DATA MANAGEMENT MANUAL

HIV Prevention Programmes and HIV Testing Services

September 2017
Version 2.0

Ghana AIDS Commission

Acknowledgements

The development of this National Data Management Manual was a Ghana AIDS Commission (GAC) led process that involved key stakeholders whose contributions deserve commendation and acknowledgement.

The GAC is particularly grateful to the Consultant, Samuel K. Dery and his team for providing technical assistance in preparing the manuals. The GAC team also deserve a special mention especially, the Ag. Director General of GAC, Amb. Dr. Mokowa Blay Adu-Gyamfi under whose visionary leadership these National Data Management Manuals were developed. The process of developing the Data Management Manual was steered by the Research, Monitoring and Evaluation Division led by Mr. Kyeremeh Atuahene, with support from the Data Manager, Data Quality Assurance Manager, M&E Coordinator and Data Management Officers. It was also done in close collaboration with the Technical Services Division headed by Mr. Cosmos Ohene-Adjei and with support from the Finance and Administrative Division staff that provided the administrative and logistical support for the various meetings. Special appreciation goes to the Government of Ghana, and Centres for Disease Control and Prevention of the US Government for funding the process.

Special thanks also go to key Implementing Partners who were called upon to support the drafting the manual.

The Ghana AIDS Commission and its partners and stakeholders look forward to the successful implementation of these manuals, driven by stronger partnerships and collaboration and a sense of common purpose.

Acronyms and Abbreviation

AIDS	Acquired Immune Deficiency Syndrome
ART	Anti-Retroviral Therapy
BCC	Behaviour Change Communication
CD	Compact Disc
CHBC	Community Home Based Care
CRIS	Country Response Information System
DHS	Demographic and Health Survey
DQAM	Data Quality Assurance Manual
DSW	Department of Social Welfare
FP	Family Planning
FSWs	Female Sex Workers
GAC	Ghana AIDS Commission
HBC	Home Based Care
HTS	HIV Testing Services
HIV	Human Immunodeficiency Virus
IP	Implementing Partner
IEC	Information, Education and Communication
KYS	Know Your Status
KP	Key Population
M&E	Monitoring and Evaluation
MDAs	Ministries, Departments and Agencies
MSM	Men who have Sex with Men
MTCT	Mother to child transmission
NACP	National AIDS and STI Control Programme
NAP+	National Association of People Living with HIV
NGOs	Non-Governmental Organisations
NSP	National Strategic Plan
OVC	Orphans and Vulnerable Children
PR	Prevention
PEP	Post Exposure Prophylaxis
PLHIV	People Living with HIV
PMTCT	Prevention of Mother to Child Transmission
PPAG	Planned Parenthood Association of Ghana
ROM	Read Only Memory
SCT	Standard Common Tools
SOPs	Standard Operating Procedures
STIs	Sexually Transmitted Infections
TSU	Technical Support Unit
WP	Workplace

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INTRODUCTION

- This Data Management Manual has been developed by the Ghana AIDS Commission and its Implementing Partners to provide guidelines and tools for collecting, reporting, and managing the data required to deliver and manage HIV Prevention Programmes and HIV Testing Services (HTS) services in the national response to HIV and AIDS.

- This version of the Data Management Manual is intended for use by all service delivery staff, data managers, M&E officers, and program managers in organisations providing HIV Prevention Programmes and HIV Testing Services (HTS) services

The Data Management Manual is organised in three major sections:

- **Overview of Data Management:** summarises key concepts and information as well as basic data management policies.

- **Data Management Tools and Instructions**: provide guidance for using each of the forms and reporting formats used in providing HIV Prevention Programmes and HIV Testing Services (HTS) services.

- **Data Collection and Reporting Procedures**: summarises how the data collection and reporting tools are used at all levels of the organisations providing HIV Prevention Programmes and HIV Testing Services (HTS).

This document is the updated version of the HIV Prevention Programmes Data Management Manual developed in 2012. Ghana AIDS Commission will continue to lead the review of the manual when the need arises.

The Ghana AIDS Commission recognises that the success and ultimate effectiveness in the national response to HIV and AIDS depends on accurate and timely data. This Data Management Manual is intended as a foundation to generate, manage and use data for the benefit of all Ghanaians whose lives and livelihoods depend on effective prevention, care, and treatment services.

OVERVIEW OF DATA MANAGEMENT

Data management is a critical component of the HIV and AIDS Monitoring and Evaluation system in Ghana. The Data Management System generates and manages the data that is needed to answer critical questions about the scope and reach of HIV and AIDS services, the extent to which planned interventions are actually implemented, and the outcomes for the targeted populations.

This section provides an overview of the HIV Data Management System in Ghana. It briefly describes:

- Relationship of Data Management to Monitoring and Evaluation (M&E)
- Information requirement for the Data Management System
- Data Management tools for collecting and reporting data
- Data Management procedures
- Data Management policies and issues

Data Management – the "Engine" for Monitoring and Evaluation

The national response to HIV and AIDS is implemented through a broad range of interventions and services to prevent HIV, treat, care and support people living with HIV, and mitigate the social and economic impacts of the disease. The progress and actual results of these services are assessed through the national Monitoring and Evaluation (M&E) system.

Monitoring and Evaluation are two essential, but very different functions, for managing the national HIV and AIDS response in Ghana. As defined in the Global Fund's M&E Toolkit:

- Monitoring is "the *routine* tracking of the key elements of program/project performance (usually inputs and outputs) through record-keeping, regular reporting and surveillance systems, as well as health facility observation and surveys. Monitoring helps program or project managers determine which areas require greater effort and identify areas which might contribute to an improved response."

- Evaluation, in contrast, is "the *episodic* assessment of the change in targeted results related to the program or project intervention. In other words, evaluation attempts to link a particular output or outcome directly to an intervention after a period of time has passed. Evaluation thus helps program or project managers determine the value or worth of a specific program or project."

- Both monitoring and evaluation rely on quality data that are collected, aggregated, reported, and managed through a data management system. In that sense, the data management system is the "engine" that drives both the routine monitoring and the periodic evaluations of the national response to HIV and AIDS.

The data management system described in this Manual, however, is limited to monitoring activities – the routine assessment of program performance. It is not intended to support periodic and formal evaluations of the national HIV and AIDS program.

Information Requirement for the Data Management System

The specific data in the data management system are determined by the information that is required to monitor the performance of services provided through the national HIV and AIDS program. These service areas are described in the National Monitoring and Evaluation Plan (2016-2020)[1], and are organized into several Thematic Areas:

Thematic Areas	**Service Areas**
Prevention of New HIV Infections	HIV Prevention Programmes (Prevention) HIV Testing Services Prevention of Mother-to-Child Transmission (PMTCT)
HIV Treatment, Care and Support	Services to People Living with HIV (PLHIV) through Support Groups and Home Based Care (HBC)
Mitigation of Social & Economic Impact of HIV and AIDS	Services to Orphans and Vulnerable Children (OVC)

Each of these service areas has explicit results that are defined in clearly stated performance indicators – specific statements about what the service will accomplish (typically defined by a number of people served, number of commodities distributed), for whom, and in a prescribed period of time.

These indicators focus on different dimensions, or levels of service delivery:

- Resources or inputs: the staff, money and facilities needed to implement programme activities – e.g., the number of peer educators recruited, the number of HIV testing centres established.
- Activities to deliver services – e.g., the number of peer education training sessions, number of PLHIV support group meeting held, number of community home-based care visits undertaken
- Outputs: the products and services resulting from the programme activities – e.g., the number of condoms distributed, number of men and women tested and know their results, number of clients provided with home-based care and support services
- Outcomes: the actual changes in the actions or behaviours of the targeted individuals receiving services – e.g., number of FSW reporting use of a condom with their last client. (*Note:* outcome assessments typically require non-routine, specialised surveys and assessments and therefore may not be included in routine monitoring activities.)

The performance indicators (whether input, activity, or output) therefore determine what data shall be collected, aggregated, and reported in the data management system.

[1] Ghana National HIV & AIDS Monitoring and Evaluation Plan (2016-2020), Ghana AIDS Commission, September 2017.

This Data Management Manual describes the data management system that is needed to report these and other indicators in the National M&E Plan. **The national capability to routinely monitor the performance of the National HIV and AIDS program therefore depends on the effective implementation of the tools, procedures, roles and responsibilities, and policies described in this Manual.**

Tools for Collecting and Reporting Data

The Data Management System is based on a set of data collection and reporting tools for each of the HIV and AIDS service areas provided by the Ghana AIDS Commission and its Implementing Partners:

- HIV Prevention Programmes (Prevention)
- HIV Testing Services (HTS)
- Prevention of Mother-to-Child Transmission (PMTCT)
- Services to People Living with HIV (PLHIV)
- Home-Based Care (HBC)
- Services to Orphans and Vulnerable Children (OVC)

The data collection tools are registers/forms and report formats that have been developed by the Ghana AIDS Commission and its Implementing Partners, and the Ministry of Health/ National AIDS Control Program to report their performance results for each of the performance indicators in the service delivery areas.

These data collection tools are briefly summarised in ***Exhibit 1***. They are listed in two columns – one for source register/forms (to capture original data at the level where services are provided), and reporting forms (to aggregate and report data to a higher organisational level).

The individual Data Management tools – the actual forms and reporting formats, including instructions for their use are presented in a section of this Data Management Manual.

Exhibit 1

HIV and AIDS Data Management Tools: Source Documents and Reports (By Service Area)

Service Area	Source Documents	Reports
HIV Prevention Programmes (Prevention)	• KP Individual tracking sheet tool (SCT 1) • Peer Educator Daily Activity Sheet (SCT 2) • Attendance Register, Group Activities (SCT 3)	• Prevention Indicator Summary (PR 1) • Key Population (KP1) • Workplace Programs Periodic Summary Report (WP 1)
HIV Testing Services (HTS)	• HTS Register (HTS 1) • Self-test kit distribution register (HTS3)	• HTS Monthly Returns / Indicator Summary Sheet (HTS 2) • Prevention Indicator Summary (PR 1) • Key Population (KP1) • Workplace Programs Periodic Summary Report (WP 1)
Prevention of Mother-to-Child Transmission (PMTCT)	• PMTCT Register • EID register	• PMTCT Monthly Returns / Indicator Summary Sheet
Services to People Living with HIV (PLHIV)	• PLHIV Enrolment Form (PLHIV 3) • PLHIV Support Group Meeting Register (PLHIV 4) • PLHIV Exit Register (PLHIV 5)	• PLHIV Enrolment Summary Sheet (PLHIV 2) • PLHIV Indicator Summary Report (PLHIV 1)
Home Based Care (HBC)	• Home Based Care Enrolment Form (HBC 3) • Home Visit Register (HBC 5)	• Home Based Care Home Visit Summary (HBC 4) • Home Based Care Enrolment Summary Sheet (HBC 2) • Home Based Care Indicator Summary Report (HBC 1)
Services to Orphans and Vulnerable Children (OVC)	• OVC Register (OVC 3)	• OVC Support Summary Form (OVC 2) • OVC Summary Indicator Form (OVC 1) • OVC Enrolment Summary Sheet (OVC 4)
Other Standard Common Tools (SCT) *Note: these forms are used in all service areas*	• Training Record Form (SCT 4) • Two-way Referral Form (SCT 5) • Commodity Stock Management Sheet (SCT 6) • NHIS Enrolment form (SCT 10) • Post Gender Based Violence Care (SCT 8) • Clinical Care Register (SCT 9a & 9b)	• Commodity Stock Management Summary Sheet (SCT 7) • Clinical Care summary (SCT 9c)

Data Management Procedures

Data management procedures provide standardised guidelines for using all relevant data collection tools and reporting formats for a given Service Area. These Service Areas include: HIV Prevention Programmes, HIV Testing Services (HTS), Prevention of Mother-to-Child Transmission (PMTCT), Services to People Living with HIV (PLHIV), Home Based Care (HBC), and services to Orphans and Vulnerable Children (OVC).

Each of the Data Management Procedures provides two types of information: general introductory information, and specific guidelines for generating and aggregating the data into district, regional, and national reports to monitor Service Area performance.

The general introductory information includes:

- target audience
- services provided
- performance indicators
- source documents
- summary reports

The usage and reporting guidelines are sequenced by organisational level: service provision, district, regional, national Implementing Partner, and country level (Ghana AIDS Commission). For each organisational level they include the following information:

- who completes the activity
- brief description of the activity
- when the activity occurs
- forms and reports used
- result of the activity

These Data Management Procedures are presented by service areas in a separate section of the Data Management Manual.

Data Quality Issues

Effective and efficient implementation of the NSP depends on the availability of quality data – i.e., data that are valid, reliable, accurate, complete, and timely. To ensure that HIV and AIDS data meet these standards, the national Monitoring and Evaluation Plan developed by the Ghana AIDS Commission and its partners mandated the establishment of a national data quality assurance system for HIV.

GAC's Quality Assurance initiative seeks to minimise (and even eliminate) data errors by focusing on the quality principle of "getting it right first time" when collecting, recording, transcribing, collating, and reporting data. This quality principle refers to investing more up front in designing tools and processes; changing procedures, processes, and tools to produce better outputs; and doing things differently (i.e. correctly) at the earliest stages of the production process so that errors and product issues never get upstream. In the context of data production, this principle means preventing data errors from occurring in the first place, or correcting them at the lowest level before those errors are rolled up to higher levels of the data management system.

The Conceptual Framework for this DQAM emphasizes three overarching and coordinated processes for Data Quality Assurance:

- **Error Prevention:** involves processes to support and ensure that data is collected as planned for preventing errors from occurring in the first place and for easily identifying and resolving data quality issues that arise;

- **On-going Quality Control**: involves planned measures and systematic checks built into data collection, data entry, and data reporting procedures to ensure that data captured in the system are accurate and reliable; and

- **Quality Assessments:** includes in-depth retrospective evaluations and assessments of over- and/or under-reporting. During the assessments, data quality is measured and steps taken to improve data quality.

This data quality system is being implemented at all levels and in all sectors, as one of the strategies to ensure high-quality strategic information for timely decision making and action. It is described and documented in a national Data Quality Assurance Manual (DQAM) that is available separately from this Data Management Manual.

Data Management Policies

The following Data Management policies have been established to provide guidance to service providers, program administrators, auditors, and other authorised personnel in three critical areas:

- Data security and client confidentiality
- Storing and archiving HIV and AIDS program data and documents
- Backing up program documents and data

Data Security and Client Confidentiality

Rationale: Data security and client confidentiality are essential for the provision of effective prevention, care, and treatment services in the HIV and AIDS program. Breeches of client confidentiality and data security are a violation of personal privacy and further undermine the value and effectiveness of all prevention, care, and treatment services in the national HIV and AIDS program.

Policy: All personal data for clients of the HIV and AIDS program, and all records and documentation for purposes of administering and supporting the national HIV and AIDS program, must be secured against unauthorised access to protect the confidentiality of clients and the integrity of the program. All service providers, program administrators, and other program personnel are required to observe and maintain the confidentiality of clients and the integrity of program data.

1. **Access to client and program data.** Data access should be granted only to authorised persons. Authorised persons may include service delivery staff, program managers and officers, auditing staff, and national level authorities.

2. **Anonymous client identifiers.** Anonymous unique client identifiers shall be used whenever possible in order to ensure client confidentiality. Client personal information (including names, telephone numbers, pictures, and other personal data) shall only be used when anonymous identifiers are not possible, and shall never be used when presenting or summarising program data.

3. **Confidentiality agreements**. Service Providers, and other direct service personnel, who are authorized to view and maintain personal client information shall sign a confidentiality agreement that requires absolute adherence to client confidentiality in providing services or administering the HIV and AIDS program.

4. **Password protection for electronically stored confidential data.** Service providers, program managers, and administrators, and anyone else with authorized access to client and program data shall be assigned and shall use private passwords when accessing confidential data in electronic formats.

5. **Reporting data privacy violations.** Anyone observing or inadvertently causing a violation of client confidentiality shall report this violation to the responsible Field Supervisor, Program Officer, or Program Manager

6. **Contracted or external service providers.** Contracted or external service providers shall be required to observe client confidentiality and data security in the provision of HIV and AIDS services. Contractual agreement authorising participation in the national HIV and AIDS program shall include provisions conforming to the policies on Client Confidentiality and the Security of Program Data, Records, and Documents.

Storing and Archiving HIV and AIDS Program Data and Documents

Rationale: All HIV and AIDS program data and documents must be available for referencing client and program performance information during and after a project. It is essential that these documents are available for program audits, to verify the quality of data, and to justify or document program performance. If documents and records are not readily available, intact and in usable condition, the integrity of project data – and the project itself – may be questioned.

Policy: All HIV and AIDS program documents, records, and data shall be stored and archived in accordance with the following provisions:

1. **Period of Storage:** All HIV and AIDS program documents, records, and data shall be stored and made available:

   - during the entire funding period, or period of program performance, for the program or project; and

   - for a period not less than four years after the program or project has ended.

   Notwithstanding the above, all relevant national laws on storage and archiving of documents shall be observed.

2. **Storage conditions:** Documents and records shall be stored in secure and clean conditions that shall prevent tampering, damage, or destruction.

3. **Accessibility:** Stored documents shall be accessible to authorised persons for purposes of managing, reporting, or supporting program operations. Authorised persons may include service delivery staff, program managers and officers, auditing staff, and national level authorities.

4. **Disposal of stored documents:** Stored documents may be disposed of at the end of the Period of Storage, in conformance with the HIV and AIDS program policy on Document Security.

Backing Up Program Documents and Data

Rationale: It is essential that program data, including source documents and reports, be backed up to prevent the catastrophic loss of data and to ensure its availability and use in the future whenever needed.

Policy: All HIV and AIDS program source documents and reports shall be regularly backed up, in hard copy and/or electronic formats, to prevent the loss of essential client and program information. The back-up process shall be completed according to the following guidelines and requirements.

1. **Hard Copy Backups**

    1.1. When copies shall be created

    1.1.1. **Source documents:** Copies of source document shall be created whenever new source document are created, updated, or submitted to a higher program level as supporting documentation for program reports.

    1.1.2. **Reports:** Copies of hard copy reports shall be made when they are prepared or, alternatively, when they are submitted to a higher program level (e.g., at the end of a monthly or quarterly reporting period).

