## Annex 1: County Readiness Self-Assessment Tool for Differentiated Care

The County Readiness Self-Assessment Tool is designed to capture current information on HIV-related programming in the county, based on the health system building blocks:

* Leadership and governance, including coordination and health finance
* Human resources for health
* Service delivery
* Commodity management
* Strategic information

The primary aim of the assessment tool is to assist the C-TWG in identifying current strengths and weakness of the health systems that are relevant for implementation of DC.The tool also gathers information to inform the national program on specific county needs for optimal technical support to the counties. This information is not intended to incriminate or discriminate counties based on performance in each section but to identify opportunities for HIV program improvement.

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| County Readiness Self Assessment Tool for Differentiated Care\* |
|  | **Areas of assessment** | **Yes/No** | **Comments** |
| Leadership and Governance | 1. Does the county have an existing HIV Technical Working Group that includes members of the CHMT, implementing partners, health workers and people living with HIV?
 |  |  |
| 1. Does the HIV Technical Working Group meet regularly to discuss HIV program progress with documented minutes?
 |  |  |
| 1. Does the county keep reports of the actual allocation and use of finances for HIV services for the last financial year?
 |  |  |
| 1. Are there sufficient funds and other resources available to support differentiated care?
 |  |  |
| Human Resource | 1. Has the 2016 ARV Guidelines Orientation been rolled out for HCWs in the county?
 |  |  |
| 1. Have HCWs at all facilities offering HIV services been oriented on the 2016 ARV Guidelines?
 |  |  |
| Infrastructure | 1. Do facilities in the county have adequate storage space for additional commodities (ART supplies)?
 |  |  |
| Commodity Management | 1. Does the county have a County Commodity Management / Commodity Security Committee?
 |  |  |
| 1. Does the county have a reliable supply chain management system to support facilities and prevent stock-outs?
 |  |  |
| Quality Improvement & Supervision | 1. Does the county implement the Kenya HIV Quality Improvement Framework (KHQIF)?
 |  |  |
| 1. Does the county have quality improvement team structures at county/sub-county and facility level?
 |  |  |
| 1. Does the County HIV TWG conduct meetings to review clinical cases and provide support to patients failing treatment or with advanced disease?
 |  |  |
| Information Systems | 1. Have all facilities been trained on the revised HIV M&E tools?
 |  |  |
| 1. Do all facilities have the revised HIV M&E tools?
 |  |  |

\*None of these criteria are absolute requirements for implementation of Differentiated Care; implementation should be considered even if some criteria are not met, as long as a plan is in place to address gaps

## Annex 2: Facility Readiness Self-Assessment Tool

The Facility Readiness Self-Assessment Tool is designed to capture current information on HIV-related programming in the county, based on the health system building blocks:

* Leadership and governance, including coordination and health finance
* Human resources for health
* Service delivery
* Commodity management
* Strategic information

The primary aim of the assessment tool is to assist the facility MDT in identifying current strengths and weakness of the health systems that are relevant for implementation of DC.The tool also gathers information to inform the county on facility needs for optimal technical support to the facilities. This information is not intended to incriminate or discriminate facilities based on performance in each section but to identify opportunities for HIV program improvement.

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| Facility Readiness Self-Assessment Tool for Differentiated Care\* |
|  | **Areas of assessment** | **Yes/No** | **Comments** |
| Leadership and Governance | Does the facility have an existing Multi-Disciplinary Team with documented meeting minutes? |  |  |
| Human Resource | Has the 2016 ARV Guidelines Orientation been rolled out at the facility? |  |  |
| Have HCWs in all departments offering HIV services been oriented on the 2016 ARV Guidelines? |  |  |
| Infrastructure | Does the facility have adequate storage space for additional commodities (ART supplies)? |  |  |
| Commodity Management | Does the facility have a Commodity Management / Commodity Security Committee? |  |  |
| Quality Improvement & Supervision | Does the facility implement the Kenya HIV Quality Improvement Framework (KHQIF)? |  |  |
| Does the facility have a quality improvement team? |  |  |
| Does the facility MDT review clinical cases and provide support to patients failing treatment or with advanced disease? |  |  |
| Information Systems | Have HCWs been trained on the revised HIV M&E tools? |  |  |

\*None of these criteria are absolute requirements for implementation of Differentiated Care; implementation should be considered even if some criteria are not met, as long as a plan is in place to address gaps

## Annex 3: Facility Assessment to Provide Community ART Distribution

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| **Health Facility Assessment to Provide Community ART Distribution\*** |
| **Facility name:** | **MFL code:** | **Date of assessment:** |
| Health system domains for community ART distribution | Yes/No |
| **Leadership:**Has the facility identified a focal person to oversee community-based ART distribution? |  |
| **Finance:**Does the facility have resources to implement and monitor community-based ART distribution? |  |
| **Human Resources for Health:**Has the facility identified appropriate personnel to distribute ART (Peer educators, Lay counselors and / or Community Health Volunteers)? |  |
| Does the facility have capacity to train ART distributors? |  |
| **Service Delivery:**Has the facility achieved a routine viral load monitoring uptake of ≥ 90%? |  |
|  Has the facility established a facility-based system for fast-track ART distribution? |  |
| **Commodity Management:**Does the facility have ≥ three months of ART available on site? |  |
| Has the facility identified a focal person to pre-pack and label ART for community distribution? |  |
| **Health Information Systems:**Does the facility have an established system to monitor patient level outcomes specifically retention, lost to follow-up, mortalities and viral load suppression? |  |
| Is the facility able to establish recording and reporting systems for community ART? |  |
| Assessors’ recommendations: |
| Final assessment outcome: |
| Facility can initiate community ART distributionFacility to implement assessors recommendations and be re-assessed thereafter |
| Names of assessors: Signature of assessors: | Name of health facility manager: Signature of health facility manager: |

\*None of these criteria are absolute requirements for implementation of Differentiated Care; implementation should be considered even if some criteria are not met, as long as a plan is in place to address gaps

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## Annex 4: Work Plan Template

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| --- | --- | --- | --- | --- | --- | --- |
| Objective*(statement of intent)* | Activity*(list of activities that will lead to achievement of the objective)* | Resources*(list of resources required to complete the activity)* | Indicator*(what will be used to measure success of the activity)* | Target*(the quantifiable target for the indicator)* | Timeline*(when the activity should be completed)* | Responsible Person*(focal person who will implement the activity)* |
| 1. | A. |  |  |  |  |  |
| B. |  |  |  |  |  |
| C. |  |  |  |  |  |
| 2. | A. |  |  |  |  |  |
| B. |  |  |  |  |  |
| C. |  |  |  |  |  |
| 3. | A. |  |  |  |  |  |
| B. |  |  |  |  |  |
| C. |  |  |  |  |  |
| … | A. |  |  |  |  |  |
| B. |  |  |  |  |  |
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