

Clinical Assessment for Systems Strengthening (CLASS)

[Track 1.0 Grantee] ASSESSMENT

Briefing Meeting with CDC [Country Office]

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[Date]

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Meeting with CDC/[Country Office]

AGENDA

1. Introductions
2. CLASS Framework Overview
3. Orientation on Tools
4. CLASS [Track 1.0 Grantee] Assessment Overview
5. Discussion
6. Logistics
7. Way Forward

Purpose

- To provide HRSA with an approach to assess the administrative, clinical, and financial capacity of USG-supported HIV/AIDS programs;
- To inform HRSA and relevant partners of existing technical assistance needs, identify available resources to address these needs, and enable technical and organizational strengthening at the Track 1.0 Grantee, Local Partner, and Local Partner Treatment Facility levels.
- To facilitate a process for HRSA and relevant partners to determine readiness and ensure a successful and sustainable transition of programs to local leadership.

Guiding Principles

- High quality services to people infected and affected with HIV/AIDS
- Systems strengthening through local capacity development; and
- Increased country ownership through transition of programs to local leadership

Partner Collaboration

- The CLASS Framework is adaptable for specific country and program needs
- HRSA works with key partners to adapt and implement the CLASS
- Areas for partner collaboration with CLASS assessments include:
 - ▣ Identifying the scope and nature of the assessment
 - ▣ Site selection
 - ▣ Participating on an assessment team
 - ▣ Reviewing the assessment report and providing recommendations
 - ▣ Leveraging existing technical assistance resources

Objectives

- Assess the **quality** of services and care provided to patients;
- Ensure that organizational **systems, policies, and procedures** are in place to accomplish program goals and objectives;
- Assess the **organization's capacity** to provide the funded services and manage funding;
- Identify program **strengths and weaknesses** and provide appropriate consultation to enhance their capacity to provide high quality, cost competitive health care and services;
- Specify areas of **system strengthening** to enable organizations to sustain their HIV service delivery; and
- Identify **model programs** or program components that can be **replicated** in other communities or organizations.

CLASS Process : Phase I-III

PHASE I: INITIATION & SCOPE

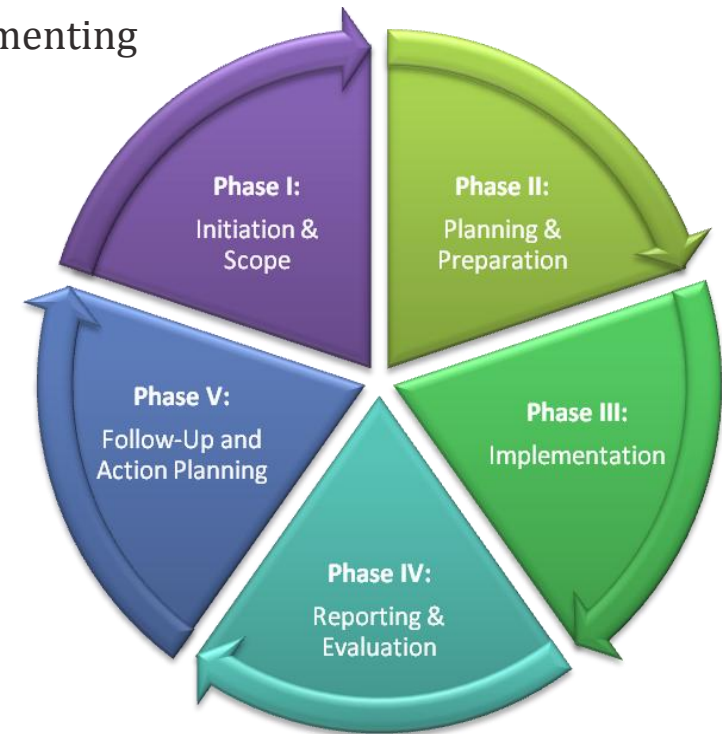
- Collaborate with the in-country USG team and implementing partners to identify assessment needs
- Develop the scope and purpose for the assessment