    1.2. Backup methods: Source documents and hard copy reports shall be made using manual carbon copy formats or a photocopier machine.

    1.3. Storage and maintenance of backup copies: Copies of source documents and reports shall be stored in the location where they were originally created, unless otherwise mandated by program administrators. They shall be stored according to the HIV and AIDS Data Management policy on *Storing and Archiving HIV and AIDS program Data and Records*.

2. **Electronic Backups**

    2.1. Types and frequencies of backups: The frequency of electronic backups shall be determined by the type of backup;

    2.1.1. **Partial back-ups** shall be created whenever data has been changed in a file. Only the data that has changed must be updated.

    2.1.2. **Full back-ups** shall be created whenever;
    - reports are created and submitted

    2.2. Backup devices. Electronic backups shall be created on a separate storage device (e.g., a flash drive, CD-ROM, standalone hard drive, or a network server). Whenever these technology formats risk obsolescence, existing backed-up files shall be transferred to current technology formats or media in order to assure access and availability in the future. For the avoidance of doubt, there must be a technology formats and versions review at least every two years to assess their currency and compatibility.

2.3. **Off-site locations for backup devices:** Backup devices shall be stored in off-site locations to ensure data security in case of theft, fire, flooding, or other disaster.

2.4. **Testing of backup files:** All backed-up files shall be tested at least quarterly to assure that back-up files are accessible and usable.

2.5. **Storage and maintenance of backed up files:** The files from all previous full back up operations shall be saved and maintained for future access. Backed-up files shall be maintained according to the policy on *Storing and Archiving HIV and AIDS program Data and Documents*.

DATA MANAGEMENT TOOLS AND INSTRUCTIONS: PREVENTION

The HIV and AIDS data collection forms and reporting formats are the foundation for the HIV and AIDS Data Management System. This section of the Data Management Manual contains these forms and reports for HIV Prevention Programmes and HIV Testing Services (HTS) services, as well as the instructions for completion.

There are two basic types of Data Management Tools for HIV Prevention Programmes and HIV Testing Services areas:

- **Source documents** are completed by service providers and other service delivery personnel to register clients, document the number of individuals reached, and record services and referrals provided to individuals and clients.

- **Report formats** are used to aggregate and report service delivery data at various levels – community, district, regional, and national.

The BCC and HTS source documents and reporting formats, with the instructions for their use, are presented below.

HIV Prevention Programmes

The Data Management tools in the HIV Prevention Programmes Service Area tracks and reports the number of people reached with prevention services, as well as the services provided through one-on-one, small group activities as well as through large group activities or events.

There are two primary source forms/registers for HIV prevention Services and three Summary Reports, each for a separate target population: General population and in-school and out-of-school youths, Key Population (KPs), and individuals in workplace settings. In addition, other Standard Common Tools (SCTs) are used as source forms (for training and community outreach events, referrals, and commodity stock management).

These source forms/registers and reporting formats are summarised below. The forms and reports with instructions are presented in the following pages.

Tools	Purpose	Who Uses Form	When Form is Used
Source Forms			
SCT 1 **KP Individual Tracking Sheet**	Keep track of all services provided to each individual reached to help determine those reached with the minimum package of HIV services	Peer Educator	On a daily/weekly basis
SCT 2 Peer Educator Daily Activity Sheet	Record daily prevention/BCC activities of Peer Educators on the field	Peer Educator	On a daily basis

SCT 3 Attendance Register (for Group Activities)	To capture data for an HIV group activity • number of persons attending • number of commodities sold/distributed during the activity	Field Supervisor based on information provided by Peer Educators	At the beginning and through to the end of the activity or event.
SCT 4 Training Record Form	To capture information about training events • the target community • the focus (topics) of the training when and where the training was organized	Technical Support Units, Implementing partners, District Focal persons	At the beginning of each day of training
SCT 5 Two-Way Referral Form	To facilitate the referral of an individual by one organisation for services from another organisation.	Peer Educator, or other Service Provider, who is referring a client for services	When a Peer Educator, or other service provider, determines that an individual or client should be referred for services from another organisation
SCT 6 Commodity Stock Management Sheet	To track commodities (condoms, lubricants, IEC materials, Self-test kits, etc.) received and issued by Implementing Partner	Field Supervisor/project officer etc.	Whenever a commodity is received or issued.
SCT 8 Post Gender Based Violence Care form (GBV)	Record type of GBV reported by clients and post GBV care provided by Service Providers.	Service Provider	On a daily basis
SCT 9 a,b	Register and track clinical services service provided to KPs in clinical care	Service Provider	On a daily basis
SCT 10: NHIS Enrolment form	To track the enrolment of KPs and PLHIV onto the NHIS	Service Provider	On a daily basis and summarize monthly
Tools	**Purpose**	**Who Uses Form**	**When Form is Used**
Reports			
PR 1 Prevention Indicator Summary Report	To summarise prevention services provided to in-school youth, out-of-school youth, and adults (general population)	Project Officers for the Implementing Partner organisation (district, regional, and national levels)	As part of monthly or quarterly reporting
KP 1 KP Indicator Summary Report	To summarise HIV prevention services provided to Key Populations (KPs): Female Sex Workers (FSW), Men Having Sex with Men (MSM), Prison Inmates and Persons who Inject Drugs (PWID)	Project Officers for the Implementing Partner organisation (district, regional, and national levels)	As part of monthly or quarterly reporting

WP 1 Workplace Prevention Indicator Summary Report	To summarise HIV prevention services provided to individuals in workplace settings	Project Officers for the Implementing Partner organisation (district, regional, and national levels)	As part of monthly or quarterly reporting
SCT 7 Commodity Stock Management Summary Sheet	To summarise the distribution of commodities – male and female condoms, lubricants, IEC materials, etc.– in an Implementing Partner organisation	Field Supervisor/project officer etc.	As part of monthly or quarterly reporting
SCT9c Clinical Care Summary	To summarise the number of KPs initiated into and retained in clinical care	Service provider/case manager	As part of monthly or quarterly reporting

SCT 1:	**KP Individual Tracking Sheet**
Thematic Area:	Prevention of new HIV Infection
Intervention Area:	HIV Prevention Programmes
General Information	
Purpose	To track all services provided to each individual reached with the package of services within the reporting period. It will also help track the type of services received by an individual within the reporting period and the number of individuals uniquely reached.
Reporting Period	Monthly
Who uses this form	Peer educators
Who verifies data	Supervising Officer
When form is used	The form is updated as and when an individual is reached.
Performance Indicators using data from this form	**National Summary Report** • Number of KP reached with HIV prevention programs - defined package of HIV Services **National M&E Plan** • Number of people reached with HIV prevention programs - defined package of HIV Services • Number of people receiving post-gender based violence (GBV) clinical care based on the minimum package

- Number of condoms and lubricants sold and distributed
- Number of people reached with stigma reduction activities.
- Number of people who received HTS and know their status

Instructions for using this form

Section 1
Background Information

Enter background information describing the location and context for the Peer Educator or Service Provider in the community:

- Name of organization
- Region and district
- Year and month of reporting
- Location
- Name of Peer Educator/Service Provider
- Target population

Note: *The target population refers to the specific group of persons the Peer Educator or Service Provider reaches with a defined package of HIV and AIDS services within the reporting period. The target populations include MSM, FSWs, OVC, PWID, Prisons, PLHIV etc.*

Section 2
Monthly Activities

Complete each row to describe the services provided to an individual KP throughout the month.

Date: Fill in the date when an individual was provided with a defined package of services within a particular month.

Name/UIC: Indicate the name or UIC of the individual reached with a package of HIV services within a month.

Age: Specify the age of individuals contacted.

Approach: Indicate whether the approach used to reach the individual was one-on-one or small group by ticking the appropriate column. A KP can be reached through any of the three approaches in the month of reporting.

Iote: *Approach refers to the method used in providing HIV and AIDS education. This could be one-on- one or small group discussion.*

- *One-on-One approach describes peer education that is given one person at a time by a peer educator.*
- *Small group activities usually involve discussions in a group of two to five persons*
- *Drama Performance (Large Group): usually involve large group activities of more than fifty persons.*

Service: Tick the service(s) provided to the individual (Prevention information, STI, HTS, TB, SGBV, Stigma, 1st test HIV, repeat HIV test, Hygiene Kits (tooth paste & brush and shaving blade), etc.

- Tick 1st test if the KP is testing to know his/ her HIV status for the first time in the project year. Tick 2nd test if it is a second or repeat HIV test in the project year.

Quantity of Condoms & Lubricants: Indicate the total number of male and/or female condoms and lubricants in single pieces distributed and sold to the individual. This should be aggregated at the end of the month.

Referral/ Follow up: Tick the type of referral(s) given to an individual if any; Sexually Transmitted Infections (STI), HIV Testing Services (HTS), Post-Exposure Prophylaxis (PEP), Pre-Exposure Prophylaxis (PrEP), TB, Post GBV, and Treatment, Care and Support.

Verification and signature

1. The supervisor must review and verify the data in Section 1 and 2 of the tool
2. The Form must be signed by both the peer educator/Service Provider and Supervising Officer at the end of the month.

National HIV Data Collection Tool

SCT1: KP Individual Tracking Sheet

Section 1: Background Information

Name of Organisation:____________________

Region:____________________ District:____________________

Year:__________ Month:____________________ Name of Microsite: ____________________

Name of Peer Educator____________________ Key Population: ____________________

SI No.	NAME	UIC	Age	Sex		Approach			Service													Referral &Follow-up					
															CONDOMS			Hygiene Kit									
				M	F	One on one	Small group discussion	Drama Performance (Large group activity)	Prevention Info	HTS	STI	TB	SGBV	Stigma	Male	Female	Lubricants	Tooth Paste &Brush	Shaving Blade	1st Test HIV	Repeat test HIV	STI	HTS	PEP/PrEP	Treatment, care & support	TB	Post SGBV

Signature of Peer Educator____________________ **Signature of supervising officer** ____________________

SCT 2: Peer Educators Daily Activity Sheet

Thematic Area: Prevention of New HIV infections
Intervention Area: HIV Prevention Programmes (One-on-one, Small Group)

General Information

Purpose	Record daily prevention activities of Peer Educators on the field
Reporting period	The SCT2 is updated on a daily basis. The daily activities are aggregated whenever the form rows are all completed.
Who uses this form	Peer Educator
Who verifies data	Field Supervising Officer
When form is used	On a daily basis

Instructions for Using This Form

Section 1
Background Information

2. Enter background information describing the location (either community of Microsite) and context for the Peer Educator Activity:

- Name of organisation
- Region and district that the Peer Educator undertakes his/her activities
- Year and month of reporting
- Target population

  Note: *The target population refers to the specific group of persons the Peer Educator reaches with HIV and AIDS Interventions or education. The target populations include in-school-youth, out-of-school, general population, MSM, FSWs, Workers (employees) among others.*
- Name of the Peer educator

Section 2
Daily Activities

1. Complete each row to describe the services provided to an <u>individual</u> on a given day.

2. **Date**: Specify the date when each individual was reached. Individuals served on the same day should be entered on separate rows with the same date.

3. **Type**: Specify whether the individual is an "old" or "new" contact by ticking (✓) the appropriate column.

Note: *"Old Contact" refers to an individual who has already been reached with an HIV and AIDS service by any peer educator while a "New Contact" is an individual who has not received any HIV and AIDS services from a Peer Educator.*

4. **Sex and Age**: Specify the age and tick the sex of individuals contacted.

5. **Approach**: Indicate whether the approach used to reach the individual was one-on-one or small group by ticking the appropriate column.

   Note: *Approach refers to the method used in providing HIV and AIDS education. This could be one-on- one or small group discussion.*
   - *One-on-One approach describes peer education that is given one person at a time by a peer educator.*
   - *Small group activities usually involve discussions in a group of two to five persons*

6. **Service**: Tick the service(s) provided to the individual -Prevention Information (including PEP, PrEP, gender, self-test, ABC, etc.), HTS, STI, Stigma, SGBV, TB and HIV.

7. **Quantity of Condoms:** Indicate the total number of male and/or female condoms in pieces given or sold to the individual.
8. **Quantity of Lubricants:** Indicate the total number of lubricants in pieces given or sold to the individual.

9. **Referral**: Tick the type of referral(s) made to an individual if any; Sexually Transmitted Infections (STI), HIV Testing and Services (HTS), Sexually and Gender Based Violence, TB and others l. Fill SCT 5 for every referral made

Section 3
Summaries

This section summarises the information in Section 2. It aggregates the daily activity information according to the type of contact (new / old), sex, type of approach, services provided, and referral. This classification and summary process requires careful and simultaneous attention to data in multiple columns for each row (or individual served).

Total New Contacts (by Approaches, Service Types, and Referrals)

1. Review the data simultaneously in three column categories – **Type (New), Sex, Approach –** in order to identify the number of individuals who were:

   - new contacts who are male served through the one-on-one approach. You will need to carefully review the ticks in each of these columns, for each individual, to determine the total number of individuals meeting these criteria. Enter this total into the appropriate cell for New Contacts, Male, and One-on-One.

   - new contacts who are male served through a small group approach. Enter this total into the cell for New Contacts, Male, and Group Approach.

   - new contacts who are female served through the one-on-one approach. Enter this total into the cell for New Contacts, Female, One-on-One.

   - new contacts who are female served through a small group approach.   Enter this total into the cell for New Contacts, Female, and <u>Small Group</u> Approach.

- Calculate "<u>Total New Contacts</u>" for each Approach by adding the data in the male and female rows.

2. Similarly review the data simultaneously in the **Type (New), Sex,** and **Services** columns to determine:

- the number of individuals, by sex, receiving each of the different <u>services</u>

- the quantity of individual <u>condoms distributed</u>, by type (male or female condoms) by sex

- the quantity of lubricant given or sold to individuals.

- <u>New Contact Services totals</u>. Add the data in the male and female rows for the relevant services columns.

3. Similarly review the data for **Type (New)** and the **Referral** columns to determine the number of:

- <u>new contacts</u> who are <u>male</u> and received each of the different <u>referral services</u>

- <u>new contacts</u> who are <u>female</u> and received each of the different <u>referral services</u>

- Also, enter the total for each of these combinations (new contact males by type of referral, new contact females by type of referral) into the relevant summary cells for "Total New Contacts" in Section 3.

  Calculate the <u>New Contact totals</u> for "Referrals" by adding the data in the male and female rows.

<u>Grand Total Contacts</u>, (by Approaches, Service Types, and Referrals)

4. **By Service Approach:** Using the data in the **Sex** and **Approach** columns in Section 2, tally the <u>total number</u> of male and female contacts who received <u>One-on-One</u> services and <u>Small Group</u> services.   Enter these numbers in the relevant "Grand Total" cells for each Approach, by sex.

5. **By Service Type:**   Similarly, using the data in the **Sex** and **Services** columns in Section 2, tally the <u>total number</u> of males and females who received <u>each of the different service types</u>. Enter these numbers in the relevant cells for "Grand Total" for each Service Type.

Note: *the "Quantity of Condoms" column will be the total numbers of condoms distributed.*

6. **By Referral Type:** Finally**,** using the data in SEX and REFERRAL columns in Section 2, tally the total number of males and females who were referred, by sex and type of referral. Enter these numbers in the relevant "Grand Total" rows for each referral type.

Number of Individuals Reached, by Age Group

7. **New Contacts**: Using the columns for Sex and Group in Section 2, aggregate the total number of New Contacts according to Age Groups and Sex, and transfer the totals into the relevant cells in Section 3 for age group and sex.

   Note: *The attached Tally Worksheet may help in this aggregation process*.

8. **All (Grand Total) Contacts:** Aggregate the total number of all Contacts (grand total) according to age groups (refer to Age and Sex columns under Section 2 for information), and transfer the totals into the relevant cells in Section 3 for each age group and sex.

   Note: *The attached Tally Worksheet may help in this aggregation process as well.*

Verification and Signatures

9. The Field Supervising Office must review and verify the data in Sections 1 and 2, and the summary totals in Section 3.
10. The SCT2 must be signed, with the date, by both the Peer Educator and the Supervising Officer.

TALLY WORKSHEET

Aggregating New Contacts and all Contacts Reached, by Sex and Age Group in SCT 2

Note:

1. Use this Worksheet below to tally the number of contacts (both new contacts and all contacts) by Sex and Age Group in SCT. For example:
   - Using the columns for New Contacts, Males, and Age Group below, review each row to determine whether all three columns are ticked.
   - Whenever a row is ticked in all three columns, add a “slash mark (/)” to the cell for New Contacts, Male, Age Group below 15.
2. Repeat the process for all Age Groups, for both Males and Females, for New Contacts.
3. Then repeat the entire process for all Contacts, by Sex and Age Group.
4. Transfer the total number of marks in the Worksheet cells to the corresponding cells in Section 3 of the SCT 2 form.

