

**Quarterly, Facility-Based HIV Care/ART Reporting Form Instructions
- updated July 11, 2005**

This form is designed to report quantitative and qualitative information about HIV care and ART care supported by an Emergency Plan-funded program at a medical facility for a reporting period lasting from the first day of the quarter to the last day of the quarter during the USG fiscal year. For example, data from the first quarter of the fiscal year would include information from October 1 to December 31. (2nd quarter lasts from Jan 1 – March 31, 3rd quarter lasts from April 1 – June 30, 4th quarter lasts July 1 – September 30). One quarter is equal to three full months.

Most of the information in this form is required in order to report on the Emergency Plan (hereafter “EP”) indicators listed in “The President’s Emergency Plan for AIDS Relief Indicators, Reporting Requirements, and Guidelines, revised September 30, 2004.”

If more than one partner provides support for a single facility, please provide two reports per partner for that facility. One report should include all persons receiving HIV care and treatment at the facility. The second report should include only those patients whose care and treatment are attributed to the Track 1.0 partner submitting the report.

1. HIV care (non-ART and ART) - new and cumulative number of persons enrolled.

Table 1 collects *facility-based* information consistent with EP indicators on “Palliative Care: Basic Health Care and Support.”

- Please include all HIV-infected persons enrolled for care at the facility since the EP partner began providing support. Please include both those on ART and those not on ART. It is assumed that all persons on ART are also receiving palliative care.
- Number of enrollees should be disaggregated by age group and sex.
- Each person can only enroll in each program once, even if he or she drops out of care and returns after a long absence. This is necessary to avoid counting the same person more than once. If a person has transferred from one grantee-supported facility to another grantee supported facility within the same grantee’s program, do not count this person as a new enrollee. However, this person should be counted in the final column if he or she received HIV care at the facility during the quarter.
- The first column should include the cumulative total number of persons ever enrolled in HIV care *supported by the grantee* at this facility at beginning of the quarter. If the grantee began providing support during this quarter, the first column should be all zeros.
- The second column should include new persons enrolled in the grantee-supported HIV care program at the facility during the reporting quarter.
- The number in the third column should equal the sum of the numbers in the first and second columns for each row. For example, 1a + 1h = 1o.
- The final column should include all HIV-infected persons who received care provided by this facility at any time during the quarter. For the purpose of this table, care is defined as any encounter between a staff person and the person in care, including enrollment visits, medical visits, home-based care, and visits to the pharmacy, lab, adherence counselor, etc. Please count number of persons, not number of visits.
- Cell 1vv. includes all persons who met the facility’s definition of eligibility for ART, but who had not yet started ART by the end of the quarter. This number should be a subset of the number in Cell 1uu.

2. ART care

Table 2 collects information consistent with EP indicators on “Totals for Treatment Services.”

- The first column should include cumulative total number of persons started on ART supported by the EP program at this facility at the beginning of the quarter. If the grantee began providing support during this quarter, the first column should be all zeros. Please include all patients at the facility, regardless of source of ARV medications.
- The second column should include persons who started ART at the EP-supported facility during the reporting quarter. This should include both persons who were not on ART at the time of enrollment and started ART in the grantee’s program (NEW), as well as persons who were already on ART at enrollment, but started receiving support from the EP program during the quarter (TRANSFERS).
- The number in the third column should equal the sum of the numbers in the first and second columns for each row. For example, $1a + 1h = 1o$.
- The fourth column is a subset of the second column. This column includes only persons who initiated ART during the reporting period (NEW). New persons do not have to be treatment naïve. For example, a woman may have received single dose nevirapine for prevention of mother-to-child transmission in the past. She is not treatment-naïve, but she will be NEW to ART care in the EP program.
- The fifth column is also a subset of the second column. This column includes only persons who were already on ART supported by another source (self-pay, ministry of health, etc.) and who continued ART, but transferred into the EP program (TRANSFERS).
- If a person has transferred from one grantee-supported facility to another grantee supported facility within the same grantee’s program, do not count this person as a new enrollee. However, this person should be counted in the final column if he or she received ART at the facility during the quarter.
- Cells 2f, 2l, and 2r request information on number of females who were pregnant at the time of enrollment into ART care cumulatively at the beginning of the quarter, during the quarter, and cumulatively at the end of the quarter.
- Cell 2ff. requests the number of pregnant females who enrolled in the quarter and were NEW on ART; this number should be a subset of 2ee.
- Cell 2ll. asks for the number of pregnant females who enrolled in the quarter and who continued ART started at another facility (TRANSFERS); this number is a subset of 2kk.
- Cell 2rr. requests the total number of females on ART at the end of the quarter who were pregnant at any point during the quarter; this is a subset of 2qq.
- ART care includes persons taking ARVs for their own health, not women taking ART only for PMTCT (prevention of mother to child transmission).
- Cell 2ss. includes all persons on ART at the end of the quarter who received ARV drugs that were purchased using USG funds. Cell 2ss. is a subset of cell 2qq.

