) and can be customised accordingly. The recommended duration of the training is two (2) days.

Knowledge retention will be measured using EDT statistical indicators at site level to determine if the tool is optimally used. These include completeness of data, e.g. unique number entry; analysis of dispensing practices; volume of duplicate patient entries; optimal distribution of patient pickups over the month; number of stock taking done over a given period; use of the EDT Mobile; and completeness and accuracy of the ART Monthly report.

# Getting Started with the Electronic Dispensing Tool

This section introduces training participants to the EDT toolset and the EDT menu. It further highlights the processes that take place when the EDT is started and the do’s and don’ts related to the EDT system. *Applicable Section in User Manual:* *Chapter 1.*

By the end of the session trainees will be:

* List the components of the EDT toolset
* Login to the EDT system
* Understand the importance of the EDT start-up process
* List the do’s and don’ts related to the EDT system
* List the main functions of the EDT desktop application

The EDT toolset comprises:

* The EDT desktop application (the main tool)
* EDT Reports desktop application (for generating reports)
* EDT Mobile (data collection terminal)
* EDT Printer (for printing medicine labels)
* ART national database (NDB)
* EDT 3G dongles (for electronic data transfer to the NDB)

Additional tools used with the EDT toolset include:

* The ART Monthly Reporting Template
* ART Recruitment Form (for peripheral sites)
* ARV Medicines Codes Leaflet
* Medicines Leaflet for Stock Taking
* Patient’s File (Patient Care Booklet)
* Patient’s Passport

The EDT Start-up Process:

When you open the EDT desktop application, you will see a login request, after which the following start-up process will take place before the main menu is activated:

* A Stock Take Reminder will be displayed, indicating how many days stock take is overdue.
* Patients’ ART Statuses will be automatically changed based on the following rules:
  + Active to Lost for patients who have missed their appointments by more than 30 days (one month)
  + Lost to LTFU for patients who have missed their appointments by more than 90 days (three months)
  + Transferred-in to Active for patients who were transferred in from another facility 30 days ago (one month)
  + Restarted to Active for patients who restarted ART 30 days ago (one month)
* Note that delayed status changes constitute a measurable indicator that the EDT system is not being optimally used which could affect the reliability of your health facility data.

Guidelines for getting the best out of the EDT:

Do’s:

* + Ensure that the unique number is entered on the EDT when starting or managing patients
  + Before you dispense always make sure the **date of visit** is accurate
  + Reverse the full dispensing done rather than dispensing the difference
  + If you have to work during lunch hours, use the EDT Mobile

Don’ts:

* + Do not change the EDT computer’s **system** time. This will affect the reliability and quality of your facility’s data and may corrupt your database.
  + Do not enter in-transit patients as NEW patients on your EDT system.
  + Do not use the EDT computer during lunch hours, use the EDT Mobile instead

The main functions of the EDT include:

* Patient Management
  + Dispense *– used to dispense to existing patients and automatically calculate adherence by pill count*
  + Patient View *– used to manage existing patients*
  + Patient Add *– used to add new, transferred-in or in-transit patient*
  + Appointments *– used to manage patient appointments*
* Stock/Medicines Management
  + Receiving stock *– used to receive medicines into the system*
  + Issuing stock *– used to issue medicines to other sites*
  + Medicines *– used to view medicine details including dispensing, receiving, stock-take history, and quantification (amendments are done centrally)*
  + Stock Take *– used during stock taking to update stock levels*
  + Quantification *– used to view the recommended re-order quantities based on consumption*
* Export/Import from the EDT Mobile
  + Creating files and sending them to the EDT Mobile
  + Receiving/importing files from the EDT Mobile
  + Verifying imported data

# Electronic Dispensing Tool Processes for ART Service Delivery

## Patient Management at Main Site

*Entering Patients into the System*

New Patients (incl. PMTCT Option B+)

Continuing Patients (Transfer In & In Transit)

*Stopping Patient Management on the EDT*

Deceased, Transfer out, Stopped by Physician

Re-starting Patients on the EDT

*Managing Patient Details on the EDT*

Updating the patient’s regimen & other details of the patient

Updating the outreach/IMAI site of a patient

*Practical session*

*Dispensing to Patients & Reversing a Transaction*

Dispensing to all patients other than in-transit patients

Dispensing to in-transit patients

Reversing a dispensing transaction (correcting a script)

Determining a patient’s adherence during dispensing

*Practical session*

## ARV Stock Management at Main Site

*The EDT Stock Management Module*

Receiving and Issuing of stock from the EDT

Recording stock take details

*Practical session using case studies*

*Pre-test results and discussion*

## Patient Management at Peripheral Sites

ART Recruitment at PHC facilities for updating the EDT

Using the EDT Mobile at PHC facilities (Practical session)

## Reporting and ensuring data quality for the ART Programme

Generating & Using EDT Reports (Practical session)

# Annex A: Case Studies

# Annex B: Job aids and Forms

## ART Recruitment Form for PHC facilities without the EDT

## ARV Medicine Leaflets with barcodes and three digit codes for dispensing using the EDT Mobile

## ART Monthly Reporting template

# Annex C: Power Point Training Slides and Workbooks

# Annex D: Pre-and-Post Test (Exercise) Sheets

# Annex E: Training programme/schedule

# Annex F: Feedback forms for completion by participants

# Annex G: Preparing the EDT training lab - Installation Check lists - Blank database - A Pre-requisite

# Annex H: User Manual