		AGE GROUPS							
		<15	**15-19**	**20-24**	**25-29**	**30-34**	**35-49**	**50+**	**Total**
New Contacts	**Male**								
	Female								
	Total								
All Contacts	**Male**								
	Female								
	Total								

National HIV Data Collection Tool

SCT 2: Peer Educators Daily Activity Sheet

Section 1: Background Information

Name of Organisation____

Region____________________________________ District_______________________________________

Year______________________ Month______________________

Name of Peer Educator____ Target Population_______________________ Microsite/Community____________________________________

Section 2: Daily Activities

Date	Name/UIC	Type		Sex		Age	Approach		Services									Referral				
		Old	New	M	F		One on one	Small group	Prevention info	HTS	STI	TB	SGBV	Stigma	CONDOMS		Lubricants	HTS	STI	SGBV	TB	Others
															Male	Female						

Section 3: Summaries

		Approach		Services									Referral				
		One on one	Small group	Prevention info	HTS	STI	TB	SGBV	Stigma	CONDOMS		Lubricant	HTS	STI	SGBV	TB	Other
										Male	Female						
Total New Reached	**M**																
	F																
	Total																
Grand Total (Reached)	**M**																
	F																
	Total																

Total New Contacts, by Age

	<15	15-19	20-24	25-29	30-34	35-49	50+	Total
M								
F								
Total								

Total Contacts, (Grand Total, Reached) by

	<15	15-19	20-24	25-29	30-34	35-49	50+	Total
M								
F								
Total								

Signature of Peer Educator___________________________ **Signature of supervising officer** ______________________

SCT 3: Attendance Register for Group Activities

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information	
Purpose	To capture data for an HIV group activity • number of persons attending • number of condoms sold/distributed during the activity • number lubricants sold/distributed during the activity • number of IEC materials distributed during the activity
Reporting Period	All SCT 3 forms will be aggregated and reported in its respective indicator in the PR1 or KP1 or WP1 at the end of a specified reporting period as specified.
Who uses this form	Field Supervisor or Coordinator
Who verifies data	Program Manager
When form is used	Whenever a large group activity or event takes place At the beginning and through to the end of the activity or event.
Performance Indicators using data from this form	<u>National Summary Reports</u> <u>KP 1</u> • Indicator 1 – Number of Key Populations (KP) and vulnerable groups reached with HIV prevention programs -defined package of HIV Services (Contacts) Type of audience – Large group discussion • Indicator 2 – Number of New Key Populations (KP) and vulnerable groups reached with HIV prevention programs - defined package of HIV Services Type of audience – Large group discussion - Indicator 3 – Number of Key Populations (KP) and vulnerable groups reached with stigma reduction activities Type of approach – Large group discussion • Indicator 5 – Number of condoms and lubricants distributed to KPs and Vulnerable Groups <u>PR 1</u> • Indicator 1 – Number of people reached with HIV prevention programs -defined package of HIV Services - Type of approach – Large group discussion • Indicator 2 – Number of people reached with stigma reduction activities - Large group discussion - In-school and out-of-school youth and Adults • Indicator 5 – Number of condoms and Lubricants distributed <u>WP 1</u> -

- Key population Indicator 1 – Number of people reached through work place programs
    - Large group activity

- Indicator 2 – Number of persons reached with stigma reduction activities
    - Large group discussion

- Indicator 4 – Number of condoms and Lubricants distributed

National M&E Plan

- Percentage/ Number of people reached with HIV prevention programs - defined package of HIV Services
- Number of people reached with stigma reduction activities
- Number of condoms and lubricants distributed (that reached the end user)

Instructions for Using This Form

Section 1 Background Information

1. Enter the general identifying information for the HIV group activity:

- Name of the Organization undertaking the HIV activity
- District within which the activity is being undertaken
- Purpose of the group activity or event. The purpose of the event will reflect the key messages that were the focus of the activity or event.
- Approach for the group activity (e.g., Durbar, Drama, Video Show)
- Target Population for group activity

  Note: *The target population refers to the specific group of persons reached through the activity or event. The target population may include in-school youth, out-of-school youth, general population (adults) Men having Sex with Men (MSM), Female Sex Workers (FSWs), or workers / employees in an organisation or business.*

- Message(s) of the group activity. The messages will relate to the Prevention of HIV or Stigma Reduction in the targeted audience.

  Note: Messages include: HIV Testing Services, Consistent and Correct Condom and Lubricants use, Stigma Reduction, AB (Abstinence and Being Faithful), Reduction of Risky Behaviour etc.

- Community or microsite within which the activity took place

- Date the activity took place

Section 2 Attendance Information

2. No. column: Serially number the rows

3. Name/UIC column: Provide the names or UIC of participants

4. Sex and Age columns: Tick (✓) the sex and specify the age of each participant in their respective columns

5. Telephone column: Indicate the telephone number of each participant

Section 3 Summary Information – age group and sex

This section summarises attendance information in Section 2 according to age group and sex.

6. Review the data simultaneously in the **Sex** and **Age** columns in order to identify the number of participants who were
   - male, by age group
   - female, by age group

7. Transfer the aggregated totals by sex and age group into the appropriate cells in the table in Section 3.

8. Add the figures for each age group in the Male and Female rows and enter the totals in the Total row.

Section 4 Summary

Information – condoms, IEC/BCC materials

9. **Condoms Distributed**: Enter the number of male and female condoms distributed and enter the figures in their respective columns.

10. **Lubricants Distributed**: Enter the number of lubricants distributed and enter the figures in their respective columns.

11. **IEC/BCC materials**: Enter the number of Information, Education and Communication (IEC) or HIV Prevention Programmes (BCC) materials that were distributed during the activity or event.

Verification and Signatures

12. The Field Supervisor must review and verify all sections of the SCT 3 form.

13. The SCT3 form must be signed and dated by the Field Supervisor.

National HIV Data Collection Tools

SCT 3 : Attendance Register (for group activities)

Section 1: Background Information

Name of Organization: ________________________________ District__________ ___________________

Purpose of Meeting___________________________________ Approach___________________________________

Messages____ Target Population__________________________

Community/Microsite__________________________________ Date______________________________________

Section 2: Participants

No.	Name/UIC	Sex M	Sex F	Age	Telephone

Section 3: Summary of Participants (from Section 2)

	10 - 14	15-19	20-24	25-29	30-34	35-49	50+	Total
M								0
F								0
Total	**0**	**0**	**0**	**0**	**0**	**0**	**0**	0

Section 4: Condoms Lubricants, Self-Test Kits & IEC Materials Distributed

Number of Condoms Distributed

Male Condom	Female Condom	Total
		0

Number of Lubricants Distributed

Number of IEC/BCC Materials Distributed

Signature of Field Project Officer____________________ **Signature of Supervising Officer________________**

SCT 4: Training Record Form

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	To capture information about training events • the target community • the focus (topics) of the training • when and where the training was organized
Reported period	Each day of a training event (e.g., class, workshop, other)
Who uses this form	Field Coordinator, Focal person, or Technical Support Unit staff
Who verifies data	Next supervisory level (e.g., Program Manager)
When form is completed	Before or during each day of training
Performance Indicators using data from this form	National Summary Reports - Number of senior managers/workers trained on stigma and discrimination in the workplace

Instructions for Using This Form

Section 1

1. Enter the general identifying information for the training event or activity:

   - Name of the organisation conducting the training
   - Date of the training
   - Region and District where the training is conducted
   - Venue, or specific facility, for conducting the training
   - Target population

     Note: *The target population refers to the specific group of persons that will benefit from this training. These target populations may include in-school-youth, out-of-school, general populations (adults) MSM, or FSWs, Workers (employees).*

   - Topics covered – list topics covered during the training. Add additional topics as needed (on back of form).

Section 2
Training Participants

2. Provide the following information for each individual attending the training, using a separate row for each individual:
    - sequential number designating training participants
    - name
    - sex
    - organisation
    - position
    - telephone number

3. Each individual shall provide his/her signature in the column at far right.

Signature

4. The SCT 4 Training Record Form must be signed and dated by - the Field Coordinator, Focal person, Technical support unit staff or designated officer

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SCT 4: Training Record Form

Section 1: Background Information

Name of Organization:____________________________ **Date:**________________

Region.................................... **District** .... **Venue**________________

Target Population:______________________________________

Topics Covered:
1. ______________________________________
2. ______________________________________
3. ______________________________________

Section 2: Training Participants

No.	Name	Sex		Designation (organization and position)	Telephone	Signature
		M	F			

Signature, supervising officer ______________________ **Date:** ____________

SCT 5: Two-way Referral Form

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	To facilitate the referral for services of an individual from one organisation to another
Reporting period	Period when the referral is made
Who uses this form	Peer Educator, Field Supervisor, or other Service Provider who is referring a client for services, and an Officer at the receiving organisation
Who verifies data	Field Supervisor / Coordinator
When form is used	The SCT 5 is used when a Peer Educator, or other service provider, determines that an individual or client should be referred for services from another organisation, and when the client is served by the receiving organisation.
Performance indicators using data from this form	As reported in National Summary Reports: • Number of individuals referred for other services - Prevention interventions (PR 1) - Key Populations (KP 1) - Workplace Prevention programs (WP1) - Orphans and Vulnerable Children (OVC1) - People Living with HIV (PLHIV) - Clients receiving Home Based Care (HBC1)

Instructions for Using This Form

REFERRING ORGANISATION Sections

Section 1
(Completed by Organisation Making the Referral)

Basic client information: Enter basic identifying information about the individual who is being referred for service: name/UIC, age, sex, address, date of the referral

1. **Name of referring organisation:** Enter the name of the organisation making the referral.

2. **Name of the organisation client is referred to**: Enter the name of the organisation that will provide other / additional services to the individual.

3. **Services.** Tick (✓) the services that the individual is being referred to receive at the other organisation. Indicate "other" services, as appropriate.

4. **Name and signatures of referring person:** Indicate the name of the individual making the referral, and sign the form.

5. **Title / Position:** Indicate the title or position of the individual making the referral.

Section 2
(Completed by Organisation Making the Referral)

6. **Copy** the information from Section 1 into Section 2.

7. **Detach** along the dotted lines after Section 1. Give Sections 2 and 3 to the individual being referred.

RECEIVING ORGANISATION SECTIONS

Section 3

(Completed by Organisation Receiving the Referral)

1. **Receiving Organisation's Information:** Enter the name, phone number, and address of your organisation.

2. **Services Provided:** Indicate the services provided in the appropriate rows and cells of the table. For each service, indicate:
   - the name / type of service provided
   - whether the services were completed as requested (yes / no)
   - whether follow-up is needed (yes/no)
   - date, if follow-up is needed; otherwise indicate "N/A"

3. **Comments:** Provide additional comments, as needed, regarding the services provided and / or any required follow-up.

4. **Name and signatures of service provider:** Indicate the name of the individual providing the service(s), and sign the form.

5. **Title / Position:** Indicate the title or position of the individual providing the service(s).

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SCT 5: Two-Way Referral Form

Part 1: To be Retained by Referring Organization

Section 1: To be filled out by the organization or person making the referral (Referring Organization)

Client's name/UIC: ………………………………………………………………………. Age: …………….. Sex: ……………..

Address: ………………………………………………………………………… Date:…………………………………..

Referring Organization: ………………………………………… Referred To: ………………………………………..

1. ART	( )	9. Medical Screening	( )	17. Skills Training	( )
2. STI Treatment	( )	10. Welfare Assistance/LEAP	( )	18. Micro Credit Scheme	( )
3. HTS	( )	11. Faith Based Support	( )	19. Income Generating Activities	( )
4. PEP	( )	12. Psycho Social Support	( )	20. Legal Services	( )
5. PMTCT Services	( )	13. PLHIV Support Group	( )	21. Cervical Cancer screening	( )
6 TB	( )	14. Peer Counseling	( )	22. HBV screening	( )
7. SRH/FP	( )	15. NHIS	( )	23. HCV screening	( )
8. PrEP	( )	16. Nutrition Support	( )	24. Other (Specify)……….	( )

Name & Signature of Person Referring: ……………………………………………………… Title/Position: ……………………….

……

Please detach along this lines

SCT 5: Two-Way Referral Form

Section 2: To be filled out by the organization or person making the referral (Referring Organization)

Client's name/UIC: ………………………………………………………………… Age: ……………. Sex: ………………

Address: ………………………………………………………………………… Date:…………………………………..

Referring Organization: ………………………………………… Referred To: ………………………………………..

1. ART	( )	9. Medical Screening	( )	17. Skills Training	( )
2. STI Treatment	( )	10. Welfare Assistance/LEAP	( )	18. Micro Credit Scheme	( )
3. HTS	( )	11. Faith Based Support	( )	19. Income Generating Activities	( )
4. PEP	( )	12. Psycho Social Support	( )	20. Legal Services	( )
5. PMTCT Services	( )	13. PLHIV Support Group	( )	21. Cervical Cancer screening	( )
6 TB	( )	14. Peer Counseling	( )	22. HBV screening	( )
7. SRH/FP	( )	15. NHIS	( )	23. HCV screening	( )
8. PrEP	( )	16. Nutrition Support	( )	24. Other (Specify)……….	( )

Name & Signature of Person Referring: ……………………………………………… Title/Position: ………………………….

Section 3: To be filled out by the organization receiving the referral (Receiving Organization)

Name of Receiving Organization: ……………………………………………… Phone Number: ……………………………

Address: ………

List of Services Provided	Services Completed as Requested Y/N	Follow Up Needed Y/N	Follow Up Date

Additional Comments:

Name & Signature of service provider: ……………………………………………… Title/Position: ……………………….

SCT 6: Commodity Stock Management Sheet

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	To track commodities (condoms, lubricants, HIV test kits, IEC materials, etc.) received and issued by Implementing partner organisations
Reporting Period	Monthly
Who uses this form	Field Supervisor
Who verifies data	Field Supervisor/Field Coordinator
When form is used	The SCT 6 is updated whenever a commodity is received or issued.
Performance indicators using data from this form	National Summary Reports • Number of condoms and lubricants distributed to general population and KPs • Prevention interventions (PR 1) • Key Population (KP 1) • Orphans and vulnerable children (OVC1) • People living with HIV (PLHIV) • Clients receiving home-based care (HBC1) • Workplace prevention programs (WP1) Number of HTS self-test kits distributed - Prevention intervention - Key Population (KP 1) National M&E Plan • Number of condoms and lubricants distributed to general population and KPs • Number of HTS self-test kits distributed

Instructions for Using This Form

Section 1 Background Information

Enter the general identifying information for the organisation managing commodity stocks:

- Name of the organisation that is managing the commodities
- Region and District where commodities are managed
- Type of commodity being tracked on the SCT 6 form (e.g., male or female condoms, lubricants, HIV test kits and IEC materials).

  Note: *If more than one commodity is being tracked or managed, a separate SCT 6 form should be maintained for each commodity.*

Section 2
Commodity Information

1. **Date:** Enter **the** date when the organisation either receives or supplies /issues commodity stock.

2. **Quantity:** Enter the quantity of commodities that have been received or issued in the respective columns.

3. **Quantity Balance:** calculate the balance using the previous balance amount and adding the quantity of stock received, or subtracting the quantity of stock issued. Enter the new balance for this date's entry.

4. **Received from / Issued by:**
   - For receiving**,** specify t**h**e name of the organisation that is the source for the received commodities (i.e., the issuer of the stock).
   - For Issuing, specify the name of the officer (in your organisation) who issued out the commodity.

5. **Issued to:** Specify the name of the organisation or person receiving the stock (i.e., to whom the commodities are issued).

6. **Signatures:** The individuals who are receiving or issuing the commodities must sign in the respective columns.

National HIV Data Collection Tool

SCT 6: Commodity Stock Management Sheet

Section 1: Background Information

Name of Organization____

Region______________________________________ District____________________________________

Type of commodity____

Section 2: Commodity Information

No.	Date	Quantity		Quantity Balance	Received from / Issued by:	Issued to:	Signatures	
		Received	Distributed				Issuer	Reciever
1								
2								
3								
4								
5								
6								
7								
8								

Prepared By: ____________________ **Signature:** ____________________ **Date:** ____________

Signature of supervisor: _______________________ **Date:** _____________

SCT 6a: Condom Vending Machine (CVM) Management Sheet

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	To track number of condoms stocked into and distributed through CVM
Reporting Period	Monthly
Who uses this form	CVM Manager
Who verifies data	Field Supervisor/Field Coordinator
When form is used	The SCT 6a is updated whenever a CVM is filled with condoms.
Performance indicators using data from this form	National Summary Reports • Number of condoms and lubricants distributed to general population and KPs • Prevention interventions (PR 1) • Key Population (KP 1) • People living with HIV (PLHIV) • Workplace prevention programs (WP1) National M&E Plan • Number of condoms and lubricants distributed to general population and KPs

Instructions for Using This Form

Section 1
Background Information

1. Enter the general identifying information for the organisation managing the CVM:

- Name of the organisation that is managing the CVM
- Region and District where CVM are installed
- Year and month in which the CVM was stocked with condoms

Section 2
Commodity Information

2. **Date:** Enter **the** date when the CVM was stocked with condoms
3. **Quantity filled:** Enter the quantity of condoms stocked into the CVM at each period of refill
4. **Quantity distributed:** Enter the quantity of condoms distributed (purchased) through the CVM
5. **Quantity Balance:** Calculate the balance by subtracting the quantity distributed (purchased through the CVM) from the quantity stocked into the machine from the previous refill.
6. **Filled by:** Enter the name of the person who stocked the CVM with condoms

7. **Signature:** CVM manager must append signature for each transaction

8. Prepared by:
   - Enter the name of the person who prepared the CVM management sheet
   - Signature of the person who filled the sheet
   - Date: the day the sheet was prepared

9. Signature of Supervisor: signature of the person who verified the data on the form
10. Date: The day the supervisor signed the sheet

National HIV Data Collection Tool

SCT 6a: CVM Management Sheet

Section 1: Background Information

Name of Organization____

Region______________________________________ District____________________________________

Month:______________ Year:__________

Section 2: Commodity Information

No.	Date	Quantity filled	Quantity distributed	Balance	Filled by	Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						

Prepared By: ____________________**Signature:** ____________________ **Date:** ____________

Signature of supervisor: _______________________ **Date:** _____________

SCT 7: Commodity Stock Management Summary Sheet

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	To summarise the distribution of commodities – male and female condoms, lubricants, IEC materials, etc. – in an Implementing Partner organisation for a reporting period
Reporting Period	Monthly/ Quarterly
Who uses this form	Field Supervisor /Coordinator
Who verifies data	Field Coordinator
When form is used	The SCT 7 is completed at the end of the month and reported quarterly/monthly.
Performance indicators using data from his form	National Summary Reports • Number of condoms and lubricants distributed to general population and Key Population (KP) - Prevention interventions (PR 1) - Key Population (KP 1) - Orphans and vulnerable children (OVC1) - People living with HIV (PLHIV) - Clients receiving home-based care (HBC1) - Workplace prevention programs (WP1) National M&E Plan • Number of condoms and lubricants distributed to general population and Key Populations

Instructions for Using This Form

Section 1
Background Information

1. Enter the general identifying information for the organisation managing commodity stocks:

- Name of the organisation managing the commodities
- Region and District where commodities are managed
- Reporting period ("from" date," to" date).
  - When used for monthly reporting, the "from" and "to" dates will coincide with the first and last dates of the reporting month (i.e., 1st January -31st January)
  - When used for quarterly reporting, the "from" and "to" dates will coincide with the quarterly reporting period (i.e., January-March, April-June, July-September, October-December

- Type of commodity being aggregated and summarised on the SCT 7 form.

