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| **Health Facility Assessment to Provide Community ART Distribution** | | | | | | | |
| **Facility name:** | | **MFL code:** | | **Date of assessment:** | | | |
| **Instructions for completion:**   * Tick the square most applicable to your institution Total the scores in the place provided at the bottom Use the interpretation key below to interpret the scores | | | | | | | |
| **Health system domains for community ART distribution** | | | | | **Yes = 2** | **Partial = 1** | **No = 0** |
| **Leadership:**  Has the facility identified a focal person to oversee differentiated model of care and community ART distribution? | | | | |  |  |  |
| **Finance:**  Does the facility have finances to distribute ART to PLHIV in the community for at least six months? | | | | |  |  |  |
| **Human resources for Health:**  Has the facility identified community ART distributors to distribute ART (Peer educators, Lay counselors and / or Community Health Volunteers)? | | | | |  |  |  |
| If ‘Yes’ how many have been identified? | | | | |  |  |  |
| How many of them have been trained on the community ART distribution standard operating procedures? | | | | |  |  |  |
| **Service delivery**:  Viral load uptake >90% | | | | |  |  |  |
| Has the facility established differentiated model of care? | | | | |  |  |  |
| Does the facility have an active psychosocial support program for PLHIV? | | | | |  |  |  |
| Has the facility identified community locations for community ART groups? | | | | |  |  |  |
| **Commodity management:**  Does the facility have at least three months of ART and one month buffer stock available on site? | | | | |  |  |  |
| Has the facility identified a focal person to pre-pack ART for community distribution? | | | | |  |  |  |
| Does the facility have adequate supplies / materials to pre-pack ART? | | | | |  |  |  |
| **Health information systems:**  Does the facility have an established system to monitor patient 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? | | | | |  |  |  |
| **Total Score (Maximum expected score = 28 )** | | | | |  |  |  |
| **Instructions of interpretation of scores:**   1. >25 – Facility can initiate community ART distribution 2. <25 – Facility to review and implement the recommendations provided. To be reassessed after implementing recommendations | | | | | | | |
| **Assessors recommendations:** | | | | | | | |
|  | | | | | | | |
| **Final assessment outcome:** | | | | | | | |
| Facility can initiate community ART distribution Facility 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:** | | | | |