Test to Treat Supervision Guide

Reaching Impact, Saturation, and Epidemic Control

April 2023

COVID-19 Response: Test-to-Treat

What is the Plan-Do-Study-Act?

This tool provides teams a structured way to assess implementation strengths and gaps during supervision visits. It allows teams to identify strategies to address those gaps. This tool is informed by the Plan-Do-Study Act. The Plan-Do-Study-Act is a four stage problem solving model used to test change and improve program implementation, and being cyclical in nature, this model allows for revisions and new iterations along the way. It takes into consideration what works and does not work, through end user feedback.

With decentralized service delivery, and based on the EPIS Framework our focus is the implementation dimension using the PDSA.

Plan – focused areas for observation (already included below)
Do – elaborates on what is happening on the ground
Study – provides reasoning for current implementation activities
Act – proposed recommendations for ongoing implementation and scale up in each focus area

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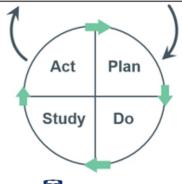


Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?





Plan	Demand generation activities, posters for T2T	SOP and/or clinical algorithms clearly available	Training in use of oral antivirals for nurses, GPs, specialists, pharmacists	Screening all patients for influenza-like illness (ILI) at entry
DO Is this happening all the time/ sometimes, what is missing? And what is great	e.g. announcements in waiting room	e.g. in correct language, near nurses	e.g. Did you receive training, do you feel comfortable	e.g. How is screening happening, who does screening, how documented
Study/ Reflection Why is it happening this way?				
Act				

Plan	Triage to identify acuity/ need for oxygen and thus onward referral. Is pulse ox availiable?	RDT on-site available to confirm COVID	Prescribing oral antivirals on site if eligible and no contraindications	Use of Liverpool or other tools for drug-to-drug interactions
Do	e.g. Vitals signs available	e.g. Are self tests acceptable	e.g. Who is prescribing	e.g. Is this systematic process
Study/ Reflection				
Act				

Plan	Dispensing oral antivirals at site	Counseling on medication adherence and adverse events	Referral strategy if needs oxygen/severely sick	Logs to track cascade and Quality Improvement
Do	e.g. Meds onsite or where from	e.g. Who provides counseling	e.g. Clear referral strategy	e.g. Patient tracking & follow up after meds complete
Study/ Reflection				
Act				

Adverse Medical Events (reported by clinical staff)				
Questions or concerns by clinical staff during site visit/ Observations				

RISE Project Overview

Reaching Impact, Saturation, and Epidemic Control (RISE) is a 5-year global project funded by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID) which works with countries to achieve a shared vision of attaining and maintaining epidemic control, with stronger local partners capable of managing and achieving results through sustainable, self-reliant, and resilient health systems by 2024.

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