Section 2
Summary of Commodity Distribution Data

i. For example (condoms)

2. **Distribution by Peer Educators:** Using aggregated data from relevant SCT 2 forms for all Peer Educators, enter the number of condoms distributed, by type of recipient (distributed to male/female) and by month.

3. **Distribution through Outreach Group Activities:** Using data from relevant SCT 3 forms for all Field Supervisors or Coordinators enter the number of condoms distributed, by type of recipient (distributed to male/female) and by month

4. **Distribution by organisation directly**: Using data from internal organisational records, enter number of condoms distributed directly (e.g., through direct sales in the office, or through distribution in public washrooms). Enter number of condoms directly distributed, by type of recipient (distributed to male/female) and by month.

5. **Distribution through Vending Machine**: Using data from **SCT 6a** for condoms (male) distributed through vending machines, enter number of condoms directly distributed into the 'total' cell for the respective month.

6. **Other:** Enter number of condoms distributed through other means (i.e. distribution through Drop-in-Centre), type of sex (distributed to male/female) and by month.

ii. For example (Lubricants)

7. **Distribution by Peer Educators:** Using aggregated data from relevant SCT 2 forms for all Peer Educators, enter the number of lubricants distributed by month into the 'total' cell.

8. **Distribution through Outreach Group Activities:** Using data from relevant SCT 3 forms for all Field Supervisors or Coordinators enter the number of lubricants distributed by month into the 'total' cell.

9. **Distribution by organisation directly**: Using data from internal organisational records, enter number of lubricants distributed directly (e.g., through direct sales in the office, or through distribution in public washrooms). Enter number of lubricants directly distributed by month into the 'total' cell.
10. **Other:** Enter number of lubricants distributed through other means (i.e. distribution through Drop-in-Centre), by month into the 'total' cell.
11. **Enter** the total number of commodity distributed for the reporting period

Signature

12. **Signature:** The individual responsible for verifying the data and signing the form shall sign the form at the bottom and indicate the date.

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SCT 7: Commodity Stock Management Summary Sheet

Section 1: Background Information

Name of Organization: ____

Region: ________________________________ District: ____________________________

Reporting Period: From _____________________ To ___________________

Type of commodity____

Section 2: Summary of Commodity Distribution Data

Month -->	Type	Month 1 (…………..)	Month 2 (…………..)	Month 3 (…………..)	Total
(1) Distribution by Peer Educators	Female				
	Male				
	Total				
(2) Distrbution through outreach/group Activities	Female				
	Male				
	Total				
(3) Distribution by organization directly (E.g direct sales in the office, putting in the washrooms etc	Female				
	Male				
	Total				
(4) Distribution through Vending Machine (VM)	Total				
(5) Other (Specify e,g DIC,…………………………… ………………………………… ……………………..)	Female				
	Male				
	Total				
Total	Female				
	Male				
	Total				

Section 3: Other

Comments and Remarks

Prepared By: __________________**Signature:** __________________ **Date:** ____________

Signature of supervisor: ______________________ **Date:** _____________

SCT 8: Gender Based Violence Care Form

Thematic Area:	Prevention of New Infections Mitigation of Social & Economic Impact of HIV and AIDS
Intervention Area:	Services to Orphans and Vulnerable Children (OVC), General Population, Key Population (KP) and vulnerable groups

General Information

Purpose	To record number of GBV cases reported and type of care provided to Key Populations, General Population and other priority populations receiving post-GBV care (clinical care) based on the minimum package
Reporting period	The SCT8 is updated on daily basis as and when post-GBV care is provided. The tool is aggregated on monthly/quarterly basis (as appropriate) and transferred into the appropriate indicator summary sheet.
Who uses this form	Service Provider
Who verifies data	Program Manager
When form is used	On a daily basis as and when post-GBV care is provided
Performance Indicators using data from this form	National Summary Reports: • Number of people receiving post-GBV care (clinical care) based on the minimum package National M&E Plan • Number of people receiving post gender based violence care

Instructions for Using This Form

Section 1 Background Information

1. Enter background information describing the following;
   - Name of organisation
   - Name of Service Provider
   - Region and district that the Service Provider undertakes his/her activities
   - Year and month of reporting
   - Location of service delivery point

Section 2 Daily

2. Complete each row to describe the services provided to an individual on the day the GBV care is given.

Activities

3. **Date**: Specify the date when an individual was provided post-GBV care. Individuals served on the same day should be entered on separate rows with the same date.

4. **Name/UIC**: Indicate the name or UIC of the individual receiving the care

5. **Sex and Age**: Specify the age and tick (✓) the sex of the individuals receiving post-SGBV care.

6. **Target Population**: Tick (✓) the target population receiving post-GBV care on a particular day. The target population includes; FSW, MSM, PLHIV, OVC, Prisoners, PWID and General Population.

7. **Type of GBV:** Indicate the type of GBV being reported to the service provider. Specify whether the type of GBV is sexual, emotional or physical.

8. **Type of Care Provided:** Specify the type of care provided to an individual receiving GBV care. The services may include; clinical care services, rapid HIV test, PEP, STI Screening, Emergency Contraceptive and Counselling.

9. **Referral:** Tick the type of referral(s) made to an individual if any; Legal Services (this include referral to DOVSU, CHRAJ, FIDA, HRAC etc.), further medical care or any other service.

10. Provide the summary of the type of GBV reported and the type of services provided by target population and sex in section 3.

11. Also provide the summary of the number of people provided with Post GBV care by age and sex

12. **Signatures:** The SCT 8 must be signed by the Service Provider and the Supervising Officer after completing the tool.

National HIV Data Collection Tool

Post Gender Based Violence Care

Section 1: Background Information

Name of Organisation____

Region______________________________ District_____________________________________

Year__________________ Month__________________

Name of Service Provider________________________________ Location________________________________

Section 2: Daily Activities

Date	Name/UIC	Sex		Age	Target Population							Type of GBV			Type of Care Provided						Referral		
		M	F		Gen Pop	PLHIV	OVC	FSW	MSM	PWID	Prisoners	Sexual	Emotional/Psychosocial	Physical	Clinical Care Services	Rapid HIV Test	PEP	STI Screening	Emergency Contraceptives	Counseling	Clinical Care	Legal Services	Other

Section 3: Summaries

			Type of GBV			Type of Care Provided						Referral
			Sexual	Emotional/Psychosocial	Physical	Clinical Care Servic	Rapid HIV Test	PEP	STI Screening	Emergency Contraceptives	Counseling	Legal Services
Total clients by Population type, GBV and Care	OVC	M										
		F										
	FSW											
	MSM											
	PWID	M										
		F										
	Prisoners	M										
		F										
	PLHIV	M										
		F										
	General Pop.	M										
		F										
	Total	0	0	0	0	0	0	0	0	0	0	0

Total Contacts, (Grand Total) by Age	10-14	15-19	20-24	25-29	30-34	35-49	50+	Total
M								
F								
Total	0	0	0	0	0	0	0	0

Signature of Service Provider_______________________ **Signature of Supervising officer** ___________________________

SCT 9: Health Facility Clinical Care Register

Thematic Area:	HIV Treatment, Care and Support
Intervention Area:	Services to People Living with HIV (PLHIV) through Support Groups, DIC and Home Based Care (HBC)

General Information

Purpose	To record the type and number of Key Populations and other vulnerable populations receiving clinical care services at the health facility. It will also record Lost To Follow Up (LTFU), defaulters and clients' dead on ART. SCT9a is for registering the KP while SCT 9b tracks the service provided and SCT9c provide the summary of the services.
Reporting period	The SCT 9a is updated on daily basis as and when clinical services are provided to newly diagnosed HIV positive KP. The SCT 9b is also updated on daily basis as and when clinical services are provided to positive KP. The tools are aggregated on monthly basis into SCT9c and transferred into the KP indicator summary sheet for the appropriate reporting period.
Who uses this form	Service Provider
Who verifies data	Monitoring and Evaluation Officer
When form is used	On a daily basis as and when clinical services is provided
Performance Indicators using data from this form	National Summary Reports: • Number of KP and vulnerable groups on treatment National M&E Plan • Number of people newly initiated on ART

Instructions for Using This Form

Section 1 Background Information

1. Enter background information describing the following;
   - Name of health facility
   - Name of organisation
   - Name of Service Provider
   - Region and district that the Service Provider undertakes his/her activities
   - Year and month of reporting
   - Location of service delivery point

Section 2.1

2. Complete each row to describe the services provided to an

Weekly Activities

individual on a weekly basis.

3. **Date**: Specify the date when an individual was provided clinical service. Individuals served on the same day should be entered on separate rows with the same date.
4. **Client UIC**: Indicate the UIC of the individual receiving the service
5. **Folder Number***:* Indicate the patient folder number
6. **KP Type:** Indicate the target population which includes; FSW, MSM, Prisoners, PWID and Non-PP
7. **Age**: Specify the age of the individual.
8. **HIV + Test date**: Indicate the individual HIV+ confirmation date
9. **TB Screening**: Indicate whether individual has received this service and the result
10. **Date completed Lab investigations**: specify the date individual completed all lab investigations indicated by the facility
11. **Initial Viral Load Results**: Indicate the test results before individual begun ART treatment
12. **Date completed Pre-Adherence Counselling**: Specify the date individual completed counselling
13. **Client initiated on ART(Date)**: Specify the date individual begun ART
14. **Client transfer date:** Specify the date client obtained transfer to continue treatment
15. **Signature:** The SCT 9 must be signed by the Service Provider when the register is complete
16. **Telephone number:** The Service Provider must provide his/her contact number

Section b (SCT9b) Daily Activities

1. Complete each row to describe the services provided to an individual on the day clinic visit.

2. **Date**: Specify the date when an individual was provided clinical service. Individuals served on the same day should be entered on separate rows with the same date.

3. **Client UIC**: Indicate the UIC of the individual receiving the service

4. **Lab Services (G6PD, LFT, FBC, Other):** List the type of lab service received

5. **ART Adherence Counselling:** Indicate if 1st, 2nd or 3rd counselling or follow-up counselling provided

6. **Viral Load < 1,000copies/ml. Results**: Specify the results of the viral load test.

7. **Viral Load reviewed:** Indicate Yes/No if results have been reviewed by Medical Doctor or In-charge

8. **Client Next Appointment Date**: Indicate the date individual is due for next clinic visit

9. **Comments:** Provide additional information to help retain individual on treatment.

10. **Signature:** The SCT 9b must be signed by the Service Provider at the end of every month

11. **Telephone number:** The Service Provider must provide his/her contact number

SCT 10: NHIS Enrolment form

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose

To capture data for NHIS enrolment
- KPs enrolled on NHIS, by KP type

Reporting Period

All SCT 10 forms will be aggregated and reported in its respective indicator in the KP1 at the end of a specified reporting period as specified for the KP1.

Who uses this form

Health Worker/Staff

Who verifies data

Program Manager

When form is used

Whenever a client is registered on NHIS
At the beginning and through to the end of the reporting period (year).

Performance Indicators using data from this form

National Summary Reports

KP 1

- Number of KPs and vulnerable groups enrolled on NHIS

National M&E Plan

- Number of KPs and vulnerable groups enrolled on NHIS

Instructions for Using This Form

Section 1 Background Information

1. Enter the general identifying information for the activity:

- Name of the Organization/facility registering clients
- Region and District within which the client is registered

Note: *The target population refers to the specific group of persons registered on NHIS. The target population may include Men having Sex with Men (MSM), Female Sex Workers (FSWs), OVC and PLHIV.*

- Year and Month the activity took place

Section 2 Client Details

2. No. column: Serially number the rows

3. Name/UIC column: Provide the names or UIC of client

4. NHIS Registration Number: provide NHIS registration number of client

5. Status of Registration: Indicate whether client registration is new or renewal

6. Target Population: fill in the type of target population being registered

7. Sex and Age columns: Tick (✓) the sex and specify the age of each client in their respective columns

8. Telephone column: Indicate the telephone number of each client

Section 3 Summaries

This section summarises client registration in Section 2 according to registration status and by type of KP

9. Review the data simultaneously in the **type of KP and registration status** columns in order to identify the number of clients whether
   - Newly registered, by KP type
   - Renewed registration, by KP type

10. Transfer the aggregated totals by type of KP and registration status into the appropriate cells in the table in Section 3.

Verification and Signatures

11. The Field Supervisor must review and verify all sections of the SCT 10 form.

12. The SCT 10 form must be signed and dated by the Field Supervisor.

National HIV Data Collection Tools

SCT 10: NHIS Enrollment form

Section 1: Background Information

Name of Organization/Facility:____ **Month**____________

Region……………………………. **District** ……………………………… **Year**_______

Section 2: Client Details

No.	Date	Name/UIC	NHIS Reg. Number	Status of Reg (New/Renewal)	Target Population	Sex		Telephone
						M	F	

Section 3: Summaries

	FSW	MSM	PWID	Prisoners (M)	Prisoners (M)	Non-PP	OVC	PLHIV	Total
New Reg									
Renewal									
Total									

Signature, supervising officer ____________________________________ **Date:** ________________

PR 1: Prevention Indicator Summary Report

Thematic Area:	Prevention of New Infections
Intervention Area:	General Populations (Adults) In-School and Out-of-School Youth

General Information

Purpose

To summarise prevention services provided to in-school youth, out-of-school youth, and general population (adults).

Reporting Period

Monthly / Quarterly (District and Regional levels)
Quarterly (National level)

Who completes

Program Officers for the Implementing Partner organisation (district, regional, and national levels)

Who verifies data

Next supervisory officer in each organisation

Performance indicators using data from this form

Prevention Indicator Summary Report (this report)

- Number of people reached with HIV prevention programs -defined package of HIV Services
- Number of people reached with stigma reduction activities
- Number of individuals who received HIV Testing Services and know their test results
- Number of condoms and Lubricants distributed
- Number of individuals referred for other services
- Number of HTS self-test kits distributed
- Number of people receiving post- sexual gender based violence (SGBV) care based on the minimum package

National M&E Plan

- All the above performance indicators are linked to the National M&E Plan

Instructions for Using This Form

Section A Background Information

1. Enter the name of the organisation preparing this report.
2. Identify the Region and District where services have been provided.
3. Enter the reporting period ("from" date, "to" date).
   - When used for monthly reporting, the "from" and "to" dates will coincide with the first and last dates of the reporting month
   - When used for quarterly reporting, the "from" and "to" dates will coincide with the quarterly reporting period (i.e., January-March,

April-June, July-September, October-December)

4. Indicate the date of submission.

Section B
List of Indicators

Use the following forms to complete the PR 1:

- SCT 2 for one-on-one and small group activities
- SCT 3 for large group activities
- HTS 1 for HIV testing services
- SCT 7 for number of condoms and lubricants distributed
- SCT 5 for referrals
- SCT 8 for Post GBV care
- HTS 3 Self-Test Kits distributed

1. Number of people reached with HIV prevention programs -defined package of HIV Services

Use all completed SCT 2 and SCT 3 for the reporting period as source documents for the following;

1.1. By type of approach.

- One-on-one and Small Group approaches: Using all the **SCT 2** forms, aggregate the "Grand Total" data in Section 3 (Summaries) for service approach and sex. Transfer these totals into Indicator 1.1 of the PR 1 to report the "grand total" of people reached, in the columns for "One-On-One" and "Small Group" by sex.
- Large Group Activities. Using data from all **SCT 3** (Attendance Registers), aggregate the data in Section 3, "Summary of Participants", by sex. Transfer totals of all contacts, by sex, to the "Large Group Activities" column in Indicator 1.1.
- Other (specify): using data from all STC3 (attendance Register), aggregate the data in Section 3, "Summaries of Participants", by sex. Transfer totals of all contacts, by sex, to the "Other (specify) column in Indicator 1.1. *Other (specify)*- all other approaches use in reaching target population such as film shows, drama on HIV prevention programs –defined package of services.

1.2. By target audience/population. Using both the SCT 2 (One-on-one and Small Group) and the SCT 3 (Large Group) forms, tally the total number of individuals in each target group category (in-school- youth – young people between ages of 10-24 reached with defined package of services and are students; out-of-school youth –young people between the ages of 10-24 reached with defined package of services and are NOT students; and Adults –people of 25 years and above reached with defined package of services) , according to sex. Enter the aggregated totals into Indicator 1.2.

2. **<u>Number of people reached with stigma reduction activities</u>**

   2.1. **By Type of Approach.** Using the relevant SCT 3 forms (where message is about stigma and discrimination) tally the number of people reached with stigma reduction activities.

   Aggregate totals by sex and by approach (drama, video show, group discussion, S&D training). Enter into the respective columns for Indicator 2.1.

   2.2. By Target Population.

   - Using the relevant SCT 3 forms, aggregate the number of people reached by sex and for each target population (refer to 1.2)
   - Enter the aggregate totals, by target population and sex, into Indicator 2.2

3. **<u>Number of individuals who received HIV Testing Services and know their test results</u>**

   3.1. All by age group and sex

   - Use all the HTS 1 reports for the reporting period, for this indicator.
   - Aggregate the data for the age groups by sex, from the rows for "Number Receiving Post-test Counselling".
   - Enter the totals of the aggregated data into Indicator 3.1 for "All" who received HIV testing Services.

   3.2. Positive Test Results by age group and sex

   - Use all the HCT 1 reports for the reporting period, for this indicator.
   - Aggregate the data for the age groups by sex, from the rows for "Number Receiving Positive Test Results".
   - Enter the totals of the aggregated data into Indicator 3.2 for number receiving positive test results.

4. **<u>Number of individuals referred for other services</u>**

   4.1. By type of services referred

   - Use all the SCT 5 forms for the reporting period, for this indicator.
   - Aggregate the total number of referrals by sex, for the HTS, STI, PEP, SGBV and other referrals documented on the STC 5 forms
   - Transfer the aggregate referral totals by sex, to Indicator 4.1.

   4.2. By type of services received

- Use all the SCT 5 forms (section 2), SCT 8 for the reporting period, for this indicator.
- Aggregate the total number of referrals by sex, for the HTS, STI, PEP, SGBV and other referrals documented on the STC 5 (section 2) and SCT 8forms
- Transfer the aggregate referral services received totals by sex, to Indicator 4.2.

5. <u>Number of condoms and lubricants distributed</u>

5.1. By type of condoms

- Use all SCT 7 (Commodity Stock Management Summary Sheets) for the reporting period for this indicator.
- Aggregate the total number of male and female condoms distributed from SCT 7 report.