3. Training in ART and HIV Care – COMPLETE ONE PER COUNTRY

Table 3 collects information consistent with EP indicators on training found within the “Palliative Care” and the “Treatment” sections. This indicator seeks to measure how much capacity building through training is being supported by the EP. The EP indicators do not explicitly define training. Where they exist, grantees may use national or international standards for training.

- Because training may not be facility-based, grantees should complete only one table for each country where they have Track 1.0 ART programs.
- Cells 3a. - 3d. requests information about the number and type of health care workers who were trained in ART care during the quarter.
- The number of persons trained in non-ART/HIV palliative care (Cell 2e) includes both health care workers and lay people. The EP definition of palliative care includes

“activities aimed at optimizing quality of life of HIV-infected (diagnosed or presumed) clients.”

- Please report the number of *persons* trained during quarter, not the number of trainings.
- Please avoid counting the same person twice for the **same** training. However, one person may be counted in both ART and palliative care if he or she was a health care worker who attended a training that met the criteria for both.

4. Change in CD4+ count and ART adherence for 6-month and 12-month cohorts

These tables are designed to provide a gross measure of the health impact of ART.

Because normal ranges of CD4 counts are different for adults and children, please exclude persons 6 years old and younger from this table.

- Table 4.1 should include information for persons who have completed 6 months of ART, **except** cell 4.1b should include all persons who began ART in this cohort, even if they did not complete 6 months of ART.
- The second column of Table 4.1 (entitled “6 months”) should include only those persons who completed 6 months of ART.
- If a person on ART transferred into the facility’s program with records, he or she can be retrospectively placed into the appropriate treatment cohort.
- The baseline CD4⁺ count should be obtained any time during the 3-month period prior to starting ART or within 2 weeks after starting ART.
- The 6-month CD4⁺ count should be obtained within 4 – 7 months after starting ART.
- Because of the lag in getting CD4 test results, we are allowing for a 2-month lag in reporting for the 6- and 12-month cohort. Please use the following table to designate 6-month cohorts by reporting period:
 - For reporting the quarter ending December 31 – report persons beginning ART in the previous February, March, and April.
 - For reporting the quarter ending March 31 – report persons beginning ART in the previous May, June, and July.
 - For reporting the quarter ending June 30 – report persons beginning ART in the previous August, September, and October.
 - For reporting the quarter ending September 30 – report persons beginning ART in the previous November, December, and January.
- Table 4.2 should include information for persons who have completed 12 months of ART, **except** cell 4.2b should include all persons who began ART in this cohort, even if they did not complete 12 months of ART.
- The second column of Table 4.2 (entitled “12 months”) should include only those persons who completed 12 months of ART.
- If a person on ART transferred into the facility’s program with records, he or she can be retrospectively placed into the appropriate treatment cohort.
- The 12-month CD4⁺ count should be obtained within 8 – 13 months after starting ART.
- Cohorts should include persons who began ART 14, 15, and 16 months before the end of the current reporting period. For example, the October 1 – December 31, 2004 Quarterly Reporting Form should report 12-month CD4⁺ counts for persons who began ART in August 2003, September 2003, and October 2003. Similarly, the January 1 – March 31, 2005 Quarterly Reporting Form should report 12-month CD4⁺ counts for persons who began ART in November 2003, December 2003, and January 2004.

