

STANDARD OPERATING PROCEDURES

FOR PRE AND POST-TEST COUNSELLING - MHPSS PROVIDERS





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Interim guidance:- Updated on 19th April 2020

INTRODUCTION

Coronavirus disease (COVID-19) is an infectious disease caused by a new virus. It is an acute respiratory infection caused by severe acute respiratory syndrome coronavirus 2 (SARS- CoV-2) which belongs to the Sarbecovirus subgenus of the Coronaviridae family and is the seventh coronavirus known to infect humans.

Human transmission occurs via respiratory droplets produced when a person sneezes or coughs. Coronavirus disease spreads primarily through contact with an infected person when they cough or sneeze. It also spreads when a person touches a surface or object that has the virus on it, then touches their eyes, nose or mouth.

Current estimates of the incubation period range from 1 to 14 days, according to the World Health Organization. The average incubation period is currently estimated to be 5 days. Transmission can occur during the incubation period. The disease causes a respiratory illness (like the flu) with symptoms such as a cough, fever and in more severe cases, difficulty breathing.

The following population can be targeted for testing:

- Risk population;- symptomatic clients, positive history of travel, health care workers, caretakers of symptomatic clients even if asymptomatic
- History of contact with known COVID 19 positive patient whether symptomatic or asymptomatic
- Those in Quarantine centers for reasons other than above whether symptomatic or asymptomatic

The following are some recommended indications for COVID 19 testing:

Screening purposes – in the risk population whether

- symptomatic or asymptomatic
- Diagnostic purposes this is done to confirm the diagnosis of COVID 19 in a client.
- Confirmation of recovery once the client is treated, the test can be done to confirm recovery Mostly done post treatment before release from a quarantine or isolation facility

PURPOSE

The purpose of testing counselling is to provide information and support to the client so as to understand the prevention and management of the disease and be able to cope with psychological effects associated with testing and test results. This is a voluntary intervention as part of the psychosocial care in the prevention and management of COVID-19. The counselling is recommended to be done through virtual process as an IPC measure unless where onsite process is urgently required

1. Pre-Test Information

The case management and lab team should inform the MHPSS provider 1 day in advance before the they visit the clients for testing to prepare adequately.

- Introduction (Provider & Client) and provider role in testing
- Contracting with the client:
 - o Adult gives own informed consent
 - Minor -informed consent given by the parent or legal guardian
- Time the session likely to take
- Assure client confidentiality/shared confidentiality
- Talk about the records and information to be gathered by the provider
- Benefit of COVID 19 testing
- Consenting for COVID 19 tests
- contact tracing
- Counselling will be done virtually by the psychosocial

2. Pre-Test Counseling

- COVID 19 information
- Risk assessment and reduction-Assessment of other health related conditions:
 - Conduct assessment for comorbidities/ chronic illness e.g. Diabetes, hypertension, HIV, immunosuppressive diseases e.t.c
- Need for disclosure and importance to reach out to contacts
- Client preparation, testing process & interpretation of test results
- Interpretation of results in a language well understood by the client and where possible one may illustrate using audio visual mechanisms

3. Perform Test

- Document the test.
- To be done by the case management team

4. Post Test Counselling

- Once sample is taken, client goes into self-isolation as they await results.
- Check what the client understands by the results.
- Allow the client to share his/her initial reactions and verbalize their initial feelings.
- Explore and acknowledge client's immediate feelings and concerns.
 - Offer necessary support- have a team prepared with full PPE for a client in emotional distress and requires special attention
 - If client not prepared for counselling, document this and reschedule the meeting.

Linkage to Care and Prevention:

Post-test counselling should, at a minimum, include three key messages:

• Treatment is available and is recommended for everyone

with COVID 19

- Starting treatment as soon as possible reduces the chance of your illness getting worse and of passing COVID 19 to others
- If you follow the recommended guidelines for management, all will be well

Negative result:

- Review implications of being COVID 19 negative and help client develop a risk reduction plan
- Linkage to other COVID 19 prevention initiatives
- Client-specific recommendations for re-testing to be guided by case management team
- Encourage disclosure of COVID 19 negative status with contacts

Positive result:

- Review implications of being COVID 19 positive and help index client develop a risk reduction plan
- Review and support disclosure to contacts
- Client-specific recommendations for re-testing to be guided by case management team

5. Referral and linkage to care

- Team lead at quarantine sites to contact evacuation team
- Obtain accurate location information from the index client (physical location, phone number)
- Document the outcomes of contact follow up(s)

Additional Information

- Quality post-test counselling should include information about the nature and availability of additional COVID 19 related services, description of the next steps in treatment and prevention including entire treatment plan and followup visits and schedule.
- The benefits of immediate assessment and early initiation of treatment should be emphasized

- Involve the patient in the decision-making process regarding treatment and prevention
- Disclosure to a trusted 'significant other' promotes linkage and adherence to treatment
- Encourage and help the patient to discuss COVID 19 status with a trusted friend or close relative.
- Encourage minor to identify and invite a supportive adult or friend to support them.

Barriers to Linkage

 During post-test counselling, identify and address any barriers to linkage

Systems to Facilitate Linkage

- The team leader is responsible for linkage into care
- Same day enrolment into care is expected
- Linkage should be done to on-site treatment and prevention services through team leader.
- Deploy retention and loss-to-follow up tracking system to ensure linkage is successful.
- Where referrals are necessary, such referrals should be coordinated (communication and documentation between referring and receiving service delivery points) by the site team leader.

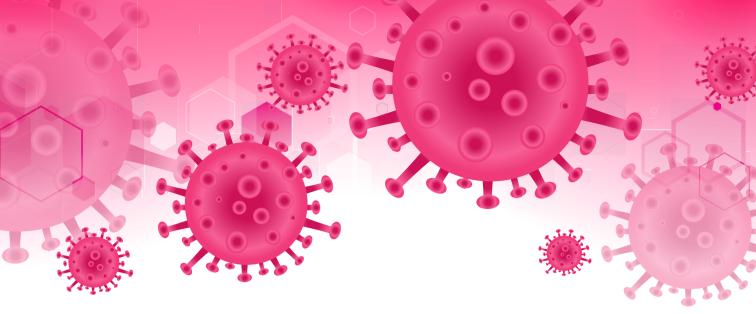
Linkage Register

- Maintain a linkage register at all testing points in the facility and community
- Track and report on progress with linkage
- Discuss linkage at MDT meetings

The guidance and standard operating procedures of MHPSS still apply in the process of pre and post counselling sessions.

Disclosure of the results to be done by the medical team /clinician on site

Psychosocial team will handle the clients in the counselling session's pre and post-test.



COVID-19 CORONAVIRUS DISEASE