  Monthly report: transfer totals from the relevant month on the SCT 7 report

  Quarterly report: transfer totals for all three months on the SCT 7 report
- Enter the total number of condoms**,** by type of condom, into Indicator 5.1

5.2. Lubricants

- Use all SCT 7 (Commodity Stock Management Summary Sheets) for the reporting period for this indicator.
- Aggregate the total number of lubricants distributed from SCT 7 report.

  Monthly report: transfer totals from the relevant month on the SCT 7 report

  Quarterly report: transfer totals for all three months on the SCT 7 report
- Enter the total number of lubricants, into Indicator 5.2

6. Number of HTS self-test kits distributed

6.1. By Mode of testing

- Use all the HTS 3 reports for the reporting period, for this indicator.
- Aggregate the data from HTS 3 section 3.2 ‘type of testing’, “assisted and “not assisted” as defined in the standard operating procedures for self-testing.
- Enter the totals of the aggregated data into Indicator 6.2 for “by

mode of testing (sex and mode).

6.2. By results

- Use all the HTS 3 reports for the reporting period, for this indicator.
- Aggregate the data for the age groups by test results, from the rows of section 3.4 “negative & positive”.
- Enter the totals of the aggregated data into Indicator 6.2 for “by results” (age and results).

7. Number of people receiving post-gender based violence (GBV) care based on the minimum package

7.1. By type of SGBV

- Use all the SCT 8 reports for the reporting period, for this indicator.
- Aggregate the data for target population, sex and type of SGBV
- Transfer the totals of the aggregated data into Indicator 7.1 for type of SGBV reported.

Note: there is no sex disaggregation for KPs on SCT 8.

7.2. By type of care provided

- Use all the SCT 8 reports for the reporting period, for this indicator.
- Aggregate the data for target population, sex and type of post SGBV care provided to clients.
- Transfer the totals of the aggregated data into Indicator 7.2 for type of post SGBV care (clinical care) provided.

Section C Submissions

1. **Prepared By:** Indicate the name of the person preparing the PR1.
2. **Signatures:** Provide signature.

National HIV Data Collection Tool

PR1: Prevention Indicator Summary Report

Section A: Background Information

Name of Organization: ____

Region___________________________ District____________________________________

Reporting Period, From: _________ To: _________ Date of submission: _________________________

Section B: List of indicators

Indicator	Achieved

1. Number of people reached with HIV prevention programs -defined package of HIV Services (C2)

1.1) By Type of Approach (*An individual can be in more than one area)**

	One-to-one	Small Group discussion	Large Group discussion	Other (Specify>..............)
M				
F				
Total	0	0	0	0.00

1.2) By Target Audience /population

	In school Youths	School Youth	Adults	Total
M				0
F				0
Total	0	0	0	0

2. Number of people reached with stigma reduction activities (C3)

2.1) By Type of Approach (*An individual can be in more than one area)**

	Drama	Video Show	Group discussion	Traning on S&D	Total
M					0
F					0
Total	0	0	0	0	0

2.2) By Target Audience /population

	Inschool Youths	Out of School	Adults	Total
M				0
F				0
Total	0	0	0	0

2.3 by Age

	0-14	**15-19**	**20-24**	**25+**	**Total**
M					0
F					0
Total	0	0	0	0	0

3. Number of individuals who received HIV testing Services (HTS) and know their test results (C1)

3.1 By All People — All

	0-14	**15-19**	**20-24**	**25+**	**Total**
M					0
F					0
Total	0	0	0	0	0

3.2 By Positve Results — Positive

	0-14	**15-19**	**20-24**	**25+**	**Total**
M					0
F					0
Total	0	0	0	0	0

4. Number of individuals referred for other services and received

4.1) By Type of Services (*An individual can be referred for services in more than one area)**

	HTS	TB	STI	PEP	SGBV	Other
M						
F						
Total	0	0	0	0	0	0

4.2) Received the services

	HTS	TB	STI	PEP	SGBV	Other
M						
F						
Total	0	0	0	0	0	0

5. Number of condoms and Lubricants distributed. (C5)

5.1) By Type of condom

Male Condom	**Female Condom**	**Total**	Lubricants
		0	

6. Number of HTS self-test kits distributed (C6)

6.1 By mode of testing

	Assisted	Not Assisted	Total
M			0
F			0
Total	0	0	0

6.2 By results

	16-19	**20-24**	**25+**	**Total**
Negative				**0**
Positive				**0**
Total	0	0	0	0

7. Number of people receiving post-SGBV care (clinical care) based on the minimum package (C27)

7.1 By type of GBV

	Sexual	Physical	Emotional	**Total**
M				0
F				0
Total	**0**	**0**	**0**	0

7.2 Type of Care Provided

	Clinical Care Services	Rapid HIV Test	PEP	STI Screening	Emergency Contraceptive	Counseling	Total
M							0
F							0
Total	**0**	**0**	**0**	**0**	**0**	**0**	0

Prepared by: ______________________________ **Signature:** ______________________________

KP 1: KP Indicator Summary Report

Thematic Area: Prevention of New HIV Infections
Intervention Area: Key Populations

General Information	
Purpose	To summarize HIV prevention services provided to Key Populations (KPs)
Reporting Period	Monthly / Quarterly (District and Regional levels) Quarterly (National level)
Who completes	Program Officers for the Implementing Partner organisation (district, regional, and national levels)
Who verifies data	Next supervisory officer in each organisation
Performance indicators using data from this form	<u>KP Indicator Summary Report (this report)</u> • Number of Key Population/Vulnerable groups reached with HIV prevention programmes-defined package of HIV services(Contact) • Number of New Key Populations/Vulnerable groups reached with HIV prevention programmes-defined package of HIV services • Number of New Key Populations/Vulnerable groups reached with stigma and discrimination messages • Number of Key Populations who received HIV Testing Services and know their test results • Number of condoms and lubricants distributed to Key Populations and vulnerable groups • Number of Key Populations/vulnerable groups referred for services • Number of KPs and vulnerable groups on treatment • Number of Key Populations/vulnerable groups enrolled on NHIS • Number of Key Populations/vulnerable groups receiving post-SGBV care (clinical care) based on the minimum package • Number of self-test kit distributed to Key Populations/vulnerable groups • Number of Key Populations/vulnerable groups receiving pre exposure prophylaxis (PrEP) <u>National M&E Plan</u> • Number of Key Populations who received HIV tests and who know their results • Number of Key Populations reached with HIV prevention programmes -defined package of HIV services

Instructions for Using This Tool

Section A
Background Information

1. Enter the name of the organization preparing this report.
2. Indicate the Region and District where services have been provided.
3. Enter the reporting period (“from” date, “to” date).
   - When used for monthly reporting, the “from” and “to” dates will coincide with the first and last dates of the reporting month
   - When used for quarterly reporting, the “from” and “to” dates will coincide with the quarterly reporting period (i.e., January-March, April-June, July-September, October-December)
4. Indicate the date of submission.

Section B
Indicator Results

Use the following Tools for prevention activities with the target groups for Key Populations:

- **i.** SCT 2 for one-on-one and small group activities
- **ii.** SCT 3 for large group activities
- **iii.** HTS 1 for HIV testing Services
- **iv.** HTS 3 for Self-test kits
- v. SCT 7 for number of condoms and lubricant distributed
- vi. SCT 5 for referrals
- vii. SCT 8 for post SGBV care

1. Number of Key Populations/Vulnerable groups reached with HIV prevention programmes-defined package of HIV services (Contact)

1.1 All Key Populations, by type and sex.

- i. Group all the SCT 2 (One-on-one and Small Group) and the SCT 3 (Large Group) forms according to the KP categories
- ii. Aggregate the total number of individuals in each KP category, according to KP Type, Sex and enter into Indicator 1.1.

1.2 **All Key Populations, by age group and sex**

- i. Use the data from all the SCT2 and SCT3 to report the total number of Key Populations served, by age group and by KP type.
- ii. **SCT 2:** Aggregate the summary data in Section 3, by age group and by sex, for all SCT 2.
- iii. **SCT 3:** Similarly, aggregate the summary data in Section 3, by age group and by sex, for all SCT 3.
- iv. **Aggregate the totals** from the SCT 2 and SCT 3 forms, for each by age group and by sex. Transfer these totals into the appropriate cells on Indicator 1.2 of the KP 1.

1.3 **All Key Populations, by type of approach and by KP type:** Use both the SCT 2 and SCT 3 for this indicator.

- i. One-on-one and Small Group approaches.

i. Aggregate the "Grand Total" data in Section 3 (Summaries), for service approach and sex, for <u>all</u> SCT 2 forms.

ii. Transfer these totals into Indicator 1.3 of the KP 1, in the columns for "One-on-One" and "Small Group" by KP type, to report the "grand total" of KPs reached.

ii. <u>Large Group Activities</u>.

- Aggregate the data from Section 3, "Summary of Participants", from all SCT 3.

  i. Aggregate the data by age groups by KP type and transfer the results to indicator 1.2.

  ii. Transfer these totals, by KP type, to the "Large Group Activities" column in Indicator 1.3

2. Number of New Key Populations/Vulnerable groups reached with HIV prevention programmes-defined package of HIV services

2.1 New Key Populations, by type (KP/Vulnerable group).

i. Use only the Peer Educator Daily Activity Sheets (SCT 2), for One-on-One and Small Group approaches, for this indicator.

ii. Use the SCT 2 submitted by all Peer Educators during the reporting period that are grouped by KP type.

iii. For each type of KP, aggregate the data from all SCT 2 in Section 3, for "Total New Reached" (both One-on-One and small group). Aggregate the data submitted by all Peer Educators during the reporting period by target population and sex.

iv. Enter the aggregated total in Indicator 2.1 on the KP 1.

2.2 New Key Populations, by age group.

i. Using all SCT 2, aggregate the data in Section 3 from all SCT 2 for "Total New reached, by Age and KP type" (table at bottom of page).

ii. Enter the aggregated totals into Indicator 2.2 of the KP 1.

2.3 New KEY POPULATIONS, by type of service approach and KP type.

i. Using the SCT 2 for all Service Providers, aggregate the data in Section 3 for "Total, New reached", by target population and by service approach.

ii. Enter the aggregated totals into Indicator 2.3 of the KP 1 to report the "total new contacts" by target population, for "One-on-one" and "Small Group" approaches.

3. Number of New Key Populations/Vulnerable groups reached with stigma and discrimination messages

3.1 All Key Populations, by type and sex.

i. Group all the SCT 2 (One-on-one and Small Group) and the SCT 3 (Large Group) forms according to the KP categories

ii. Aggregate the total number of individuals in each KP category, according to KP Type, Sex and enter into Indicator 3.1.

3.2 **All Key Populations, by age group and sex:**

i. Use the data from all the SCT2 and SCT3 to report the total number of Key Populations served, by age group and by KP type.

ii. **SCT 2:** Aggregate the summary data in Section 3, by age group and by sex, for all SCT 2 forms.

iii. **SCT 3:** Similarly, aggregate the summary data in Section 3, by age group and by sex, for all SCT 3.

iv. **Aggregate the totals** from the SCT 2 and SCT 3 forms, for each by age group and by sex. Transfer these totals into the appropriate cells on Indicator 3.2 of the KP 1.

3.3 **All Key Populations, by type of approach and by KP type:** Use both the SCT 2 and SCT 3 for this indicator.

i. One-on-one and Small Group approaches.

- Aggregate the "Grand Total" data in Section 3 (Summaries), for service approach and sex, for all SCT 2 forms.
- Transfer these totals into Indicator 3.3 of the KP 1, in the columns for "One-on-One" and "Small Group" by KP type, to report the "grand total" of KPs reached.

ii. Large Group Activities.

- Aggregate the data from Section 3, "Summary of Participants", from all SCT 3.
- Aggregate the data by age groups by KP type and transfer the results to indicator 3.2.
- Transfer these totals, by KP type, to the "Large Group Activities" column in Indicator 3.3

4. Number of Key Populations and vulnerable groups who received HIV Testing Services (HTS) and know their test results.

4.1 By age group and KP type.

i. Use all the HTS 1 and HTS 3 reports, for the reporting period, for this indicator.

ii. Aggregate the data for the age groups by KP type, from the rows for "Number Receiving Post-test Counselling".

iii. Enter the totals of the aggregated data into Indicator 3.1 for "All" who received HIV testing services.

4.2 By Test Results and KP type.

i. Use all the HTS 1 and HTS 3 reports for the reporting period, for this indicator.

ii. For "Positive Test Results", aggregate the data by KP type, for all HTS 1 and HTS 3, using the rows for "Number Receiving Positive

Test Results".

iii. For "Total Test Results", aggregate the data by KP type for all HTS 1 and HTS 3 and enter the total number for each KP type into the relevant cell for Indicator 4.2

5. Number of condoms and lubricants distributed to Key Populations and vulnerable groups

i. **Use the SCT 7 (Commodity Stock Summary Sheet)** for the reporting period for this indicator.

ii. **Aggregate the total number** of male and female condoms and lubricants, by type of Key Populations, from the SCT 7 report.

   a. ***Note:*** *For monthly reports, transfer totals from the relevant month on the SCT 7 report. For quarterly reports, transfer totals for all three months on the SCT 7 report*

iii. **Enter the total number of condoms and lubricants,** by type of condom and type of KP into Indicator 5.

6. Number of key populations /vulnerable groups referred for services and received services

i. **Use all the SCT 5 forms** for the reporting period, for this indicator.

ii. **Aggregate the total number of referrals,** by KP type, for the HTS, STI, TB, SGBV, Psychosocial support, RH/FP PEP and others referrals documented on the SCT 5

iii. **Transfer** the aggregated referral totals by KP type to Indicator 6.1 by type of services referred.

iv. **Transfer** the aggregated referral totals by KP type to Indicator 6.2 by type of services received.

7. Number of key populations /vulnerable groups on treatment

i. Use all SCT9c: Clinical Care Summary for the reporting period for this indicator

ii. Aggregate the total number of KPs newly initiated on treatment by KP type and age and transfer to 7.1

iii. Aggregate all KPs on treatment (cumulative number on treatment) by KP type and age and transfer to 7.2

iv. Aggregate all defaulters or lost to follow ups by KP type (cumulative number on treatment) by KP type and by reason and transfer to 7.3

8. Number of KPs /vulnerable groups enrolled on NHIS

i. Aggregate all KPs newly enrolled on the NHIS enrolment form (SCT 10) by KP type and transfer to newly enrolled

ii. For cumulative enrolment data, aggregate all KPs (previous enrolment + current enrolment) on NHIS enrolment form (SCT 10) by KP type

9. Number of self-test kits distributed to KPs/vulnerable groups

i. Aggregate all test kits distributed to KPs by KP type and transfer to 9.1

ii. Aggregate all test kits distributed by mode of testing and transfer to 9.2Aggregate all test kits distributed by results and KP type and transfer to 9.3

10. Number of KP receiving post-SGBV care (clinical care) based on minimum package

i. Aggregate all KPs receiving post-SGBV care (SCT 8) by KP type and sex and transfer to 10.1

ii. Aggregate all KPs receiving post-SGBV care (SCT 8) by age group and sex and transfer to 10.2

iii. Aggregate all post-SGBV care services by type of services provided and by sex and transfer to 10.3

11. Number of KP /vulnerable group receiving pre exposure prophylaxis (PrEP)

i. Aggregate all PrEP received by KPs/vulnerable group by KP type and sex and transfer to 11

Section C Submission

1. **Reporting Officer:** Indicate the name of the Reporting Officer

2. **Signatures:** Sign the KP 1 form

3. Name and signature of verifying officer and date of verification

KP 1

National HIV Data Collection Tools
KP Indicator Summary Report

Name of Organization: ____

Region__________________________________ District___________________________________

Reporting Period; From: ___________To: ___________________ Date of submission _________________

Indicator	Results Achieved

Indicator: 1 Number of Key Populations (KP) and vulnerable groups reached with HIV prevention programs - defined package of HIV Services (Contacts)

1.1 By Type of KP

	FSW	MSM	PWID	Prisoners	Non-PP	Total
M						0
F						0
Total	0	0	0	0	0	0

1.2 By Age

	<15	15-19	20-24	25-29	30-34	35-49	50+	Total
FSW								
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								
Total	0	0	0	0	0	0	0	0

1.3) By Type of Approach (*An individual can be in more than one area)**

	One-on-one	Small Group Discussion	Large Group Activities
FSW			
MSM			
PWID			
Prisoners (M)			
Prisoners (F)			
Non-PP			
Total	0	0	0

Indicator: 2. Number of New Key Populations (KP) and vulnerable groups reached with HIV prevention programs - defined package of HIV Services

2.1 By Type

	FSW	MSM	PWID	Non-PP	Prisons	Total
M						0
F						0
Total	0	0	0	0	0	0

2.2 By Age

	<15	15-19	20-24	25-29	30-34	35-49	50+	Total
FSW								0
MSM								0
PWID								0
Prisoners (M)								0
Prisoners (F)								0
Non-PP								0
Total	0	0	0	0	0	0	0	0

2.3) By Type of Approach (*An individual can be in more than one area)**

	One-on-one	Discussion	Activities
FSW			
MSM			
PWID			
Prisoners (M)			
Prisoners (F)			
Non-PP			
Total	0	0	0

3. Number of Key Populations (KP) and vulnerable groups reached with stigma reduction messages

3.1 By Type

	FSW	MSM	PWID	Non-PP	Prisons	Total
M						0
F						0
Total	0	0	0	0	0	0

3.2 By Age

	<15	**15-19**	**20-24**	**25-29**	**30-34**	**35-49**	**50+**	**Total**
FSW								0
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								0
Total	0	0	0	0	0	0	0	0

3.3) By Type of Approach (*An individual can be in more than one area)**

	One-on-one	Discussion	Activities
FSW			
MSM			
PWID			
Prisoners (M)			
Prisoners (F)			
Non-PP			
Total	0	0	0

4. Number of KPs and vulnerable groups who received HTS and know their test results

4.1 By Age(Total)

	<15	**15-19**	**20-24**	**25-29**	**30-34**	**35-49**	**50+**	**Total**
FSW								
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								
Total	0	0	0	0	0	0	0	0