5. Number of patients on each regimen

- This table lists several ART regimens and includes blank cells so that other regimens can be added. The first column should include the number of adults on the regimen at the end of the quarter. The second column should include the number of children (0 - 14 years old) on the regimen at the end of the quarter. The person should be counted in the row for the last regimen they received during the quarter. The sum of cell 5x (total adults) + cell 5xx (total children) should equal the total in cell 2qq (total number on ART at the end of the quarter).
- When adding new regimens, please use the following acronyms:

Nucleoside/Nucleotide Analogues

abacavir sulfate - ABC
 didanosine - ddl
 emtricitabine - FTC
 lamivudine - 3TC
 stavudine - d4T
 tenofovir disoproxil fumarate - TDF
 zalcitabine - ddC
 zidovudine - ZDV

Non-Nucleoside Reverse transcriptase Inhibitors

delavirdine mesylate - DLV
 efavirenz - EFV
 nevirapine – NVP

Protease Inhibitors

amprenavir - APV
 atazanavir sulfate - ATV
 indinavir sulfate - IDV
 lopinavir/ritonavir - LPV/r
 nelfinavir mesylate - NFV
 ritonavir - RTV and /r when used in combination with another protease inhibitor
 (for example, lopinavir/ritonavir - LPV/r)
 saquinavir – SQV
 tipranavir - TPV

6. Number of persons started on ART who were NOT on ART at the end of the quarter

- This table is designed to describe the most recent status of persons who started on ART in the grantee's program at the facility at any point since the beginning of the program.
- Table 6.1 asks for the number of people who were on ART (at any point since the launch of EP-support) who are NOT on ART at the end of the quarter. The total in cell 6.1m should equal the difference between cell 2q (the cumulative number started on ART) and cell 2qq (the total number on ART at the end of the quarter).
- Table 6.2 requests the reason each person in table 6.1 is no longer on ART.
- These numbers are expected to change from one quarter to another as information is gathered and status can be updated.
- These numbers can go down as well as up. Death is a final state, but people can restart ART after stopping, can transfer back in after having transferred out, and can return to

the program after being lost to follow-up. We are asking for a quarterly update on the status of all persons on who were started on treatment since the grantee began support.

- We would consider a person as lost to follow up (LTF) if s/he has not been to clinic or picked up drugs for at least 3 months. If your clinic has another definition of LTF, please indicate this when filling out the table.
- Each category in 6.2 should be mutually exclusive. Since the reasons listed are not necessarily mutually exclusive, we provide this guidance for how to classify persons who experience multiple events:
 - If patient transferred out, then was lost, count as transferred out.
 - If patient transferred out, then died, count as transferred out.
 - If patient transferred out, then stopped, count as transferred out.
 - If patient stopped ARVs, then died, count as stopped.
 - If patient stopped ARVs, then transferred out, count as stopped.
 - If patient stopped ARVs, then was lost, count as stopped.

As much as possible, over time, a program should try to re-classify the LTFs as more information becomes available.

- If patient is lost, then transfers out, count as transferred out.
- If patient is lost, then dies, count as died.
- If patient is lost, then stops ARVs, count as stopped.

Quarterly, Facility-Based HIV Care/ART Reporting Form

Date facility began receiving support from PEPFAR (mm/dd/yy):	
Quarter beginning (mm/dd/yy):	Quarter ending (mm/dd/yy):
Grantee:	Facility:
Location:	Country:

1. HIV Palliative Care (non-ART and ART care)					
	Cumulative number enrolled in HIV care by the beginning of quarter	NEW enrollees in HIV care during the quarter	Cumulative number enrolled in HIV care by the end of the quarter		Total number who received HIV care during the quarter
1. Males (0-14 years)	a.	f.	k.	0	oo.
2. Males (15+ years)	b.	g.	l.	0	pp.
3. Females (0-14 years)	c.	h.	m.	0	qq.
4. Females (15+ years)	d.	i.	n.	0	rr.
Total	e.	j.	o.	0	uu. 0
Number in HIV care during the quarter & eligible for ART, but NOT started ART by the end of the quarter (subset of 1uu.)					vv.

