# Baseline assessment of differentiated service delivery at a facility level

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| Facility name: |
| Details of facility and surrounding community |
| Details of visit: |

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| Overview |  |
| Number of HIV clients at the facility |  | |
| Number of adults tested in the past 6 months |  | |
| Number of adults diagnosed as HIV positive in the past 6 months |  | |
| Number of adults initiated on ART in the past 6 months |  | |
| Number of adults currently on ART |  | |
| Number of adults with a viral load test done in the past 12 months |  | |
| Number of adults with a suppressed viral load in the past 12 months |  | |
| Adult retention at 12 months |  | |
| Adult retention at 48 months |  | |
| Estimated number of HIV exposed persons in the past 6 months |  | |
| Number of children tested in the past 6 months |  | |
| Number of children diagnosed as HIV positive in the past 6 months |  | |
| Number of children initiated on ART in the past 6 months |  | |
| Number of children currently on ART |  | |
| Paediatric retention at 12 months |  | |
| Paediatric retention at 48 months |  | |
| PMTCT retention at 12 months |  | |
| PMTCT retention at 48 months |  | |

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| HIV testing services |  |
| % of STI clients testing for HIV in the past 6 months |  |
| % of TB clients tested for HIV in the past 6 months |  |
| % of PID clients tested for HIV in the past 6 months |  |
| % of emergency room clients tested in the past 6 months |  |
| What % of new HIV+ clients diagnosed were offered index client testing? |  |
| What % of new HIV+ client diagnosed agreed to index client testing? |  |
| For index testing, what is the linkage strategy? How is this tracked? |  |
| **Where are HTS services offered?** |  |
| Is PITC offered from all entry points (OPD, IPD, emergency room, ANC, Family Planning, TB, STI, nutrition, laboratory)? |  |
| Where does someone get an HIV test in the facility? |  |
| Is facility-based index client testing offered? |  |
| Is community-based index client testing offered? |  |
| Is targeted outreach testing performed at least once per quarter? |  |
| How does STI notification for partners work? How do you follow-up for partners that don’t come in? |  |
| **When are HTS services offered?** |  |
| Are HTS services available during working hours every day? |  |
| Are HTS services available overnight and at weekends in maternity and IPD? |  |
| **Who is supporting and performing HTS?** |  |
| How many staff members are trained to perform HTS? |  |
| How many lay counsellors are trained to perform HTS? |  |
| % of HTS that is done by lay counsellors |  |
| **Differentiated HTS for children and adolescents** |  |
| How many staff members are trained to perform dried blood spots for early infant diagnosis? |  |
| Are screening questions used in the OPD to identify children who should be tested? |  |
| How many staff members are trained to perform paediatric disclosure counselling? |  |
| Are adolescent peers involved in mobilizing other adolescents for testing? |  |

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| **Differentiated HTS for specific populations** |  |
| Are HTS services adapted for any key populations (such as moonlight testing, involvement of peers)? |  |
| Are HTS services adapted for men? |  |
| **Mobilizing and linkage** |  |
| Please describe any activities done to mobilize people to have an HIV test |  |
| Are clients who testing HIV+ in community testing escorted to the facility for linkage? |  |
| Are clients who testing HIV+ in community testing given an appointment at the health facility? |  |
| What is the role of CHWs/community nurses within the facility? |  |
| How is linkage for community testing to care in the health facility tracked? (By testing provider or facility) |  |
| How are HIV negative clients who are at high risk of HIV infection linked to appropriate prevention services? |  |
| How is someone linked between a positive HIV test in ANC and the ART initiation site? |  |
| How is someone linked between a positive HIV test in TB services and the ART initiation site? |  |
| How is someone linked between a positive HIV test in STI services and the ART initiation site? |  |
| How is someone linked between a positive HIV test in OPD services and the ART initiation site? |  |
| How is someone linked between a positive HIV test in IPD services and the ART initiation site? |  |
| Does the facility have a linkage SOP? What are the tools for documenting linkage on e.g. linkage register or log, referral and counter referral forms, comments section of the HTS register? |  |
| When do the tools get filled out in the linkage process? |  |
| Who is responsible on site for ensuring that clients with positive HIV results are linked to the ART clinic for ART? E.g. counsellor, linkage facilitator, peer navigator? |  |
| Does the facility use peer navigators or lay counsellors etc. to escort newly identified HIV+ persons (or known HIV+ persons not on ART) to blood draw site and/or ART clinic and handed off to clinic staff e.g. navigator? |  |
| Are clients who are diagnosed fast-tracked at each service point and skip the queue? |  |
| Do the facility testers and linkage coordinator/navigators meet to review numbers of persons who link? |  |
| Do community testing providers have a linkage SOP? Is it the same or different to the facility linkage SOP? |  |
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| Any further comments on testing and linkage: |  |

