

## **Checklist to Guide Optimal ARV Introduction**

As antiretroviral therapy (ART) programs advance toward the World Health Organization (WHO) Treat All and UNAIDS Fast Track targets, ensuring timely access to "optimized" antiretroviral (ARV) products – those that are effective, safe, tolerable, acceptable and affordable – is more critical than ever before. New, optimized ARVs are anticipated to provide more effective treatment outcomes while yielding significant cost savings.

While all countries adhere to their own policies and decision-making norms, there are a common set of processes and milestones when introducing new ARV products to a country program. This includes the creation of an enabling environment, planning and preparation for introduction and scale-up, support for service delivery and monitoring of the transition process.

Past transitions to new first-line ARV regimens in low- and middle-income countries (LMICs) have met with a variety of

logistical and implementation challenges including stockouts, drug expiries, inappropriate prescribing and resistance to change among healthcare workers and patients. Lessons learned from the past transitions such as the phase-out of d4T and introduction of the fixed-dose combination (FDC) of tenofovir, lamivudine and efavirenz (TLE) have demonstrated the importance of planning and coordination at global, national and subnational levels to avoid similar challenges as programs rapidly introduce new optimal ARV products.

This checklist is focused on the various activities country programs need to consider and plan for to ensure successful transition once a country has decided to introduce a new ARV. It is designed to serve as a reference guide for HIV program managers to navigate the complex set of questions, variety of stakeholders and array of activities needed to ensure timely and effective introduction of new ARVs into a public health program. See the reverse of this page for the checklist.

The checklist is divided into five sections, which concentrate on activities tied to the implementation of a new product introduction policy decision:

# 1 — OVERALL MANAGEMENT AND COORDINATION

Focuses on developing a process through which decision making and planning are managed and coordinated.

#### 2 — ENABLING ENVIRONMENT

Ensures that new ARVs are available for procurement, policies and guidance are in place to ensure appropriate use, and funding is available to support introduction and scale-up.

#### 3 — PLANNING AND PREPARATION

Supports the development of detailed plans to train healthcare workers, sensitize patients and the community of people living with HIV (PLHIV), ensure stock is available to support rollout, and update the tools and registers needed for monitoring and evaluation.

#### 4 — SERVICE DELIVERY SUPPORT

Delineates the activities required at the service delivery level to generate demand, support appropriate prescribing and dispensing, address provider and patient questions, and address bottlenecks and challenges.

#### 5 — TRANSITION MONITORING AND VISIBILITY

Underlines the critical role of ongoing monitoring of the transition process, with emphasis on both evaluation of patient outcomes and supply chain systems.

### **Checklist of All Activities**

1 — OVERALL MANAGEMENT AND COORDINATION			through platforms such as local media, or targeted sensitization for PLHIV
	Identify key stakeholders and establish a new product introduction coordinating mechanism		Revise patient monitoring and stock tracking tools (paper and/or electronic)
	Design a phase-in strategy including: 1) initial introduction; 2) scale-up plan; and 3) associated timelines for uptake		and communication materials to ensure completeness and feasibility  Share sensitization plans and new materials with implementing partners for integration into local campaigns
	Develop master list of activities to prepare, implement and monitor all aspects of transition and identify a responsible individual or group to lead each activity		
	Communicate transition plan, roles, and responsibilities to stakeholders	and programs	
	Conduct routine tracking of transition progress against established targets	4 — SE	RVICE DELIVERY SUPPORT
2 — ENABLING ENVIRONMENT			Educate/sensitize providers with SOPs for clinical management, revised documentation processes and facility-level stock management guidelines
	Define new product value proposition and rationale for phase-in plan to disseminate throughout health system		Educate/sensitize patients and community on transition rationale and benefits of new ARV product
	Allocate funds for new product procurement, uptake activities, and monitoring		Develop guidance on new ARV introduction within differentiated care settings and within other programs in the health sector (e.g. tuberculosis, maternal and child
	Update HIV Care and Treatment guidelines on new product use including eligible populations, contraindications and alternative regimens, and laboratory monitoring requirements. Also include rationale and plans for phase-in process as appropriate		health)  Conduct ongoing supportive supervision and mentorship of clinical and pharmacy management staff involved in new product introduction activities
	Ensure product(s) are registered for use and listed in essential procurement documents and the essential medicines list		Utilize early feedback from implementers to respond to challenges, clarify miscommunications, and adjust phase-in plan as appropriate
	Update/develop national and subnational forecasts and procurement plans to incorporate new products	5 — TR	ANSITION MONITORING AND VISIBILITY
	Develop and communicate policy on existing stocks that are being replaced with new product(s) throughout healthcare system (this may include usage until stocks are exhausted, or destruction of stocks as appropriate)		Establish intensified patient monitoring program, including pharmacovigilance and pregnancy surveillance (as appropriate)
	Initiate new product procurement processes and align introduction plans with projected order delivery dates		Conduct intensified stock monitoring of new products to ensure uptake meets expected targets
3 — PL	ANNING AND PREPARATION		Review clinical and stock data routinely to ensure uptake proceeds according to phase-in plan and identify signals which may indicate unexpected challenges
	Conduct situational assessment of current landscape and analyze capacity of the current health system to		Identify and assess service delivery challenges to provide corrective instruction or to inform further phase-in plans
_	appropriately manage and use the product		Disseminate results and lessons learned from pilot introductions, demonstration projects, or other operations research to advance thinking and build capacity at local, national, and global level
	Develop provider education/sensitization and rollout plans		
	Define patient and community education and sensitization strategy and rollout plan including general sensitization		







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