

# Session 9: Step V. Follow-up and Referral for Specialized Services

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**Purpose:** In Step V, service providers will learn to work with clients to develop a follow-up plan. The service provider will also learn to identify situations that need referral for specialized nutritional care.

**Objectives:** By the end of the session, participants should be able to:

1. Describe the purpose of a follow-up plan.
2. Support clients on adherence to a nutritional care plan.
3. Know when and how to refer a patient for specialized care.
4. Identify support groups in the community where clients can get support.

## Advance preparations

1. Be familiar with the *Risk Assessment Form, Checklist for Follow-up Session and Example of a Referral Card* in the [Tool Kit p. 77](#)
2. Make or have a copy of a filled Referral Card.
3. Have the session objectives written on a flip chart or PowerPoint.

## Proposed Session Time: 1 hour and 30 minutes

**Topic 9.1: Review the objectives of Session 9** (Listed above; use either PowerPoint or flip chart.) (5 minutes)

## Topic 9.2: Definition and purpose of follow-up (10 minutes)

**Brainstorm** on what the definition of follow-up is (*continuity of service*) what its purpose is. Purposes include to check for problems encountered in implementing changes in behaviour; modify actions/practices if needed; support adherence to drug regimens; recommend if modification of care is needed; and collect more supplies).

- When does follow-up start? (*From the agreement of a return date.*)
- When does follow-up end? (For HIV it is lifelong, unless the client is lost to follow-up, migrates to another place - in which case you refer - or dies)
- What are the different ways follow-up is done? (*Return visits, home visits, support groups, telephone, e-mail, etc.*)
- How often should follow-up be done?

### **Topic 9.3: Components of a follow-up visit (15 minutes)**

#### **Brainstorm**

- Let participants share their experiences on follow-up, emphasising mainly success stories and difficulties encountered.
- Ask participants to identify four challenges from the group presentations and find feasible solutions to them.
- Summarise the key components of a follow-up visit:
  - Knowledge of the client's history (from the records).
  - An agreed nutritional target/goal to work toward before the next visit (one that contributes to the larger goal).
  - Frequency of follow-up (depends on risk level of the client—as assessed using *Risk Assessment Form* found in Tool Kit p. 76—and intensity of nutritional care needed, and integration with other services).

*(See PowerPoint on key components to address during follow-up.)*

### **Topic 9.4: Conduct role play of a follow-up session (30 minutes)**

#### **Role-play:**

- Identify two participants (a nutritionist/counsellor and a client) to role-play a follow-up session. Inform them early to plan and practice.
- Ask the rest of the group members to be observers.
- Ask the acting counsellor and client to take two minutes to create rapport.
- Ask the counsellor to then practice as many components of a follow-up session as possible. Show the PowerPoint slide on issues that should come out in a follow-up session. *(Allow 7 minutes for this).*
- Ask the rest of the class to identify key issues arising from the role-play. At the end of the 7 minutes, stop the role-play.
- Ask the pairs to record the 2–3 key points observed from their interactions that will help them improve their counselling skills. (5 minutes)
- Allow 3–4 groups to present and ask the others to add additional points.

### **Topic 9.5: When and where to refer clients (20 minutes)**

**Brainstorm** the definition of “referral”. Capture the responses and create an understanding of what referral is and why it is necessary.

#### **Brainstorm:**

- For which conditions do you make referrals?
- Where do you refer?
- How to make a referral (e.g. tools used, feedback, follow-up to ensure referral is availed)? See the copy of a *Referral Card* in the Tool Kit p. 77.)

**Topic 9.6: Key nutritional problems that require referral** (10 minutes)

**Brainstorm:** What nutritional problems have you made referrals for? For example, management of severely malnourished (refer clients to guidelines in the [Tool Kit](#)); management of clients with diabetes (refer clients to guidelines in the [Tool Kit](#)); management of clients with lipodystrophy, management of clients with severe illnesses and OIs; food supplements; to access counsellor/psychologist; to access community support groups.