4.2 By Age(Positive)

	<15	**15-19**	**20-24**	**25-29**	**30-34**	**35-49**	**50+**	**Total**
FSW								
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								
Total	0	0	0	0	0	0	0	0

4.3 By Modes

	Facility	**DIC**	**Outreach**	**Total**
				0

5. Number of condoms and lubricants distributed to KPs and Vulnerable Groups

	FSW	MSM	PWID	Non-PP	Prisoners	Total
Male Condom						0
Female Condom						0
Lubricants						0

6. Number of KPs/Vulnerable Groups referred for services and received services

6.1) By Type of Services (***An individual can be referred for services in more than one area

	HTS	TB	STI	SGBV	PEP	Support	RH/FP	Others
FSW								
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								
Total	0	0	0	0	0	0	0	0

6.2) Received the services

	HTS	TB	STI	SGBV	PEP	Support	RH/FP	Others
FSW								
MSM								
PWID								
Prisoners (M)								
Prisoners (F)								
Non-PP								
Total	0	0	0	0	0	0	0	0

7. Number of KPs and vulnerable groups on treatment

7.1 Newly initiated (By type and age)

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
16-19							
20-24							
25+							
Total	0	0	0	0	0	0	0

7.2 Cummulative number on treatment

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
16-19							
20-24							
25+							
Total	0	0	0	0	0	0	0

7.3 Defaulter/Lost to follow up

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
Stopped							
Lost to follow up							
Died							
Total	0	0	0	0	0	0	0

8. Number of KPs and vulnerable groups enrolled on NHIS

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
Newly enrolled							0
Cummulative							0

9. Number of Self-Test Kits distributed to KP/Vulnerable Groups

9.1 By type of KP

FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
						0

9.2 By mode of testing

Assisted	Not Assisted	Total

9.3 By Results

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Total
Negative							0
Positive							0

10. Number of KPs and vulnerable groups **receiving** post-SGBV care (clinical care) based on the minimum package .

10.1 By KP type	FSW	MSM	PWID	Prisoners	Non-PP	Total
Male						0
Female						0
Total	0	0	0	0	0	0

10.2 By Age group

	<15	**15-19**	**20-24**	**25-29**	**30-34**	**35-49**	**50+**
Male							
Female							
Total	0	0	0	0	0	0	0

10.3 By Type of Service provided

	Sexual (Post-Rape Care)	Physical/ Psychosocial (Other Post GBV Care)	PEP Service Provided	Legal Services	Other
M					
F					
Total	0	0	0	0	0

11. Number of KPs and vulnerable groups receiving pre exposure prophylaxis (PrEP)

By KP type	FSW	MSM	PWID	Prisoners	Non-PP
M					
F					
Total	0	0	0	0	0

Reporting Officer ______________________________ **Signature:** ______________________________

Verifed by: ______________________________ **Signature:** ________________________ **Date:** ____________________

WP 1: Workplace Programs Summary Report

Thematic Area: Prevention of New HIV Infections

Intervention Area: Workplace Programs

General Information

Purpose	To summarise HIV prevention services provided to individuals in workplace settings
Reporting Period	Monthly / Quarterly (District and Regional levels) Quarterly (National level)
Who completes	Program Officers for the Implementing Partner organisation (district, regional, and national levels)
Who verifies data	Next supervisory officer in each organisation
Performance indicators using data from this form	<u>Workplace Indicator Summary Report</u> • Number of people reached through work place programs • Number of people reached with stigma reduction activities • Number of persons who received HIV Testing services and know their test results • Number of condoms and lubricants distributed in workplace settings • Number of individuals referred for other services • Number of senior managers / workers trained on stigma and discrimination in the workplace <u>National M&E Plan</u> • Number of people reached with Stigma Reduction activities • Number of people who received an HIV testing services and who know their test results

Instructions for Using This Form

Section A Background Information

1. Enter the <u>name of the organisation</u> that prepared this report.
2. Identify the <u>type of organisation</u> with a tick (✓) in the appropriate box.
3. Identify the <u>sector</u> with a tick in the appropriate box.
4. Identify the <u>Region and District</u> where services to workplace populations have been provided.
5. Enter the <u>reporting period</u> (“from” date, “to” date).
   - When used for <u>monthly</u> reporting, the “from” and “to” dates will coincide with the first and last dates of the reporting month

- When used for quarterly reporting, the "from" and "to" dates will coincide with the quarterly reporting period (i.e., January-March, April-June, July-September, October-December)

6. Indicate the date of submission.

7. Enter the name of the Officer.

8. Tick whether the organisation has a workplace policy (yes / no)

Section B
List of Indicators

Use the following forms for prevention activities with workplace target groups (Workers, Dependents, Community, and Other):

- SCT 2 for one-on-one and small group activities
- SCT 3 for large group activities
- SCT 4 for training activities
- SCT 5 for referrals
- HTS 1 for HIV testing services

1. Number of people reached with workplace programs

Use all SCT 2 and SCT 3 for services provided by Peer Educators and through Large Group Activities for the reporting period, respectively.

1.1 By type of approach and sex

- One-on-one and Small Group approaches: Using all **SCT 2** forms, aggregate the "Grand Total" data in Section 3 (Summaries) for service approach and sex.

  Transfer these totals into Indicator 1.1 of the WP 1 to report the "grand total" of people reached, in the columns for "One-on-One" and "Small Group" by sex.

- Large Group Activities: Using data from all **SCT 3** Attendance Registers, aggregate the data in Section 3, "Summary of Participants", by sex.

  Transfer totals of all contacts, by sex, to the "Large Group Activities" column in Indicator 1.1.

1.2 By target population

- Organize the SCT 2 and SCT 3 forms according to Target Population. Aggregate the totals separate for each target population.

- Using both the SCT 2 (One-on-One and Small Group) and the SCT 3 (Large Group) forms, tally the total number of individuals for each target population, according to sex.

- Enter the aggregated totals into Indicator 1.2.

2. Number of people reached with stigma reduction activities

2.1 By Type of Approach

- Using all relevant SCT 3 forms (where message is about stigma and discrimination) for the reporting period, tally the number of people reached with stigma reduction activities.

- Aggregate totals by sex and by approach (drama, video show, group discussion, training on S&D). Enter the totals aggregated into the respective columns for Indicator 2.1.

2.2 By Target Population

- Using all relevant SCT 3 forms (where message is about stigma and discrimination) that are grouped by target population, aggregate the number of people reached, by sex, for each target population (Workers, Dependent, Community)

- Enter the aggregate totals, by target population and sex, into Indicator 2.2

3. Number of individuals receiving HIV Testing Services and know their test results

3.1 All tested, by age group and sex

- Use all the HTS1 reports, for the reporting period, for this indicator.

- Aggregate the data, for the age groups by sex, from the rows for "number Receiving Post-test Counselling".

- Enter the totals of the aggregated into Indicator 3.1 for "All" who received HIV testing services.

3.2 Positive Test Results, by age group and sex

- Use all the HTS 1 reports, for the reporting period, for this indicator.

- Aggregate the data, for the age groups by sex, from the rows for "number Receiving Positive Test Results".

- Enter the totals into Indicator 3.2 for number receiving positive test results.

4 Number of condoms and lubricants distributed

- Use all SCT 7 (Commodity Stock Summary Sheet) for the reporting period for this indicator.

- Aggregate the total number of condoms and lubricants distributed from SCT 7 report.

Monthly report: transfer totals from the relevant month on the SCT 7 report
Quarterly report: transfer totals for all three months on the SCT 7 report

- Enter the total number of condoms, by type of condom, into Indicator 5.

5 <u>Number of individuals referred for other services</u>

- Use all the SCT 5 forms, for the reporting period, for this indicator.

- Aggregate the total number of referrals, by sex, for the relevant referrals (HTS, Psychosocial, STI, PEP, Legal Services, TB, Other) documented on the SCT 5 forms

- Transfer the aggregated referral totals, by sex, to Indicator 7.

6 <u>Number of Senior Managers trained on stigma and discrimination in the workplace</u>

- Use the SCT 4 Forms to report on this indicator.

- Aggregate the participants on all SCT 4, for the reporting period, according to target population (Senior Managers, Worker Reps).

- Enter the aggregated data, by target population, into Indicator 8.

Section C Submission — **Signature.** Person preparing WP1 provides signature.

National HIV Data Collection Tool

WP 1: Workplace Programs Periodic Summary Report

Section A: Background Information

Name of Organization: ______________________________ Type of Organization: Public □ Private Formal □ informal □

Sector: Agriculture □ Education □ Mining □ Manufacturing □ Construction □ Health □ Services □ Other □

Region______________________________ District________________________________

Reporting Period From: ________ To: ________ Submission Date________________ Name of Officer__________________

Does Organization have Workplace Policy? Yes □ No □

Section B: List of indicators

Indicator	Achieved				
1. Number of people reached through work place programs	**1.1) By Type of Approach (***An individual can be in more than one area)**				
		One-to-one	Small Group discussion	Large Group discussion	Other
	M				
	F				
	Total	0	0	0	0
	1.2) By Target Group				
		Workers	Dependant	Community	Total
	M				
	F				
	Total	0	0	0	0
2. Number of persons reached with stigma reduction activities	**2.1) By Type of Approach (***An individual can be in more than one area)**				
		Drama	Video Show	Large Group discussion	Traning on S&D
	M				
	F				
	Total	0	0	0	0
	2.2) By Target Audience / population				
		Workers	Dependant	Community	Total
	M				0
	F				0
	Total	0	0	0	0

3. Number of persons who received HIV testing services (HTS) and who know their results	**3.1 By All People**		**All**					
		0-14	**15-19**	**20-24**	**25-29**	**30+**	**Total**	
	M						0	
	F						0	
	Total	0	0	0	0	0	0	
	3.2 By Positve Results		**Positive**					
		0-14	**15-19**	**20-24**	**25-29**	**30+**	**Total**	
	M						0	
	F						0	
	Total	0	0	0	0	0	0	
4. Number of condoms and lubricants distributed	**5.1 By type of condom**							
	Male Condom	**Female Condom**	**Total**	**Lubricants**				
			0					
5. Number of individuals referred for other services	7.1) By Type of Services (***An individual can be referred for services in more than one area)							
		HTC	Psycho Social	STI	PEP	Legal Services	TB	Other
	M							
	F							
	Total	0	0	0	0	0	0	0
	7.1) By Type of Services Received (***An individual can be referred for services in more than one area)							
		HTS	Psycho Social	STI	PEP	Legal Services	TB	Other
	M							
	F							
	Total	0	0	0	0	0	0	
6. Number of senior managers/workers trained on stigma and discrimination in the								
	Senior Management	Worker Reps	Total					
			0					

Signature of Supervisor:____

HIV Testing Services

The Data Management tools in the HIV Testing Services Area track and report on HIV Testing Services provided through the Ghana Health Service, as well as the Ghana AIDS Commission and its Implementing Partners.

There is a single source form for HTS: the HTS Register, which tracks the HIV testing services process for clients. Data from HTS Register are aggregated and reported in a single report, the HTS1 Summary Sheet. In addition, data from the HTS3: HIV self-test kits distribution register are aggregated and reported in the appropriate indicator summary reports (PR1, KP1, and WP1).

These HTS data management tools are summarised in the table below and presented, with their instructions, in the following pages.

Tools	Purpose	Who Uses Form	When Form is Used
Source Forms			
HTS 2 HIV Testing Services Register	Track status and results of HIV testing services for individual clients.	Service Provider – nurse, counsellor, or health care provider – in GHS, CHAG, private facilities, quasi-government health facilities or during outreach	Used on a daily basis, with a new row for each client; • when the client is initially registered • after testing results have been received
Reports			
HTS 1 HTS Summary Sheet	To summarise aggregated information from the HTS Register (HTS 2). This information will be used for reports at the community, district, regional, and national levels.	Field Supervisor, Medical superintendent or Officer in Charge	Monthly

HTS 2: HIV Testing Services Register

Thematic Area: Prevention of New HIV Infections
Intervention Area: HIV Testing Services

General Information

Purpose	Track status and results of HIV Testing Services for individual clients. ***Note:*** *The information in this form is highly confidential, and must be carefully safe-guarded.*
Reporting Period	Monthly.
Who completes	Service Provider – nurse, counsellor, or health care provider – in GHS, CHAG, private facilities, quasi-government health facilities
Who verifies data	Medical superintendent or Officer in Charge.
When completed	The HTS 2 is used on a daily basis, with a new row for each client: • when the client is initially registered • after testing results have been received
Performance indicators using data from this form	National Summary Reports: • Number of people who received an HIV test and know their results: - HTS Indicator Summary Report (HTS 1) - Prevention Indicator Summary Report (PR 1) - Workplace Indicator Summary Report (WP1) - KP Indicator Summary Report (KP 1) National M&E Plan • Percentage of women and men aged 15-49 years who received a HIV test in the last 12 months and who know their results • Number of people who received an HIV test and who know their results (disaggregated by age, sex and target population)

Instructions for Using This Form

Section 1
Basic Client Information

This section is completed when the client is initially registered for HIV Testing Services

1. **No.:** Enter sequential number for each row

2. **Date:** Enter date that client is registered

3. **Basic client information:** Enter identifying information for each client:
   - Name/UIC
   - Age
   - Sex

4. **TB Screened:** Indicate whether the client has been screened for TB (yes / no).

5. **Pre-test Information:** Indicate whether the client has been well-informed (provided with information about HIV, the testing process, and how test results will be interpreted). Indicate "Yes" or "No".

6. **Type of Client:** Indicate the type of client using the following codes:

   D Diagnostic – when an individual has symptoms or conditions that warrant an HIV test

   W Walk-in – when an individual comes to an HIV Centre to know his/her status

   P Provider Initiated – when health care professional encourage an individual to be tested

Section 2
HIV Testing

7. **First Response:** If reactive indicate type, by making a tick mark in the appropriate column to identify the type of HIV;
   - Reactive HIV I
   - Reactive HIV II
   - Reactive HIV I & II

   If not reactive, indicate "non-response" or NR.

8. **Oraquick:** Specify whether the test result is reactive or non-reactive.

9. **Final Test Result:** Specify whether the final test result is HIV positive, HIV negative, or indeterminate;
   - positive – when both first response and Oraquick tests are reactive
   - negative – when the first response test is negative
   - indeterminate – when first response is reactive but Oraquick response is non-reactive

10. **Post Test Counselling:** Indicate whether client received post-test counselling (e.g., telling person results, encouraging person if negative to stay negative, if positive to be referred to ART clinic for care).

Indicate “yes” or “no”.

Section 3 Other Information	**11. Referred into Care:** Indicate whether client has been referred for care (yes / no)
	12. Comments: Provide any relevant or clarifying comments about this client, the test results, or referral for care
	13. Counsellor: Indicate the name (or the initials) of the Counsellor.

HTS 2: HTS Register

The HTS Register (HTS 2) is a large-format Register that cannot be reproduced in this Data Management Manual. Please refer to the Register at your local service delivery site.

HTS 1: HTS Summary Sheet

Thematic Area: Prevention of New HIV Infections
Intervention Area: HIV Testing Services

General Information	
Purpose	*To summarise aggregated information from the HTS Register (HTS 2). This information will be used for reports at the district, regional, and national levels.* ***Note:*** *This form is also referred to as the “Monthly Returns” form.*
Reporting Period	Monthly
Who completes	Nurse/Counsellor, Field Supervisor, Data Manager or Officer in Charge
Who verifies data	Health Facility In-charge, Medical superintendent or Officer in Charge
When completed	Monthly
Performance indicators using data from this form	<u>HTS Summary Report</u> • Number of individuals receiving pre-test information • Number of individuals tested • Number of individuals positive • Number of individuals receiving positive test results • Number of individuals receiving post-test counselling • Number of individuals screened for TB • Number of individuals referred into care

National M&E Plan

- Percentage of women and men aged 15-49 years who received an HIV test in the last 12 months and who know their results
- Number of people who received an HIV test and who know their results (disaggregated by age and sex)
- Number of KP who received an HIV test and who know their results (disaggregated by type of KP)

Instructions for Using This Form

Section 1 Background Information

Enter background information for this form:

- Name of service delivery site or organisation
- Region, District, and Community
- Reporting Period (monthly, quarterly, half-yearly)
- Target Population
  Note: *The target population refers to the specific group of persons receiving services. The target populations include in-school-youth, out-of-school, MSM, FSWs, PWID, Non PP, Prisoners, Workers (employees) among others.*

  When the target population is a member of a Key Population, indicate the type of KP: Female Sex Worker (FSW), Men Having Sex with Men (MSM), Persons who inject Drugs (PWID), Prisoners or Non-Paying Partners (Non-PP).

Section 2 Summary Information from HTS Register

This section reports the aggregated totals from one or more HTS Registers (HTS 2) for a single community (HTS session) that were prepared during the reporting period.

1. Transfer the aggregated totals from the HTS Registers into the relevant cells of the HTS 1 / Monthly Returns Form

- number of clients receiving pre-test information, by gender and age group
- number of clients tested, by gender and age group
- number of clients who tested positive, by gender and age group
- number of clients receiving positive test results, by gender and age group
- number of clients receiving post-test counselling
- number of clients screened for TB
- number of clients referred for care

Verification and Signatures

2. The person completing the HTS1 Summary Sheet will sign the form, and indicate his/her name, designation, and phone number.

National HIV Data Collection Tool

HTS 1: HTS Summary Sheet

Section 1: Background Information

Name of Organisation ____________________ Reporting Period

Region ____________________ District ____________________ Month: ____________

Community ____________________ Year: ____________

Target Population: ____________________

Section 2: Summary Information from HTS Register (HTS 2)

Indicators		Age Groups (Years)										
		0-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50+	Total
# Receiving Pre-test Information	Male											
	Female											
	Total											
# Tested	Male											
	Female											
	Total											
# Positive	Male											
	Female											
	Total											
# Receiving Positive Test Results	Male											
	Female											
	Total											

# Receiving Post-test Counselling	Male											
	Female											
	Total											
# Screened for TB	Male											
	Female											
	Total											
# Referred into Care	Male											
	Female											
	Total											

Form completed by:

Name:……………………………………………………………………………………...……

Designation:…..………………..…………………………...........................

Signature:………………………………………...…………….Phone number:……………………………….…..………………………………...

