



SMART Couples Implementation Planner

SMART Couples is a couples-focused strategy for improving HIV medication adherence through social support. The tool is divided into six sections: SMART Couples participants, staffing, scheduling, funding, resources, and monitoring. Complete each section to begin outlining a plan for offering SMART Couples to your clients. The completed tool can then be used to develop a detailed work plan describing goals, objectives, activities, staff responsibilities, time line, indicators, and data sources.

SMART COUPLES PARTICIPANTS

This strategy was originally implemented with heterosexual and same-sex HIV-discordant couples who had been in a relationship for at least six months, and with poor adherence to antiretroviral therapy (ART) in the partner living with HIV.

Answer the questions below to define your eligibility criteria and detail additional resources for couples.

How do we define “couple” for our program?

Type of relationship:

- Currently or previously engaged in a sexual relationship
- May engage in a sexual relationship in the future
- Platonic relationship (friends supporting each other)
- Other: _____

Minimum amount of time in relationship? _____

HIV Status:

- Serodiscordant/magnetic couple
- Concordant positive
- Other: _____

Experience with ART:

- Treatment naïve
- Problems with adherence
- Changing regimens
- Other: _____

SMART Couples is focused on medication adherence; it is not couples therapy. What specific resources do we have on-site or can we refer couples to if they need help with additional issues (e.g., counselors, support groups)? _____

Once a couple completes the SMART Couples program, what resources are available for ongoing medication adherence support? _____

STAFFING

Who on our staff is most appropriate and experienced to carry out SMART Couples activities?

TASK	STAFF MEMBER(S)	TIME ALLOCATED PER WEEK	TRAINING NEEDED?
Schedule sessions			<input type="checkbox"/> Yes <input type="checkbox"/> No
Follow up between sessions/ send reminders			<input type="checkbox"/> Yes <input type="checkbox"/> No
Deliver sessions			<input type="checkbox"/> Yes <input type="checkbox"/> No
Supervise session facilitators			<input type="checkbox"/> Yes <input type="checkbox"/> No
Collect, record, and report data			<input type="checkbox"/> Yes <input type="checkbox"/> No

SCHEDULING

SMART Couples has four 45-60 minute sessions scheduled over five to eight weeks. Both partners must attend each session.

How often will sessions be offered and scheduled?

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
TIME	LOCATION	TIME	LOCATION	TIME	LOCATION	TIME	LOCATION	TIME	LOCATION	TIME	LOCATION	TIME	LOCATION

Do we have an existing **program schedule or calendar** that will need to be adapted for SMART Couples? Yes No

Do we have any existing **protocols** that will need to be adapted for SMART Couples? Yes No

If yes, how? _____

How will we communicate and document the expectation that both partners must attend each session? _____

If both partners do not attend a session, what is the policy for rescheduling? _____

FUNDING

What funds will support implementation of SMART Couples? _____

What is the **funding period**? _____

What **specific activities** will these funds support? _____

How many couples can we serve with these funds? _____

What **additional funds** are anticipated to support implementation if any? _____

Will there be any **incentives** for participation offered? No Yes: _____

RESOURCES

What specific resources will be provided to couples?

- Medication adherence tracking tools: _____
- Literature: _____
- Information on mobile applications: _____
- Referral resources: _____
- Substance use resources: _____
- Behavioral health resources: _____
- Counseling services: _____
- Other: _____

SMART Couples worksheets needed per session

Each SMART Couples session builds on the previous session, and partners have in-between session work. Consider providing copies of session worksheets to the couple and maintaining copies in the client record.

SESSION 1	SESSION 2	SESSION 3	SESSION 4
<input type="checkbox"/> My Medication Tracker	<input type="checkbox"/> My Medication Tracker	<input type="checkbox"/> My Medication Tracker	<input type="checkbox"/> My Medication Tracker
<input type="checkbox"/> Pros and Cons of ART	<input type="checkbox"/> Goal Tracking	<input type="checkbox"/> Goal Tracking	<input type="checkbox"/> Goal Tracking
<input type="checkbox"/> Follow-up Questions for Medical Provider	<input type="checkbox"/> A's of Problem-Solving	<input type="checkbox"/> A's of Problem-Solving	<input type="checkbox"/> A's of Problem-Solving
	<input type="checkbox"/> Challenges and Solutions	<input type="checkbox"/> Follow-up Questions for Medical Provider	<input type="checkbox"/> Triggers and Early Warning Signs
	<input type="checkbox"/> Follow-up Questions for Medical Provider		<input type="checkbox"/> Follow-up Questions for Medical Provider

Do your current data collection forms (or electronic medical records) include information about SMART Couples?

- Yes
- No, we will need to **revise** our existing forms.
- No, we will need to develop **new forms**.

Client lab reports

Do you currently receive copies of client lab reports? Yes No

Do you need information (e.g., viral load and CD4 counts) directly from client lab reports? Yes No

If **yes**, what systems do you need to put in place before you can securely receive lab reports?

- Data sharing protocols
- Client consent forms to share lab results with providers
- Memoranda of agreement (MOA) with providers
- Other: _____

How and where will we document the following SMART Couples data?

DATA	HOW ARE THE DATA DOCUMENTED?	WHERE ARE THE DATA KEPT?
Eligibility criteria		
Client demographics		
Client risk data		
Lab data (viral load and CD4 counts)		
Session information		
Referrals		



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