Clinic Flow Assessment

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Feedback on overall visit

- **Summary:**
  - Assessment visit done 07 to 10\textsuperscript{th} March 2011
  - Strategies shared by other sites in the protocol team calls implemented ahead of the visit – decrease in visit time by 1 hour for participants in monthly follow-up
  - New perspective based on objective opinion of an expert
  - Site meeting with key staff to discuss implementation

- **Usefulness of the visit:**
  - Systems were revised and new strategies are being put in place.
  - Right systems address the complexity of the study

- **Recommendation for future visits:**
  - Yes! Yes! Yes!
  - Regular flow visits to be included with site assessments
  - As accrual numbers increase / stage of trial changes / changes in staffing levels – flow needs to be adapted
Changes to visit flow

- Changes to the clinic flow based on feedback:
  - Assigned nursing staff to designated visits on a weekly basis.
  - Nurse Counselors for HIV/RRC counselling
  - Shifting operational hours has led to effective way of covering the clinic

- Any suggestions not implemented?
  - Not yet! Pending redesign of visit checklists
Impact on visit length

- **Changes on impact of visit length:**
  - Use of Nurse counselors allows less movement, less waiting time for the participant.
  - Monthly follow-up visit takes 3 instead of 4 hours

- **Success of changes:**
  - Designation of visits to specific staff members: increase in accountability and relief of pressure on coordinator
  - Shift work: flexibility in scheduling of employed participants
  - Revised visits checklist: hope to see further improvement in the clinic flow with decrease in waiting time / positive impact on retention.

- **Which changes have not been successful:**
  - Too little time since implementation to judge
Acknowledgements

- FHI (Katie and Katherine)
- MTN (Patrick Ndase)
- Site team