HTS 3: Self-Test Kit Distribution Register

Thematic Area: Prevention of New Infections
Intervention Area: HIV Prevention Programmes

General Information

Purpose	Track distribution and results of HIV self-test for individual clients. ***Note:*** *The information in this form is highly confidential, and must be carefully safe-guarded.*
Reporting Period	All HTS 3 will be aggregated and reported in its respective indicator in the PR1 and KP1 at the end of a specified reporting period as specified for the PR1 and KP1.
Who uses this form	Field officers/Health workers, coordinators/supervisors
Who verifies data	Program Supervisor/Manager
When form is used	The HTS 3 is used on a daily basis , with a new row for each client: • when the client is registered • after self-test kit is distributed
Performance Indicators using data from this form	National Summary Reports KP 1 • Indicator 9.1 – Number of Self-Test Kits distributed to KP/Vulnerable Groups (by type of KPs) • Indicator 9.2 – Number of Self-Test Kits distributed to KP/Vulnerable Groups (by mode of testing) • Indicator 9.3 – Number of Self-Test Kits distributed to KP/Vulnerable Groups (by test results) PR 1 • Indicator 6.1 – Number of HTS self-test kits distributed to General Population (by mode of testing) • Indicator 6.2 – Number of HTS self-test kits distributed to General Population (test results) National M&E Plan ; • Number of HTS self-test kits distributed (C6)

Instructions for Using This Form

Section 1 Background Information	**1.** Enter the general identifying information for the HIV Self-test kit distribution: • Name of the Organization undertaking the HIV self-test kit distribution

- District within which the activity is being undertaken
- Month within which the activity is being undertaken
- Target Population for group activity

  Note: *The target population refers to the specific group of persons reached through the activity or event. The target population may include in-school youth, out-of-school youth, general population (adults) Men having Sex with Men (MSM), Female Sex Workers (FSWs).*

- Community or microsite within which the activity took place

Section 2
Client Details

2. No. column: Serially number the rows

3. Date: Enter date that client is registered

4. Name/UIC column: Provide the names or UIC of clients

5. Sex and Age columns: Tick (✓) the sex and specify the age of each client in their respective columns

6. Type (assisted/not assisted): indicate assistance provided. Tick (✓) whether client was assisted (or not) to test as *in accordance the self-testing protocol*

7. Quantity: enter the number of self-test kit distributed to client/individual

8. Test Result: indicate test result in the respective columns (if available). *Note: follow up with clients for test results in accordance the self-testing protocol*

9. Telephone column: Indicate the telephone number of each client/individual

Section 3
Summary of kits distributed and test results

This section Summarises of Kits distribution and test results (from Section 2)

3.1 By type of KP:
Aggregate and enter number of self-test kits distributed by target group into appropriate cells

3.2 By type of testing:

i. Review the data simultaneously in the **Assisted** and **Not Assisted** columns in order to identify the number of clients who were

- Assisted to test

- Not Assisted to test

ii. Transfer the aggregated totals into the appropriate cells in 3.2 in Section 3.

3.3 **By test results**:

i. Review the data simultaneously in the **Negative** and **Positive** columns in order to identify the number of clients who were
- Tested Negative
- Tested Positive

ii. Transfer the aggregated totals into the appropriate cells in 3.3 in Section 3.

3.4 **By age:**

i. Review the data simultaneously in the **Negative** and **Positive** columns and **Age** column in order to identify the number of clients who were
- Tested Negative
- Tested Positive

ii. Transfer the aggregated totals into the appropriate age group cells in 3.4 in section 3.

Verification and Signatures

4 The Project Officer must fill the HTS 3 form and append signature appropriately.

5 The Field Supervisor must review and verify all sections of the HTS 3.

6 The HTS3 form must be signed and dated by the Field Supervisor.

National HIV Data Collection Tool

HTS 3: Self-Test Kit Distribution Register

Section 1: Background Information

Name of Organization: ______________________________ District____________________

Community/Microsite____ Month____

Target Population______________________________

Section 2: Participants

No.	Date	Name/UIC	Gender		Age	Type		Quantity	Test Result		Telephone
			M	F		Assisted	Not Assisted		Negative	Positive	

Section 3: Summary of Kits & (from Section 2)

3.1 By type of KP

FSW	MSM	PWID	Prisoners(M)	Prisoners (F)	Non-PP	Gen Pop	Total
							0

3.2 By Type of Testing

Assisted	Not Assisted	Total
		0

3.3 By Test Results

	FSW	MSM	PWID	Prisoners(M)	Prisoners(F)	Non-PP	Gen Pop	Total
Negative								0
Positive								0
Total	0	0	0	0	0	0	0	0

3.4 By Age

	16 - 19	20-24	25+	Total
Negative				
Positive				
Total	0	0	0	0

Signature of Project Officer____________________ **Signature of Supervising Officer**______________________

HIV Prevention Programmes

DATA COLLECTION AND REPORTING PROCEDURES

The Data Management tools described in the previous section are used to document and report the prevention services provided to clients and individuals served through the HIV Prevention Programmes and HIV Testing Services Areas.

This section of the Data Management Manual describes the procedures for preparing and using the source forms, as well as aggregating the data from source forms into routine performance reports at the community, district, regional and national levels.

For each Service Area, the procedures describe:

- General information about the Service Area
    - Target audiences
    - Services provided
    - Performance indicators
    - Source documents and summary reports

- Procedures for preparing the Source Documents

- Procedures for aggregating data at the community, district, and national levels

Each procedure describes a series of activities that are completed, as well as the position or individual responsible for that activity, when the activity is completed, the forms and reports that are used, and the result or outcome of the activity.

Data Collection and Reporting Procedures

HIV Prevention Programmes

Overview

Thematic Area:	Prevention of New HIV Infections
Intervention Area:	HIV Prevention Programmes
Target Audiences	• In-school and Out-of-School Youth • Adults (general population) • Key Populations (KPs): MSM, FSW,PWID, Non-PP, Prison Inmates • Workplace Populations: Workers, Dependents, Community
Service Approaches	• One-on-One • Small Group • Large Group
Performance Indicators	Prevention Indicator Summary Report (PR 1) • Number of people reached with HIV prevention programs -defined package of HIV Services • Number of people reached with stigma reduction activities • Number of individuals who received HIV Testing Services and know their test results • Number of condoms and Lubricants distributed • Number of individuals referred for other services • Number of HTS self-test kits distributed • Number of people receiving post- sexual gender based violence (SGBV) care based on the minimum package National M&E Plan • All the above performance indicators are linked to the National M&E Plan
Source Documents:	SCT 1 Individual tracking register SCT 2 Peer Educator Daily Activity Sheet (One-on-One, Small Groups) SCT 3 Attendance Register (Large Groups) SCT 4 Training record Form SCT 5 Two-way Referral Form SCT 6 Commodity Stock Management Sheets SCT 7 Commodity Stock Management Summary Sheet SCT 8 Post-SGBV care form SCT 9(a-c) Clinical Care Registers and summary HTS 3 Self-Test kit distribution register

Summary Reports:	PR 1	Prevention Indicator Summary Report
	KP 1	KPs Indicator Summary
	WP 1	Workplace Indicator Summary

Preparation of Source Documents

This section describes the procedures for collecting prevention Services information from the following source documents:

- **Peer Educator Daily Activity Sheet (SCT 2)**: documents One-on-One and Small Group BCC service approaches provided by an individual Peer Educator
- **Attendance Register (SCT 3)**: documents Large Group BCC activity
- **Training Record Form (SCT 4)**: provides information about training events
- **Two-way Referral Form (SCT 5)**: facilitates the referral of clients for STI, HTS, PEP, and other services
- **Commodity Stock Management Sheet (SCT 6):** tracks the quantities of commodities received and issued or distributed
- **Commodity Stock Management Summary Sheet (SCT 7)**: summarises the quantities of stocks distributed by Peer Educators and Group Outreach activities or through other direct distribution methods.
- **Post GBV Care Form** (SCT8): documents types of SGBV reported by clients and post-SGBV care provided to clients.
- **Self-Test kits distribution register (HTS3):** documents self-test kits distributed to clients and their test results.

SCT 2 Peer Educator Daily Activity Sheet and SCT 1 KP Individual Tracking Sheet

Note: the SCT 2 and SCT 1 are used only for one-on-one and small groups BCC activities. Large Group BCC activities or events are documented using the SCT 3 Attendance Sheet (see below).

	Who	What Activity	When	Result
1	Peer Educator	Provides BCC services through one-on-one and small group activities	Continuously	BCC services are provided to clients
2	Peer Educator	Tracks BCC individual or small group activities using a personal notebook	Continuously	Informal Peer Educator notes on one-on-one or small group activities
3	Peer Educator	Makes referrals for other services based on need of client. Uses SCT 5 (Two-Way Referral) form to make referrals	When other services are needed by client(s)	Clients are referred for other services

4	Peer Educator	Enters information in Section 2 of SCT 2 to record One-on-One or Small Group services provided – one row for each individual reached	Daily	BCC activities provided to individuals by a single Peer Educator are recorded on SCT 2
5	Peer Educator / Field Supervisor	Tallies information in Section 2 and enters aggregated totals into Section 3	When summary Section 2 lines are completed, or end of month	Information in Section 2 is aggregated in Section 3
6	Peer Educator	Signs the SCT 2	When summary data in Section 3 are tallied	SCT 2 is ready for review by Field Supervisor
7	Field Supervisor	Reviews entered information in SCT 2 Section 2 to verify that the information is complete and accurate. May review PE notebook to validate accuracy	Periodically, when SCT 2 sheet is completed	SCT 2 data is verified and accurate
8	Field Supervisor	Reviews and verifies summary totals in Section 3, and signs SCT 2 form	Monthly, or whenever the SCT 2 is completed	Data for BCC services provided by a single Peer Educator are ready for monthly reporting
9	Field Supervisor	Files original SCT 2 at service delivery level. A copy may be made for back-up purposes and sent to the next level.	When SCT 2 is completed and signed	SCT 2 is maintained at local level for future reference

SCT 3 Attendance Register (Group Activities)

Note: the SCT 3 is used for large group BCC activities or events. Large group activities or events are conducted for groups that are larger than five but not more than 100 individuals. For large group events that are more than 100 individuals, groups should be split into smaller groups (of no more than 100 individuals) and additional SCT 3 forms completed.

	Who	What Activity	When	Result
1	Field Supervisor or Coordinator	Organises and conducts a large-group activity or event	Continuously	BCC services are provided through a large group activity or event
2	Field Supervisor or Coordinator	Completes SCT 3 Attendance Register(s) for large group activity	During or immediately after large group activity is conducted	Large Group activity is documented on SCT 3
3	Field Supervisor or Coordinator	Tallies information from individual rows in Section 2 and enters totals into Sections 3 (number of participants by age group and sex) and Section 4 (number of condoms and IEC materials distributed)	After activity or event	SCT 3 form is completed

4	Field Supervisor or Coordinator	Files original SCT 3 at service delivery level. A copy may be made for back-up purposes and sent to the next level.	When SCT 3 is completed and signed	SCT 3 is maintained at local level for future reference

SCT 4 Training Record Form

	Who	What Activity	When	Result
1	Training organiser	Completes Section 1 Information providing background information about training event	Start of training event	SCT 4 is set up to track participants
2	Training Participants	Each enters his/her personal information (name, sex, organisational designation, telephone) and signature in Section 2	Before or during training event	Completed SCT 4 recording number of participants and target population
3	Training organiser	Reviews SCT 4 for accuracy and stores with other forms for use in reporting of prevention services	After training event	Completed SCT 4 available for reporting

SCT 5 Two-way Referral Form

	Who	What Activity	When	Result
1	Peer Educator/Field Supervisor/DIC officer	Determines that client needs other services, and completes top portion of SCT 5 Two-Way Referral Form	During / after One-on-One, Small Group, Large Group service activities	Decision to refer client for other services
2	Peer Educator/Field Supervisor/DIC officer	Completes Part 1 and Section 1 of Part 2 and signs form	When referring client to other organisation	SCT 5 is completed by referring organisation
3	Peer Educator/Field Supervisor/DIC officer	May complete other SCT 5 forms, as needed, for additional services provided by other organisations	As needed	Client has referrals for services from different organisations
4	Peer Educator/Field Supervisor/DIC officer	Detaches part 2 of SCT 5 form and give it to client	When referring client to other organisation	Client has referral for additional service(s)
5	Client	Takes Part 2 of the completed SCT 5 form(s) to new organisation (s) / service provider(s)	When seeking other services at new service delivery site	Client is received by new service provider(s)

6	Service Provider(s) in receiving organisation (s)	Receive(s) client, provide(s) appropriate services, and document(s) services provided in Section 2 of Part 2 of SCT 5, and signs	After services are provided	Referral services are documented
7	Service Provider(s) in receiving organisation (s)	Maintain(s) Part 2 of SCT 5 form(s) on file for use in reporting on referral activity	After SCT 5 forms have been completed	SCT 5 forms are available for use in reporting
8	Field Supervisor/DIC officer	Takes part 1 of SCT 5 and goes to the receiving organisation to verify whether the referred client accessed the service (s)	Before or during compilation of reports	Referred clients who accessed service determined

SCT 6 Stock Commodity Distribution Sheet

	Who	What Activity	When	Result
1	Field Supervisor	Receives or issues commodity stocks (male or female condoms, lubricants, IEC materials)	When a commodity is received or issued	Commodity stocks are received or issued
2	Field Supervisor	Updates SCT 6 with the quantity of commodities received or issued ***Note:*** separate SCT 6 forms are maintained for each type of commodity	When a commodity is received or distributed	Stock quantities are updated on the SCT 6

SCT 7 Commodity Stock Management Summary Sheet

	Who	What Activity	When	Result
1	Field Supervisor	Gathers and organizes all SCT 2 and SCT 3 forms, as well as other organisational records for the direct distribution of commodities	Monthly or quarterly, depending on required reporting	All stock commodity distribution records are available for reporting on the SCT 7 form
2	Field Supervisor	Uses SCT 2 forms for all Peer Educators, as well as SCT 3 forms for BCC Group Activities and other organisational records, to report actual distribution of all commodities during the reporting period	Monthly or quarterly, depending on required reporting	Distribution of commodities are reported at the local level for each Implementing Partner
3	Field Supervisor	Transfers the totals of distributed commodities onto SCT 7, by type of commodity	Monthly or quarterly, depending on required reporting	Commodity stock distribution is reported, by type of commodity, on Summary Reports

Aggregating Data for District, Regional, and National Reports

This Section describes the processes for aggregating the HIV Prevention Programmes Source Documents into a series of Summary Indicator Reports:

- **Prevention Indicator Summary Report** (PR1) – aggregating data from the SCT 2, SCT 3, SCT 4, and SCT 5 forms for prevention services to Youth (in-school and out-of-school) and Adults from the general population
- **KP Indicator Summary Report** (KP 1) – aggregating data from the SCT 2, SCT 3. SCT 4, and SCT 5 forms for prevention services to KPs target groups (FSW, PWID, MSM, and non-PP, prisoners)
- **Workplace Programs Indicator Summary Reporting** (WP 1) – aggregating data from the SCT 2, SCT 3, SCT 4 and SCT 5 forms for target groups in workplace settings (workers, dependents) and the surrounding community

The aggregation process takes places at several organisational levels:

- Service Delivery sites
- Intermediate levels (districts and regions)
- National (Implementing Partners, and Ghana AIDS Commission).

The procedures for aggregating the Behavioural Change Communications Services data are described for each of these levels.

District Aggregation and Reporting

Activities:	1. Report prevention services provided by all Service Providers on the Summary Indicator Reports (PR 1: Prevention Services, KP 1: KPs, WP 1: Workplace Programs) 2. Report all training activities with Peer Educators for BCC services on Summary Indicator Reports (PR 1: Prevention Services, KP1: Key Populations, WP 1: Workplace Programs)
Forms / Reports Used	SCT 2 Peer Educators Daily Activity Sheets (One-on-One, Small Group) SCT 3 Attendance Register (Large Group) SCT 4 Training Record Form SCT 5 Two-way Referral Form SCT 6 Commodity Stock Management Sheet SCT 7 Commodity Stock Management Summary Sheet
Due Date:	Monthly, within 10 days after end of month

	Who	What Activity	Summary Report(s), Forms Used	Result
SCT 1 Individual Tracking Sheet, SCT 2 Peer Educator Daily Activity Sheets, and SCT 3 Attendance Registers				
1	Field Supervisor / Coordinator	Collects all completed **SCT1** & **SCT2** Peer Educator Daily Activity Sheets and **SCT 3** Attendance Registers (Large Groups)	n/a	All **SCT2** & **SCT1** and SCT3 forms available for monthly reporting
2	Field Supervisor / Coordinator	Conducts a final review of all **SCT1** & **SCT2** and SCT3 forms (for omissions, errors in calculations, inconsistencies)	n/a	All **SCT1** & **SCT2** and SCT3 forms are verified
3	Field Supervisor / Coordinator	Aggregates data from all completed **SCT1** & **SCT2** forms and transfers totals (by service approach and by age group) to the relevant Summary Reports.	PR1: Prevention KP1: KPs WP1: Workplace	Indicator Summary Reports updated with prevention services data (one-on-one, small group)
4	Field Supervisor / Coordinator	Aggregates data from all completed SCT3 forms and transfers totals (large group activities or events) to the relevant Summary Indicator Report.	PR1: Prevention KP1: KPs WP1: Workplace	Indicator Summary Reports updated with BCC services data (large group)
SCT 4 Training Record forms				
5	Field Supervisor / Coordinator	Collects all completed **SCT 4 Training Record forms**	SCT 4 Training Record Forms	All SCT 4 forms collated for reporting
6	Field Supervisor / Coordinator	Conducts a final review of all SCT 4 forms (for omissions, errors in calculations, inconsistencies)	SCT 4	All SCT 4 forms are verified
7	Field Supervisor / Coordinator	Aggregates data from all completed SCT 4 Training Record Forms and transfers training data to the relevant Indicator Summary Report	PR1: Prevention KP1: KPs WP1: Workplace	Indicator Summary Reports updated with training data
SCT 5 Two-way Referral forms				
8	Field Supervisor / Coordinator	Collects all completed **SCT 5 Two-way Referral forms**	SCT 5 Two-way Referral Forms	All SCT 5 forms collated for reporting
9	Field Supervisor / Coordinator	Conducts a final review of all SCT 5 forms (for omissions, errors in calculations, inconsistencies)	SCT 5 Two-way Referral forms	All SCT 5 forms are verified