PHASE II: PLANNING & PREPARATION

- Adapt the CLASS to best fit country or partner needs
- Prepare assessment work plan and budget
- Collect and review relevant documents
- Identify and gather country-specific information
- Recruit and train team of reviewers
- Coordinate logistics
- Conduct pre site-visit conference calls

PHASE III: IMPLEMENTATION

- Conduct pre-assessment briefing meetings with the in-country USG team
- Conduct assessment visits to Local Partners and/or Local Partner Treatment Facilities(s)
- Hold team meetings to debrief and evaluate
- Conduct exit conferences with the in-country USG team Track 1.0 Grantees



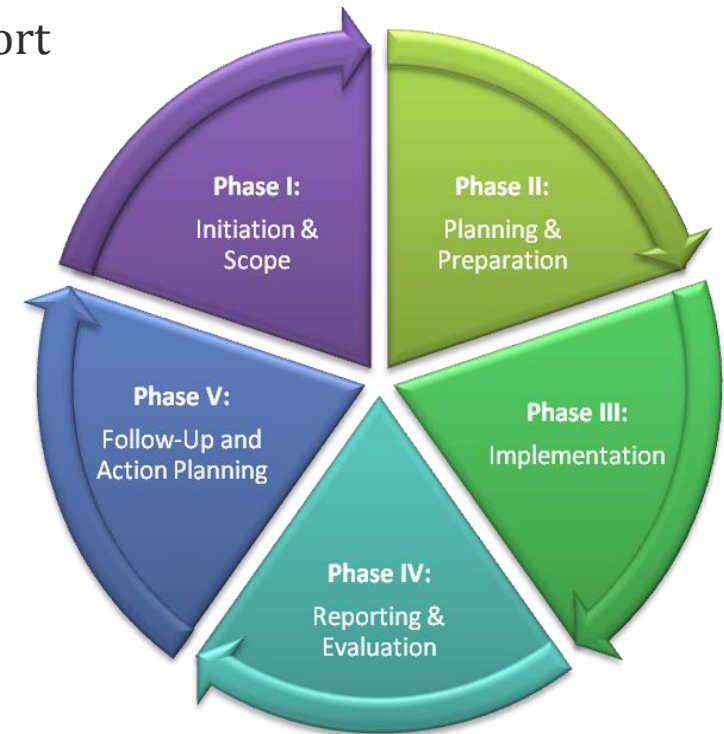
CLASS Process : Phase IV-V

PHASE IV: REPORTING & EVALUATION

- Synthesize assessment findings into a final report
- Make recommendations based on findings
- Present overall findings to relevant partners
- Conduct evaluation sessions
- Identify best practices

PHASE V: FOLLOW-UP & ACTION PLANNING

- Schedule follow-up meetings
- Work with implementing partners to develop action plans
- Identify existing technical assistance resources
- Coordinate/monitor capacity development



CLASS Methodology

- Site Selection
- Team Composition
- Pre-Assessment Work
- Assessment Components
- Assessment Outcomes

Site Selection

- HRSA works with in-country USG team and Track 1.0 Grantee
- Criteria for selection
 - ▣ Scope of work for assessment
 - ▣ Program size (# of sites, patients in care)
 - ▣ Site type (tertiary, primary, satellite)
 - ▣ Stage of transition
 - ▣ Geographic location

Team Composition

ADMINISTRATIVE REVIEWER

- Conduct a comprehensive review of the specified service area(s) with an emphasis on review of management processes such as organization structure, lines of management authority and communication, and relationships with other service providers.

FISCAL REVIEWER

- Conduct a comprehensive review of the specified service area(s) with an emphasis on review of financial policies and procedures, cash flow and accounts payable, internal controls, and payroll.

CLINICAL REVIEWER

- Conducts a comprehensive review of the specified service area(s) that includes patient chart review and emphasis on direct observation of clinical systems.

Team Composition (continued)

PROJECT OFFICER/ACTIVITY MANAGER

- ❑ Provides project-related information to assist with the review
- ❑ Coordinates in-country logistics and communication with partners

TEAM LEADER

- ❑ Serves as primary team contact during visit.
- ❑ Coordinates the sharing of tasks to complete the site assessment.
- ❑ Site Visit Report

EVALUATOR

- ❑ Observes, documents, and implements procedures to evaluate the feasibility, reliability and utility of the **CLASS** tool and process.