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| ART INITIATION & DELIVERY |  |
| Is there an appointment system? |  |
| Is the defaulter tracing standard operating procedure carried out? |  |
| **ART initiation** |  |
| Are HIV positive clients initiated every day the facility is open? On which days? By whom? |  |
| How long does it take to prepare a client to start ART? (Number of counselling sessions, baseline bloods, etc.) |  |
| How many days between HIV diagnosis and ART initiation? |  |
| Is same day ART initiation occurring? |  |
| Are certain groups prioritized for same day ART? |  |
| Is there a separate protocol for ART initiation for clients with advanced HIV disease? |  |
| Is there an SOP for rapid ART initiation? Is this different for children, adolescents or key populations? |  |
| What is the follow-up if a client starts the linkage and initiation process by does not complete it? |  |
| Do those clients not initiated same-day get follow-up phone calls by a counsellor to encourage them to return to clinic and initiate ART? |  |
| Can the M&E system capture time from diagnosis to ART initiation? |  |
| Do providers/counsellors have updated messaging about Test and Treat? |  |
| **Health care workload** |  |
| How many clients does each HCW see on an ART day? |  |
| How many days of the week is ART given? |  |
| From what time is ART provided and until what time? |  |
| What is the health service providers’ perception of workload |  |
| **Client barriers** |  |
| How far are clients travelling to reach the clinic? |  |
| What are the costs of transport for clients? |  |
| How long do clients wait from when they arrive to when they leave the clinic? |  |
| What are the biggest challenges to accessing ART? |  |
| Describe the refill options available to a group of clients. Which options address clients’ challenges? Is more than one option warranted? |  |

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| **Differentiated ART delivery & retention** |  |
| What maximum refill is given routinely for clients who are established on ART? |  |
| What is the schedule for clinical follow up in the clinic? |  |
| What is the schedule for counselling follow up? |  |
| Is there an individual fast-track refill option? |  |
| Is multi-month prescribing (MMP) occurring? |  |
| Is there a facility-based group refill option? |  |
| Is there a health centre/CHPS/drop-in centre refill option? |  |
| Describe the refill options available to a group of HCWs. Which options address their and clients’ challenges? Is more than one option warranted? |  |
| Are there special labels placed on clients’ charts for easy identification of clients who are established on ART and on DSD,? |  |
| Do ARV stock outs occur and how does this affect MMP? |  |
| Are outcomes (e.g. retention, VL) for those on DSD monitored? Can the M&E system capture this by the type of DSD clients are  enrolled in? |  |
| Do clients receive pre-clinic reminders? How is this done (e.g. calls, text, WhatsApp reminders)? |  |
| Who is responsible for pre-clinic reminders? |  |
| How does the site approach clients with missed visits or those LTFU? |  |
| Do SOPs exist for reaching LTFU clients and for client tracing? What tools are used to document contact with clients who are LTFU? |  |
| **Differentiated ART delivery for children and adolescents** |  |
| Is a family approach offered for children age 0-5 and their mothers in MCH? |  |
| How frequently are children aged 0-2 years seen? |  |
| How frequently are children aged 2-5 years seen? |  |
| Is group ART follow up offered for adolescents? |  |
| Are adolescent peers involved in adherence support and defaulter tracing? |  |
| **Differentiated ART delivery for pregnant and breastfeeding women** |  |
| Is PMTCT/ART and ANC integrated? |  |
| Is a family approach offered postnatally for HIV-positive breastfeeding women and their exposed babies? |  |
| **Differentiated ART delivery for key populations** |  |
| Is there a health care worker trained in the medical package for key populations? |  |
| Are peers involved in treatment literacy and tracing activities for key populations? |  |
| Are refills available from drop-in centres? |  |

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| **Differentiated ART delivery for clients with high viral load** |  |
| Is there a flagging system to identify who needs a viral load taken? |  |
| How long after a viral load test does the client receive the result? |  |
| Is there a flagging system to identify who has a VL >1000 copies/ml? |  |
| Is enhanced adherence counselling implemented? |  |
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| Any further comments on ART initiation and delivery: |  |