10	Field Supervisor / Coordinator	Aggregates data from all completed SCT 5 forms and transfers referrals data to the relevant Indicator Summary Report	PR1: Prevention KP1: KPs WP1: Workplace	Indicator Summary Reports updated with referrals data
SCT 7 Commodity Stock Management Summary Sheet				
11	Field Supervisor / Coordinator	Collects all completed SCT 7 Commodity Stock Management Summary Sheets	SCT 7 Commodity Stock Management Summary Sheets	All SCT 7 forms collated for reporting
12	Field Supervisor / Coordinator	Conducts a final review of all SCT 7 forms (for omissions, errors in calculations, inconsistencies)	SCT 7 Reports	All SCT 7 forms are verified
13	Field Supervisor / Coordinator	Aggregates data from all completed SCT 7 forms and transfers referrals data to the relevant Indicator Summary Report	PR1: Prevention KP1: KPs WP1: Workplace	Indicator Summary Reports updated with referrals data
Summary Indicator Reports (PR 1, KP 1, and WP 1)				
14	Field Supervisor / Coordinator	Makes and files a hard copy of monthly Indicator Summary Report	PR1: Prevention KP1: KPs WP1: Workplace	Copy of monthly Summary Report is stored for future reference
15	Field Supervisor / Coordinator	Transmits original Summary Indicator Report to the regional level	PR1: Prevention KP1: KPs WP1: Workplace	Completed Summary Reports are submitted to regional level
16	Field Supervisor / Coordinator	Analyses monthly results for BCC services provided through one-on-one, small group, and large group approaches	District level IP Summary Indicator Report	Data are analysed for trends and key findings at District IP level

Regional Aggregation and Reporting

Activity: Report all BCC services, referrals, and training activities on the Regional Summary Indicator Report

Forms Used: PR 1: Prevention Indicator Summary Reports (District)
KPS 1: KPs Indicator Summary Reports (District)

WP 1: Workplace Programs Summary Reports (District)

Due Date: 15 days after the reporting period

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Regional Coordinator / Program Officer	Collects all relevant Summary Indicator Reports that were submitted from Field Supervisor (District)	PR1: Prevention KP1: KPs WP1: Workplace	All completed Summary Indicator Reports are available for further aggregation
2	Regional Coordinator / Program Officer	Verifies data on submitted Summary Indicator Reports for omissions, errors in calculations, or inconsistencies	PR1: Prevention KP1: KPs WP1: Workplace	Verified data for reporting to next higher level
3	Regional Coordinator / Program Officer	Aggregates data from all District-level Summary Indicator Reports to Regional Summary Indicator Report (e.g., district, region). Data may be aggregated electronically.	District level PR1: Prevention KP1: KPs WP1: Workplace	New Summary Reports with aggregated regional data
4	Regional Coordinator / Program Officer	Transmits original regional Summary Indicator Report, with copies of District-level Summary Reports, to IP national level	Regional PR1: Prevention KP1: KPs WP1: Workplace with support District-level reports	Regional Summary Report and supporting District documentation is submitted to national IP level
5	Regional Coordinator / Program Officer	Captures District-level Summary Indicator Reports into Country Response Information System (CRIS)	District-level Summary Indicator Reports	District level reports entered into CRIS database
6	Regional Coordinator / Program Officer	Analyses results for BCC services provided through one-on-one, small group, and large group approaches	District level IP Summary Indicator Reports	Data are analysed for trends and key findings at district and regional levels
7	Regional Coordinator / Program Officer	Provide feedback to Field Supervisors at District level on reports submitted	District Level Reports (PR1, KP1, WP1)	Feedback provided by Regional level M&E to District Field Supervisors

National Aggregation and Reporting: Implementing Partners

Activity: Report all prevention services, referrals, and training activities at the national level of the Implementing Partner

Forms Used: PR 1: Prevention Indicator Summary Reports (Region)
KP 1: KP Indicator Summary Reports (Region)
WP 1: Workplace Programs Summary Reports (Region)

Due Date: Quarterly, 40 days after end of quarter

	Who	What Activity	Summary Report(s), Forms Used	Result
1	IP National M&E Officer (assisted by Data Officers)	Receives all completed regional-level Indicator Summary Reports, with copies of District-level Summary Indicator Reports	District and Regional Level Reports (PR1, KP1, WP1)	All Regional Summary Indicator Reports are available for verification and aggregation at national level
2	IP National M&E Officer (assisted by Data Officers)	Verifies data on District / Regional Indicator Summary Reports, with supporting District-level reports	Regional Level Reports (PR1, KP1, WP1), with supporting District reports	All submitted Summary Indicator Reports are verified
3	IP National M&E Officer (assisted by Data Officers)	Aggregates data from all Regional Summary Sheets into relevant national-level IP Indicator Summary Report (KP1, PR1, WP1)	National Level IP Reports (PR1, KP1, WP1)	National Summary Reports are prepared
4	IP National M&E Officer (assisted by Data Officers)	Reviews and edits District-level data (entered by regions) in CRIS	CRIS data (districts, regions)	District and Regional CRIS data are quality reviewed
5	IP National M&E Officer	Analyses quarterly results for BCC services provided through one-on-one, small group, and large group approaches	Regional and national level IP Summary Indicator Reports	Data are analysed for trends and key findings at level of national IP
6	IP National M&E Officer	Provides feedback to Regional Coordinator / Program Officer on District and Regional-level reports submitted	Regional Level Reports (PR1, KP1, WP1), with supporting District reports	Feedback provided by National level M&E to regional level M&E
7	IP National M&E Officer (assisted by Data Officers)	Aggregated national IP data are submitted to Ghana AIDS Commission	National Level IP Reports (PR1, KP1, WP1)	Ghana AIDS Commission receives National IP Reports

National Aggregation and Reporting: Ghana AIDS Commission

Activity: Report and analyse data for all BCC services, referrals, and training activities at the national level

Forms Used: PR 1: Prevention Indicator Summary Reports (National Implementing Partners)
KP 1: KP Indicator Summary Reports (National Implementing Partners)
WP 1: Workplace Programs Summary Reports (National Implementing Partners)

Due Date: Semi-annually, 60 days after end of half year

	Who	What Activity	Reporting Tools Used	Result
1	Director General	Receives all national IP Summary Indicator Reports for BCC services. Summary reports are transferred to Director RM&E	National Level IP Summary Indicator Reports (PR1, KP1, WP1)	All National IP Summary Indicator Reports available for GAC analysis and reporting
2	M&E Coordinator, Evaluation Team	Reviews all national level IP Summary Indicator Reports	National Level IP Summary Indicator Reports (PR1, KP1, WP1)	National IP Summary Indicator Reports are quality reviewed
3	Data Management Officer	Approved national-level IP Summary Indicator Reports are reviewed and validated against data entered into CRIS, recording any errors in error log	National Level IP Summary Indicator Reports (PR1, KP1, WP1)	IP Summary Indicator Reports are validated (in reference to CRIS data)
4	Data Management Officer / Project Officer	Files hard copy reports for each IP	National Level IP Reports (PR1, KP1, WP1)	Hard copy National IP Reports are filed and available for reference
5	Data Quality Assurance Manager	Applies quality checks to submitted data	CRIS data	CRIS data is quality reviewed
6	Data Manager	Analyses quarterly results for BCC services provided through one-on-one, small group, and large group approaches	Access database for one-on-one, small group, and large group BCC services	Data are analysed for trends and key findings
7	Data Quality Assurance Manager	Provides feedback to all national M&E Officers on submitted reports	National IP Summary Indicator Reports (PR1, KP1, WP1)	Feedback provided by National level GAC to national level IPs

Data Collection and Reporting Procedures

HIV Testing Services (HTS)

Overview

Thematic Area:	Prevention of New HIV Infections
Intervention Area:	HIV Counselling and Testing

Target Audiences

- In-school and Out-of-School Youth
- Adults (general population)
- Key Populations (KPs): MSM, FSW, PWID, Non-PP
- Workplace Populations: Workers, Dependents, Community

Services

- HIV Counselling and Testing

Performance Indicator(s)

HTS Indicator Report / Summary Sheet (HTS 1)

1. Number of individuals receiving pre-test information
2. Number of individuals tested
3. Number of individuals positive
4. Number of individuals receiving positive test results
5. Number of individuals receiving post-test counselling
6. Number of individuals screened for TB
7. Number of individuals referred into care

National M&E Plan

- Percentage of women and men aged 15-49 years who received a HIV test in the last 12 months and who know their results
- Number of people who received a HIV test and who know their results (disaggregated by age and sex)
- Number of KPs who received an HIV test and who know their results (disaggregated by type of KPs)

Source Document:	HTS 2	HTS Register
Summary Reports	HTS 1	HTS Indicator Summary Sheet
	PR 1	Prevention Indicator Summary Report
	KPS 1	KP Indicator Summary Report
	WP 1	Workplace Programs Periodic Summary Report

Preparation of Source Document

HTS 2 HIV Testing Services Register

	Who	What Activity	When	Result
1	Service Provider (Nurse, Counsellor, Health Care Provider)	Enters basic client information on a single line of the HTS 2 Register	When client is registered for HIV counselling and testing services	Basic client information has been entered into register, and will be updated as testing is conducted
2	Service Provider	Administers First Response HIV test, and documents results in appropriate HTS 2 columns	After First Response test results have been determined	First Response tests indicate whether client is reactive (and type of HIV) or non-reactive
3	Service Provider	Administers Oraquick test and documents test result in appropriate HTS 2 column	If First Response test results were positive	Final Test Result is determined (positive, negative, indeterminate)
4	Service Provider	Provides post-test counselling to client	After test results (positive or negative) have been determined	Client is informed of status and advised about care & treatment options
5	Service Provider	Refers client into care, as needed	When test results are positive or indicate need for referral	Client is referred for care and treatment or other services

Aggregating Data for District, Regional, and National Reports

This Section describes the processes for aggregating the HTS source document (HTS 2 Register) into a series of HTS 1 Summary Indicator Reports. These results are then transferred to other Summary Indicator Reports: Prevention Indicator Summary Report (PR 1), KP Indicator Summary Report (KP 1), and Workplace Programs Periodic Summary Report (WP 1).

The aggregation process takes place at several organisational levels:

- Service Delivery sites
- Intermediate levels (districts and regions)
- National (Implementing Partners and Ghana AIDS Commission).

The procedures for aggregating the HTS services data are described for each of these levels.

Service Delivery Aggregation and Reporting

Activity: Report aggregated data for HTS services at the service delivery for the reporting period.

Forms / Reports Used HTS 2 HIV Testing Services Register

Due Date: End of Month (within 10 days)

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Field Supervisor, Medical Superintendent, Officer in Charge	Reviews HTS Registry entries since last report for accuracy and completeness	HCT 2 Register	All HTS 2 register entries are validated for further reporting
2	Field Supervisor, Medical Superintendent, Officer in Charge	Organizes all HTS 2 Registers according to target groups, as needed	HTS 2 Registers, by target group	HTS 2 Register data can be aggregated by target group
3	Field Supervisor, Medical Superintendent, Officer in Charge	Aggregates all HTS 2 Register data by target group and by indicator requirements	HTS 2 Registers, by target group	HTS 2 Register data is aggregated by target group
4	Field Supervisor, Medical Superintendent, Officer in Charge	Transfers aggregated HTS 2 data, by target group, to the HTS Summary Sheets (HTS 1).	HTS 2 Registers HTS 1 Summaries	HTS 1 Summary Sheets are prepared, by target group, for service delivery site
5	Field Supervisor, Medical Superintendent, Officer in Charge	Files copies of HTS Summary Sheets (HTS 1)	HTS 2 Registers HTS 1 Summaries	Copies of monthly HTS Summary Sheets are stored for future reference

	Who	What Activity	Summary Report(s), Forms Used	Result
6	Field Supervisor, Medical Superintendent, Officer in Charge	Transmits completed HTS 1 Summary Sheets to the next organisational level (e.g., district, region, or national)	HTS 1 Summaries	Completed HTS Summary Sheets are submitted to next higher organisational level

Intermediate Aggregation and Reporting: Districts and Regions

Activity:	Report aggregated data for HTS services at the District or Regional level for the reporting period.
Forms / Reports Used	HTS 1 Summary Sheets
Due Date:	End of Month (within 15 days)

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Regional Coordinator / Program Officer	Collects all HTS 1 Summary Reports that were submitted from Field Supervisor (Level 1)	HTS 1 Summary Sheets	All HTS 1 Summary Sheets are available for further aggregation
2	Regional Coordinator / Program Officer	Aggregates data from all HTS 1 Summary Sheets to higher level HTS 1 Summary Sheet (e.g., district, region). Data may be aggregated electronically	Aggregated HTS 1 Summary Sheet	Aggregated HTS 1 Summary Sheets (district, region)
3	Regional Coordinator / Program Officer	Transfers aggregated HTS results to Summary Indicator Reports for prevention services (PR 1), KPS services (KPS 1), and workplace programs (WP 1)	HTS 1 PR 1 KP 1 WP 1	HTS results are reported on Summary Indicator Reports
4	Regional Coordinator / Program Officer	Enters District-level IP Summary Reports for HTS services into CRIS database	District Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	Data are entered into CRIS database
5	Regional Coordinator / Program Officer	Transmits district or regional-level Summary Indicator Reports to IP national level.	HTS 1 PR 1 KP 1 WP 1	Aggregated HTS results for district or region are submitted to national level

National Aggregation and Reporting: Implementing Partners

Activity: Report aggregated data for HTS services at the national level for Implementing Partner during the reporting period.

Forms / Reports Used HTS 1 Summary Sheets

Due date: Semi-annually, 45 days after end of half year

	Who	What Activity	Summary Report(s), Forms Used	Result
1	IP National M&E Officer (assisted by Data Officers)	Receives all completed Regional Summary Indicator Reports, along with Summary Reports from all districts	District or Regional Level Reports (PR 1, KP 1, WP 1, HTS 1)	All completed District / Regional Summary Reports are available for verification and aggregation at national level
2	IP National M&E Officer (assisted by Data Officers)	Verifies data on District / Regional Summary Sheets, with supporting data from source forms	District or Regional Level Reports (PR 1, KP 1, WP 1, HTS 1)	All submitted Summary Indicator Reports are verified
3	IP National M&E Officer (assisted by Data Officers)	Aggregates data from all Regional Summary Sheets into national-level Implementing Partner Reports – HTS 1 Summary Sheet, and Summary Indicator Reports (KP 1, PR 1, WP 1)	National Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	National Summary Reports are prepared
4	IP National M&E Officer (assisted by Data Officers)	Aggregated national IP data are submitted to Ghana AIDS Commission	National Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	Ghana AIDS Commission receives National IP Reports

National Aggregation and Reporting: Ghana AIDS Commission

Activity: Reports and analyses data for aggregated HTS services at the country level

Forms / Reports Used HTS 1 Summary Sheets

Due Date: Semi-annually, 60 days after end of half year

	Who	What Activity	Reporting Tools Used	Result
1	Director General	Receive all national IP Summary Reports for HTS services. Summary reports are transferred to Director RM&E	National Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	All National IP Reports available for GAC analysis and reporting

	Who	What Activity	Reporting Tools Used	Result
2	Evaluation Team	Review all national level IP Summary Reports for HTS services are reviewed	National Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	National IP Reports are quality reviewed
3	Data Officer	Approved national-level IP Summary Reports for HTS services are entered into GAC database	National Level IP Reports (PR 1, KP 1, WP 1, HTS 1)	Data are entered in database
4	Data Officer	Checks electronic data for double entry, other issues from entering data into CRIS database	CRIS database	CRIS data entry process is quality checked.
5	Data Manager	Analyses quarterly results for HTS services	CRIS database	Data are analysed for trends and key findings
6	Data Officer / Project Officer	Files hard copy reports for each IP	National Level IP Reports (HTS 1, PR 1, KP 1, WP 1)	Hard copy National IP Reports are filed and available for reference

APPENDIX

List of Participants for Revision of National HIV Data Management Manuals and Tools

	Name	Organization
1	Amb. Dr. Mokowa Blay Adu-Gyamfi	GAC
2	Kyeremeh Atuahene	GAC
3	Emmanuel T. Larbi	GAC
4	Dr. Fred Nana Poku	GAC
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6	Isaiah Doe Kwao	GAC
7	Raphael Sackitey	GAC
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9	Rita Afriyie	GAC
10	Paul Ayamah	GAC
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13	Silas Quaye	CDC
14	Frank Ameyaw	CDC
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16	Lillian Bruce	HFFG
17	Benjamin Baiden	CEPEHRG
18	Benjamin Kwarteng	ADRA
19	Kofi Diaba	WAPCAS
20	Lawrence A. Obeng	WAPCAS
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22	Adwoa Pinamang Desu	OICI
23	Michael Aggrey	CENCOSAD
24	Emmanuel D. Adiku	PROLINK
25	Jonathan Tetteh-Kwao Teye	NAP+ Ghana
26	Kenneth Danso	NACP
27	Asamoah Boateng	PPAG
28	Ariella Block	JSI/Care Continuum
29	David T. Nartey	JSI/Care Continuum
30	Samuel K. K. Dery	Consultant

List of Participants for Validation Meeting

No.	Name	Organisation
1	Kyeremeh Atuahene	GAC
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3	Isaiah Doe Kwao	GAC
4	Cynthia Adobea Asante	GAC
5	Kwasi Gyimah Okai	GAC
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7	Sackitey Raphael	GAC
8	Paul Ayamah	GAC
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10	Alex Frempong	GAC
11	David Tetteh Nartey	JSI/Care Continuum
12	Edem Kawuba Hini	GHANET
13	Anne Mario Asoduyii	PPAG
14	Michael Aggrey	CENCOSAD
15	Peter Koomson	Socio-Serve Ghana
16	Bismark Obeng Kusi	OICI International
17	Abdul Frank	HFFG
18	Lawrence Obeng A.	WAPCAS
19	Nana Adjoa Nortei-Adu	WAAF
20	Godwin Kofi Amoah	NECPAD
21	Kenneth Danso	NACP
22	Samuel Owiredu	CEPHERG
23	Samuel K. K. Dery	Consultant