Pre-Assessment Work



- Assessment team training
- Document review
- Conference Calls with in-country USG team and Track 1.0 Grantee

Assessment Components

- Entrance meeting
- Facility tour
- Information Gathering
 - ▣ Staff interviews
 - ▣ Document review
- Exit conference

Information Gathering

- Main responsibility of assessment team members
- Critical sources: staff interviews and document review
- Staff interviews may be conducted in an individual or group setting
- Open-ended questions are included in CLASS tools
- Comments will not be attributed to individual staff
- May request management, Track 1.0 Grantee or Local Partners to excuse themselves during staff interviews

Sample Site Assessment Schedule

Time	Clinical Reviewer	Administrative Reviewer	Financial Reviewer
Day 1			
7:00-8:00 am	Assessment Team Reviewer Meeting		
8:15-8:45 am	Travel to Site		
9:00 -11:00 am	Opening Session		
11:00 - 11:30 am	Tour of Organization Space		
11:30-5:00 pm	Meet with Clinical Director/Clinical Mentoring Coordinator	Meet with Program Monitoring Director	Meet with Chief Financial Officer, Business Manager, and Grants Manager
	Review Project CQI plan and minutes of CQI committee	Review project meeting minutes, monitoring policies and reports	Review grantee/local partner grant files, invoice submissions,
Day 2			
9:00-2:00 pm	Review measurement and evaluation policies and procedures, data analysis and sharing processes.	Review supportive supervision, site visit policies and procedures, reporting documents, and technical assistance documents.	Grants Management review, procurement, and travel policies and documents, and financial monitoring processes and documents.
2:00-3:00 pm	Team meets to review findings and/or request additional materials.		
3:00-5:00 pm	Closing Session		
5:00-6:00 pm	Travel from Site		
6:00-7:00 pm	Team debrief, evaluation, and planning for next visit		

Key Staff Interviews at Clinic Sites

Clinical Reviewer	Administrative Reviewer	Finance Reviewer
Principle Investigator (PI), Co-Principal Investigator (Co-PI), Executive Director, Site Coordinator/Administrator, Site Manager		
Medical Director	Board members, if NGO	Chief Financial Officer
Physicians	Executive Director	Site Accountants
Nurses	Human Resource Director	Payroll Staff
Counselors	Program Monitoring Staff	Registration Staff
Registration Staff	Triage Nurse	Management Information Staff
Pharmacy Staff	Data Entry Staff	Grants Management Staff
Laboratory Staff	Counselor	
M&E Staff	Pharmacy staff	
Patient Liaison Officer	Administrative Support	
	Registration Staff	
	Patient Liaison Officer	

On-Site Document Review

- Documents to be available on-site for review
- Major document review components:
 - ▣ Personnel files
 - ▣ Clinic charts
 - ▣ Bank statements and reconciliation
 - ▣ Payroll and timekeeping records
 - ▣ Petty cash records for 6 months
 - ▣ Financial statements and expenditure reports

Assessment Final Report

- Key immediate outcome from CLASS assessment
- Report development stages:
 - Conduct the exit conference to share initial findings
 - Consolidate findings and recommendations for each technical area
 - Synthesize conclusions across technical areas and form initial cross-cutting recommendations.
 - Validate and finalize findings and recommendations
 - Disseminate the final report
- Used as a working tool for the Project Officer/activity manager to follow progress and manage the program

CLASS Tool: Overview

The **CLASS** tool was:

- Created for international use based on the Primary Care Assessment Tool (PCAT) model
- Developed in conjunction with the PEPFAR Care and Treatment Technical Working Group
- Capitalizes on the knowledge and experience of trained experts
- Designed to be adaptable and applicable to different settings

CLASS Tool: Modules

- **CLINICAL:** Assesses facility policies and procedures, project work plan, continuous quality improvement/quality assurance, and review of medical records.
- **FINANCIAL:** Assesses income and expenditures, charges and fees, billing and collections, accounting system, accounts payable and cash flow, fixed assets, inventory and purchasing, payroll, revenue, and cost allocation.
- **ADMINISTRATIVE:** Assesses organization and structure, governance, strategic and short term planning, personnel policies and procedures, clinical personnel issues, licenses and certifications, risk management and liability protection, facility, networking, collaboration, linkages, and management information systems.

