<u>Guidance Note for Persons engaged in HIV/AIDS response under National AIDS Control</u> <u>Programme in view of the COVID-19 scenario</u>

I. General Advisory for people working in or visiting NACP facilities:

- All are requested to abide by updated MoHFW advisory and guidelines with respect to COVID-19 protocols for patient referral, testing, clinical management, etc. (MoHFW website <u>http://www.mohfw.gov.in</u>). All queries related to COVID-19 may be re-directed to the National toll-free helpline number (<u>1075 or 011-23978046</u>) or any State-specific helpline number.
- 2. It is reiterated that all people visiting NACP facilities should take adequate precautions like social distancing, ensuring hand hygiene & cough hygiene, avoiding unnecessary travel, etc. Masks should be used if person has fever/cough/flu-like symptoms.
- 3. The existing IEC material on the prevention and containment of COVID-19 issued by MoHFW may be translated into local languages (if already not done by the States) for wider dissemination among all NACP facilities.

II. Advisory for facilities under NACP:

- 1. National guidelines for infection prevention and control should be followed in all healthcare facilities; with special emphasis on floor cleaning, ensuring availability of soap and hand-washing/ sanitizing facility for all staff, adequate ventilation, etc.
- 2. All health facilities should be encouraged to display posters or play videos on personal hygiene, cough hygiene, hand washing, social distancing, etc.
- 3. At the ART centers, triage of symptomatic PLHIV (with fever/cough/shortness of breath/other respiratory symptoms) should be done for fast-tracking of patients (including separate sitting arrangement, provision of mask, medical consultation, etc.).
- 4. Client/Patient flow management at TI, ICTC, PPTCT, DSRC, OST as well as during counseling and outreach sessions should comply with extant social distancing norms.
- 5. All community congregations or events for awareness generation, community based testing, outreach, advocacy etc may be conducted while complying to guidelines for mass gatherings and social distancing. Mega events may be deferred.

III. ARV drug dispensation for PLHIV on ART:

1. <u>Multi-month dispensation (MMD)</u>:

- a. Three months-MMD may be given to all stable patients on 1st line and 2nd line ART, along with IPT/CPT prophylaxis as per existing guidelines for MMD, subject to availability of ARV drugs. MMD guidelines to be followed at all ART centres, FI-ARTCs and LACs.
- b. As a one-time measure, Multi-month dispensation should be considered for unstable PLHIV on ART, along with additional counselling on reasons for MMD, adherence to ART and to report to ART centres if respiratory symptoms or OI symptoms appear.
- c. Guidelines for IMS entry of MMD will be shared with SACS by NACO.
- d. Dispensation of ATT drugs for HIV-TB co-infected patients would be as per updated NTEP guidelines.
- e. Nevirapine for PPTCT may be considered for duration of 6 weeks for the exposed infant, in the current COVID-19 scenario, as a one-time measure subject to drug availability.

2. <u>Community dispensation:</u>

- a. Strategies like community dispensation (through Care and Support Centers, home delivery through ORW, volunteers, PLHIV networks) and family dispensation, etc. may be allowed in principle in the COVID-19 scenario, as even with up-scaling of MMD it might take up to one month for actual decongestion of ART facilities.
- b. Local action plans may be developed in consultation with ART centers and community networks, to ensure that PLHIV receive uninterrupted ART supply without having to travel to ART centres every month, if COVID-19 outbreak scenario arises.

IV. Commodity distribution to High Risk Group populations:

- 1. PEs/ORWs engaged in TI Settings may provide multi-week (2-3 week) dispensation of commodities such as condom, needle and syringe, etc. to HRGs to avoid travel and decrease the frequency of visits.
- 2. OST drugs may be distributed for at least seven days, based on the daily dosing and adherence level of IDUs, with issue of appropriate instructions.