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| **Voluntary Medical Male Circumcision (VMMC) Tool E – Adequacy of Staffing**  **External Quality Assurance (EQA)**    **Site Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Reviewer’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
| This Tool (E) verifies the adequacy of staff to provide VMMC services as part of a comprehensive HIV prevention program based on the volume of clients.  **Reviewer Guidance:**  The reviewer will interview key site administrators and supervisory staff, and review documents as necessary to document the:   1. Type of site (see definitions below) 2. Type of service delivery 3. Number of beds and the average number of VMMCs performed per day 4. Number of staff providing VMMC service delivery at this site (based on the specific staffing roles and functions that are defined at the bottom of the form). Enter a “0” if the Service or Staffing is not available at the site so that all boxes are completed.   Site Options:   * Fixed Site – A site that is a permanent structure, often located near or within an existing health care facility that offers VMMC on a continuous/regular basis. * Mobile Site – A site that offers VMMC at a temporary structure. * Outreach Site – A site that offers periodic VMMC services in various locations that may have been modified for VMMC purposes.   Service Delivery Types   * Campaign – A program that offers services in high volume for short periods of time. Services are often offered on consecutive days for a specified time period, to capture as many clients as possible. Campaigns are often designed to target certain populations (e.g., during school holidays to provide VMMC to adolescents, or during certain times of the year to align with cultural beliefs or traditions).  Routine Service Delivery – Availability of dedicated VMMC services throughout the year. | | | | |
| **Please collect the information about the human resources dedicated to VMMC service delivery for this site based on the following criteria:** | | | | |
|  | **Type** | | | **Notes** |
| E1. **Type of Site** (check one): | Fixed | |  |  |
| Mobile | |  |  |
| Outreach | |  |  |
| E2. **Type of Service Delivery observed TODAY** (check one): | Regular | |  |  |
| Campaign | |  |  |
| **Please indicate if there are full-time staff working in the roles listed below, and the number of each cadre (some staff may be filing multiple roles but only count each staff member one time).** | | | | |
| **Check one:** | **Y** | **N** | | **Number of**  **Full-Time Staff** |
| E3. Site Managers |  |  | |  |
| E4. VMMC Providers |  |  | |  |
| E5. VMMC Assistants |  |  | |  |
| E6. Pre- and Post-Operative Care Clinicians |  |  | |  |
| E7. Hygienists/Cleaners/Infection Prevention Officers |  |  | |  |
| E8. Counselors |  |  | |  |
| E9. Community Health Workers |  |  | |  |
| E10. Runners |  |  | |  |
| E11. Data Clerks |  |  | |  |
| E12. Receptionists |  |  | |  |
| E13. Total staff working on VMMC today |  |  | |  |
| E14. Total staff working on VMMC when demand is high |  |  | |  |
|  | | | | **Notes** |
| E15. In your observation today, was the client flow free of bottlenecks caused by insufficient staffing in one area? *If NO, skip to E17.* |  |  | |  |
| E16. Please identify where the bottlenecks took place: |  | | | |
| E17. Is staffing sufficient to let intake, education, HTC and individual counseling, medical screening and examination, and surgery all go on simultaneously? |  |  | |  |
| E18. For the past 6 months, has staffing been sufficient to let services continue as scheduled without interruptions due to staff availability? |  |  | |  |
| **Staffing Roles and Functions**:   * **Site Manager** - Coordinates site activities, manages commodities, ensures quality and logistics. * **VMMC Provider** - Removes the foreskin, performs hemostasis and suturing (mattress sutures). Including PrePex placement and removal. * **VMMC Assistant** - Prepares client for surgery (or PrePex placement or removal), ensures client is consented, assists with procedure, administers anesthesia, performs final stitching, and dresses wound. * **Pre- and post-operative care clinicians** - Performs pre-operative assessment counseling, history and physical, ensures that client is consented, provides post-operative care, schedules and conducts client education routine follow-up visits. * **Hygienist/Cleaner/Infection Prevention Officer** - Cleans and assists with surgical instruments, acts as a runner. * **Counselor** - Provides VMMC counseling, HIV testing and counseling (HTC), client education. * **Community Health Workers** - Assist with community demand generation and client post-operative follow-up. * **Runner** - Delivers supplies, provides varied assistance to staff. * **Data Clerk** - Maintains client records and enters relevant data. * **Receptionist** - Receives clients, assists with data management.   **Source**: **PEPFAR Operational Guide for Voluntary Medical Male Circumcision Services: *A service guide for site operations.*** | | | | |
| **The table below is from the PEPFAR Operational Guide for Voluntary Medical Male Circumcision Services: *A service guide for site operations* and is included as a reference for the proposed staffing options based on the volume of VMMC service delivery. Some variation may be appropriate, but major deviations should be discussed, particularly if bottlenecks have been noted at the site.**  cid:image003.jpg@01CFED37.4AAD4F90  **Comments:** | | | | |