CLASS Tool: Modules (continued)

- **TRAINING:** Assesses training approaches, adult learning techniques, training material, satisfaction of trainees, and measurement of the impact and outcomes of the training.
- **PARTNER ADDENDUM:** Assesses the partner's capacity to provide management and support to clinic sites. Includes, strategic planning, financial management, human resource management, establishment and use of health care networks, monitoring and evaluation/quality assurance, supply chain management, physical infrastructure to support the program, fundraising, and oversight and support to clinic sites funded by the partner organization.

Administrative Module

CLINICAL ASSESSMENT FOR SYSTEMS STRENGTHENING

CLASS Administrative Module

REVIEWER: _____ DATE: _____

SITE: _____

SECTION 1: ORGANIZATION STRUCTURE AND GOVERNANCE

Core Competencies:

- The organization has a governing body that provides effective oversight and direction to support PEPFAR II-funded programs.
- There is an organization wide planning process and resulting plans are implemented.
- The organization has provisions for managing relationships with government agencies and donors.
- The organization meets all applicable National or other accreditation and legal requirements.
- The organization has provisions for preventing accidents and accidental exposures.
- The organization has adequate systems to ensure the protection of organization, employee, and patient information and files.
- The organization has a contingency plan (social/political unrest, act of war, natural calamity, loss of power, loss of access to clean water, etc.)

Open-ended questions:

1. What group provides oversight for the organization operations?
2. What documents provide the rules followed by the governing body and how often are they updated?
3. How does the group decide the current and future priorities for the organization?
4. How does management share organization status information with the governing body?
5. Who participates in the strategic planning process? HIV program staff?
6. How does the organization ensure consistency with the national or country HIV plan in their strategic plan development?

Training Module

CLINICAL ASSESSMENT FOR SYSTEMS STRENGTHENING

CLASS Training Module

Prepared for **Track 1.0 Grantee** Assessment

INTERVIEWER: _____ DATE: _____

Track 1.0 Grantee

INTERVIEW GUIDE

Interviewee Name: _____

Position at **Track 1.0 Grantee** _____

Years at **Track 1.0 Grantee** _____

Years in position: _____

Interview Location: _____

Time of Interview: _____

NOTE: Remind interviewees that the interview will cover the full spectrum of the training program.

1. What does BHP-PEPFAR consider to be the main strengths of **Track 1.0 Grantee** training programs?
 - a. What would you consider to be **Track 1.0 Grantee** areas of expertise?
 - b. Please describe **Track 1.0 Grantee** processes complementary expertise outside of the organization.
2. What are areas in which **Track 1.0 Grantee** training program can be improved?
 - a. How can these improvements be achieved?
3. Describe **Track 1.0 Grantee** various quality improvement framework and how that impacts the program.
 - a. What are the processes in place to evaluate **Track 1.0 Grantee** training program?
 - b. How do those who are trained and supported through the training program provide feedback on the curriculum, teaching aids, trainers, and etc., and how is that incorporated in future trainings?
 - c. How do trainers provide feedback on the curriculum, teaching aids, etc., and how is that incorporated?
 - d. How does **Track 1.0 Grantee** that trainers have the support that is needed?
 - e. How does **Track 1.0 Grantee** the quality of trainings?

CLASS Tool: Use

Reviewers will use the tool:

- To focus on specific program operations.
- To review program components required by HRSA, PEPFAR, or program expectations.
- As a planning tool.
- As a guide during interviews to ensure that relevant areas are discussed.
- As a reference when writing the site assessment report
- As a gauge to assess Local Partner needs for technical assistance

CLASS [Track 1.0 Grantee] Assessment

[Date]

Purpose

The assessment's purpose is to conduct a comprehensive review of [the Track 1.0 Grantee's] organizational, programmatic, administrative & financial system capacity to ensure readiness to become a directly funded USG partner.