2. ART Care							
	Cumulative number started on ART by the beginning of the quarter	Number started on ART in program during the quarter (includes NEW and TRANSFERS)	Cumulative number started on ART by the end of the quarter	Number NEW on ART during the quarter (subset of 2h-2n)	Number on ART who TRANSFERRED in during the quarter (subset of 2h-2n)	Total number on ART at the end of the quarter (CURRENT)	
1. Males (0-14 years)	a.	g.	m.	0	aa.	gg.	mm.
2. Males (15+ years)	b.	h.	n.	0	bb.	hh.	nn.
3. Females (0-14 years)	c.	i.	o.	0	cc.	ii.	oo.
4. Females (15+ years)	d.	j.	p.	0	dd.	jj.	pp.
Total	e.	k.	q.	0	ee.	kk.	qq. 0
5. Pregnant females (subset of total)	f.	l.	r.	0	ff.	ll.	rr.
No. of persons on ART at the end of the quarter who were treated with USG-funded ART (subset of 2qq.)					ss.		

3. Training in ART and HIV Care*	Physicians	Nurses	Other healthcare workers	Total
1. Number of persons trained in ART care during the quarter	a.	b.	c.	d. 0
2. No. trained in (non-ART) HIV palliative care during the quarter				e.

*Please provide training numbers by country, not by facility, for each grantee

4.1 Change in CD4+ count and adherence to ART for 6-month cohort (>6 years old)			4.2 Change in CD4+ count and adherence to ART for 12-month cohort (>6 years old)		
	Baseline	6 months		Baseline	12 months
Months when cohort started ART	a.		Months when cohort started ART	a.	
Number of persons in cohort	b.	e.	Number of persons in cohort	b.	e.
No. in cohort who have CD4+ counts	c.	f.	No. in cohort who have CD4+ counts	c.	f.
Median CD4+ count for cohort	d.	g.	Median CD4+ count for cohort	d.	g.
No. in cohort who received ARVs for 6 out of 6 months		h.	No. of persons in cohort who received ARVs for 12 out of 12 months		h.

5. Number of patients on each regimen at the end of the quarter		
	Adults	Children (0-14 years)
d4T-3TC-NVP	a.	aa.
d4T-3TC-EFV	b.	bb.
d4T-3TC-LPV/r	c.	cc.
ZDV-3TC-NVP	d.	dd.
ZDV-3TC-EFV	e.	ee.
ZDV-3TC-LPV/r	f.	ff.
ZDV-ddI-NVP	g.	gg.
ZDV-ddI-EFV	h.	hh.
ZDV-ddI-LPV/r	i.	ii.
d4T-ddI-NVP	j.	jj.
d4T-ddI-EFV	k.	kk.
d4T-ddI-LPV/r	l.	ll.
	m.	mm.
	n.	nn.
	o.	oo.
	p.	pp.
	q.	qq.
	r.	rr.
	s.	ss.
	t.	tt.
	u.	uu.
	v.	vv.
	w.	ww.
Total	x.	0xx. 0

LEGEND for Table 4		
Reporting Period	6-month cohorts	12-month cohorts
patients being reported during the time quarter:	patients who started on ART in the preceding months of:	patients who started on ART in the previous year, during the months of:
October 1 - December 31	Feb, Mar, Apr	Aug, Sept, Oct
January 1 - March 31	May, June, July	Nov, Dec, Jan
April 1 - June 30	Aug, Sept, Oct	Feb, Mar, April
July 1 - September 30	Nov, Dec, Jan	May, June, July

6.1 Number of persons who started on ART at the facility in the EP program who were NOT on ART at the end of the quarter	Male	Female	Total
	a.	g.	m. 0
6.2 Reason			
1. Stopped ART	b.	h.	n. 0
2. Transferred out	c.	i.	o. 0
3. Death	d.	j.	p. 0
4. Lost to follow-up	e.	k.	q. 0
5. Unknown	f.	l.	r. 0