The assessment methodology has been developed in collaboration with [Track 1.0 Grantee], [Local Partner(s)] and CDC/[Country Office].

Assessment Team

	WEEK ONE	WEEK TWO
HRSA LEAD		
TRAINING REVIEWER		
REVIEW SUPPORT		
PROJECT OFFICER		
ADMINISTRATIVE REVIEWER		
FINANCIAL REVIEWER		

Assessment Schedule: Week One

Date(s)	Site/Organization Name	Time
Sun. [Date]		12:40 PM
Mon. [Date]		8 AM
		PM
Tues. [Date]		All day
Wed. [Date]		All day
Thurs. [Date]		All day
Fri. [Date]		AM
		PM
Sat. [Date]		All day
		TBD

Assessment Schedule: Week Two

Date(s)	Site/Organization Name	Time
Sun. [Date]		PM
Mon. [Date]		AM
		PM
Tues. [Date]		All day
		PM
Wed. [Date]		All day
		PM
Thurs. [Date]		All day
		AM
		PM
Fri. [Date]		AM
		PM

CLASS Tools

- Training Tools:
 - ▣ Interview Guide
 - ▣ Curriculum Review Form
 - ▣ Trainings Tabulation Form

- Site Assessment Tools:
 - ▣ Administrative
 - ▣ Financial

- Partner Assessment Tools:
 - ▣ Administrative
 - ▣ Financial

Site Assessment Components

- **Entrance meeting:** The assessments begin with an opportunity for the team to meet with the organization's leadership, HIV clinical and Laboratory Master Trainer Corps, and other key staff. This session allows the site to provide an overview of their history, services provided, and accomplishments achieved, as well as present any challenges currently being faced.
- **Facility tour** (as appropriate): The team tours the facility to gain the perspective of the impact of clinical and laboratory training on quality of care and support to decentralization.
- **Information gathering:** Team members conduct staff interviews and request follow-up documents to clarify or confirm information collected.
- **Exit Conference:** At the end of the site visit, the team meets with the organization's leadership to share findings of the assessment, including strengths and areas for improvement.
- **Debrief Meeting:** The site visit team meets with staff from partner organizations at the completion of all site and/or partner assessments to discuss cross-cutting findings.

Assessment Components: Training

Clinical Master Trainer/ARV Site Support Component (CMT):

Goal: Further develop and expand a sustainable training capacity in clinical care and treatment of HIV/AIDS patients that provides on-going training and mentoring to ARV sites

Support from:	To	Through
Core Clinical Master Trainers: Six physicians, two pharmacists, and four nurse-midwives	Site-level Master Trainers	<ul style="list-style-type: none">• Assessment of site-specific training and support needs• Immediate on-site practical support• Identification of site-level Physician and Nurse Master Trainers• On-site follow-up support• Support and evaluation visit• Telephone site support
Site-level Master Trainers	HCPs	<ul style="list-style-type: none">• Initial and on-going trainings• Direct supervision and support

Assessment Components: Training

Laboratory Master Trainer/ARV Site Support Program (LMT):

Goal: Support the establishment of decentralized laboratories with CD4 and viral load testing capability by developing a sustainable training program in these tests at the local level.

Support from:	To	Through
Core Lab Master Trainers	Site Lab Master Trainers	<ul style="list-style-type: none"> • Assessment of site-specific needs • Centralized training and mentoring in CD4, Viral Load, Chemistry, Hematology, and other lab testing • On-going site support • Periodic follow-up support and evaluation visits • Telephone site support
	HCPs	<ul style="list-style-type: none"> • Provide on-site training and mentoring in labs • Evaluate Site Master Trainers in established labs and Nurses for Rapid HIV Testing and Dry Blood Spot

Key Staff Interviews at Clinic Sites

Training Reviewer	Administrative Reviewer	Finance Reviewer
Principle Investigator (PI), Co-Principal Investigator (Co-PI), Executive Director, Site Coordinator/Administrator, Site Manager		
Core Master Trainers	Board members	Chief Financial Officer
Site-level Master Trainers (or those functioning in that role)	Executive Director	Site Accountants
Physicians	Human Resource Director	Payroll Staff
Pharmacy Staff	Program Monitoring Staff	Registration Staff
Laboratory Staff	Triage Nurse	Management Information Staff
M&E Staff	Data Entry Staff	Grants Management Staff
Etc.	Administrative Support	
	Registration Staff	
	Patient Liaison Officer	

Document Review: Administrative

Advance Review	On-Site Review
Organization's Statement	Minutes of Board and Board Committee Meetings
Current Organogram	Minutes of staff and management team meetings
Current HIV Program Chart	Other relevant committee meeting minutes
Strategic Plan	Contracts for all HIV service subcontractors
Organization Operating Policies & Procedures	Memorandum of Understanding/Agreement for Partners and Referral sites
Board By-Laws	Personnel files (employee evaluations, benefits, etc.)
Program Work plan	Description of data collection & information system
Personnel Policies & Procedures	Staff training manuals and list of trainings staff has participated in during the last 12 months.
Position Descriptions	Organization QI system documents
Staff Resumes	Personnel files (1 for each category of staff paid by PEPFAR)
	Program monitoring policies and procedures
	Program monitoring reports

Document Review: Financial

Advance Review	On-Site Review
Current Budget for HIV Program.	Financial Management Policies and Procedures including applicable organizational, MOH, partner, USG, or Diocesan sources.
Position descriptions of financial management staff, including accounting staff.	Most recent Management Letter and/or audit report. Prior period report also desired.
Organization chart showing staff responsible for financial management functions	Documentation of reconciliation of checking account (s)
Committee structure detailing budget approval process, review process of financial statements, and how audit findings are addressed.	Meeting minutes of Management, Governance or other Committees responsible for financial management functions including budget and audit.
Accounting Policies & Procedures	Visual review of accounting system including electronic (Excel or Accounting) software.
Billing & Collection Policies, if applicable.	Documentation of internal controls and internal quality assurance provisions.
Procurement Policies & Procedures	Payroll records
Chart of Accounts	Petty cash records
	Travel expense records
	Expenditure reports (monthly or quarterly)
	Inventory control systems

Document Review: Training

Advance Review	
The Nurse Prescriber and Nurse Dispenser training curricula (1 month)	Training materials on LIS
Dispensing only curricula (4 days)	Training materials on lab data management, reagent logistics and quality assurance.
Materials for training in Routine HIV Testing (RHT) and Dried Blood Spot testing (DBS) for nurses	National Ante-Natal Sentinel Surveillance related testing training materials
AIDS Clinical Care Fundamentals	PIMS II training manual
Introduction to AIDS Clinical care	IRB training materials
Pediatric Newborn and Neonate Care	[Local Partner] training materials
QAI training manual/curricula?	Training materials on drug management systems and strengthening the pharmacovigilance program.
Laboratory training manual and materials to train site-level LMT	Any other training materials not reported in the 2008-2009 annual report and/or developed after the submission of the report.
Training manuals on CD4, Viral load, hematology and chemistry	

Document Review: Other

Advance Review	On-Site Review
Follow up support visit reports: CMTs, LMTs	List of site Clinical and Laboratory Trainings
Monitoring and Evaluation plan, Training Outcomes Reports, etc.	Telephone logs: CMTs, LMTs
Trainee Satisfaction Surveys and Survey Results	Mentoring log
List of Clinical and Laboratory Master Trainers	Site support log
24-hour Phone Line policies and procedures	Off-site and on-site training/re-training logs
Rapid HIV counseling and testing policies	
DBS collection procedures	
Laboratory policies and standard operating procedures for absolute minimum and basic tests	
Laboratory QA and QC reports.	
National HIV Care and Treatment Guidelines (Adult, Pediatrics, PMTCT, HCT, and etc.)	
Site assessments (e.g. for viral loads)	
Pre-CLASS Assessment Reports	

Discussion

