DATA MANAGEMENT MANUAL

Services to Orphans and Vulnerable Children (OVC)

September 2017
Version 2.0

Ghana AIDS Commission

Acknowledgements

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 and Services
HIV	Human Immunodeficiency Virus
IP	Implementing Partner
IEC	Information, Education and Communication
KP	Key Populations
KYS	Know Your Status
M&E	Monitoring and Evaluation
MARPs	Most At Risk Populations
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 services to Orphans and Vulnerable Children (OVC) in the national response to HIV.

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 services to Orphans and Vulnerable Children (OVC).

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 use in providing services to Orphans and Vulnerable Children.

- **Data Collection and Reporting Procedures**: summarises how the data collection and reporting tools are used at all levels of the organisations providing services to Orphans and Vulnerable Children.

This document is an updated version of the OVC Data Management Manual. 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 components in the National M&E System, but very different functions, for managing the national HIV and AIDS response in Ghana.   As defined in the Global Fund's M&E Toolkit[1]:

- 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)[2], and are organized into several Thematic Areas:

Thematic Areas	Service Areas
Prevention of New HIV Infections	HIV Prevention Programmes (Prevention)
	HIV Testing Services
HIV Treatment, Care and Support	Prevention of Mother-to-Child Transmission (PMTCT) Services to People Living with HIV (PLHIV) through Support Groups
	Home Based Care (HBC)

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[1] Monitoring and Evaluation Toolkit: HIV/AIDS, Tuberculosis, and Malaria, Jnauary 2006, 2nd ed. ISBN 92-9224-029-3, page 11
[2] Ghana National HIV & AIDS Monitoring and Evaluation Plan (2016-2020), Ghana AIDS Commission, September 2017.

Thematic Areas	Service Areas
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.

This Data Management Manual describes the data management system that is needed to report these and other indicators in the National M&E Plan (2016-2020).   **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) • Post Gender Based Violence Care (SCT 8) • Clinical Care Register (SCT 9a & 9b) • NHIS Enrolment form (SCT 10)	• 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 national 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 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 emphasises 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. Breaches 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 and records 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 at all levels.

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 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 backup 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: OVC

The HIV and AIDS data collection tools and reporting formats are the foundation for the HIV and AIDS Data Management System. This section of the OVC Data Management Manual contains the tools and reports for OVC services, as well as the instructions for completing them.

There are two basic types of data management tools for the OVC services area:

- **Source forms:** These are registers or forms 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:** These are tools used to aggregate and report service delivery data at various levels – community, district, regional, and national.

The OVC source documents and reporting formats are summarised below. The forms and report formats, with the instructions for their use, are presented on the following pages

Tools	Purpose	Who Uses Form	When Form is Used
Source Forms			
OVC 3 OVC Visit Register	To register and track OVC services provided to an individual child or household member by an OVC Service Provider	Service Providers (OVC Institutions, Community-level Caregivers)	When OVC is identified and when services are provided to an OVC.
SCT 4 Training Record Form	To capture information about training related events: the target community/population/audience; the focus (topics) of the training; when and where the training was organized	Training organiser	At the beginning of each day of training
SCT 5 Two-Way Referral Form	To facilitate the referral of an individual being referred, by one organization, for services from another organization.	Care Givers and other Service Providers, who are referring a client for services	When a Caregiver, or other service providers, determine that a client should be referred for services from another organization
Reports			
OVC 2 OVC Support Summary Form	To report the number of OVC and, or household members receiving services from an individual Service Provider or Institution during a reporting period.	Field Supervisor / Institutional Coordinator	At the end of the month or quarter, using the OVC 3 Registers for all of the Service Provider's OVC
OVC 4 Enrolment Summary Sheet	To aggregate and report enrolment information, by sex and age group, from the OVC Register (OVC 3) and the OVC Support Summary (OVC 2)	Field Supervisor / Institutional Coordinator	At the end of the month or quarter

Tools	Purpose	Who Uses Form	When Form is Used
OVC 1 OVC Indicator Summary Report	To report key information, disaggregated by sex and age group, for OVC services during the reporting period • OVC and, or Household Members enrolled and completed/exited • number of OVC and, or Household Members receiving support • Referrals for other services • Service Providers trained to provide OVC	Field Supervisor / Coordinator (District) Regional Coordinator / Program Officer (Region) National M&E Officer (Implementing Partner)	Monthly or Quarterly

OVC 1: OVC Summary Indicator Form

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS
Intervention Area: Services to Orphans and Vulnerable Children

General Information

Purpose

To report key information, disaggregated by sex and age group, for OVC services during the reporting period;

- OVC and, or Household members enrolled and completed/exited.
- number of OVC and, or household members receiving support
- referrals for other services
- service providers trained to provide OVC support services

Reporting Period

Monthly/Quarterly

Who completes

Field Supervisor / Coordinator (Organization/District)
Coordinator / Program Officer (Region)
National M&E Officer (Implementing Partner)

Who verifies data

Next Supervisory Officer

Performance indicators using data from this form

National Summary Report (this report)

- Number of OVC and, or Household Members enrolled in programme

- Number of OVC and, or Household Members who have exited/completed the OVC programme

- Number of OVC and, or Household Members receiving support

- Number of OVC referred for other services

- Number of persons trained to provide OVC services to OVC and, or Household Members.

National M&E Plan

- Number and percentage of orphaned and vulnerable children aged 0-17 whose households received free basic external support in caring for the child

  Note: this indicator is measured using data from the Department of Social Welfare (DSW). In the absence of data from DSW, the data from this report can be used as a proxy for this indicator.

Section A	1.	Enter the name of the organization providing OVC services.
Background Information	2.	Enter the region and district where services were provided
	3.	Enter the reporting period ("from" date," to" date).
	4.	Note: The "from" and "to" dates must coincide with the monthly or quarterly reporting period (i.e., first day or the month to the last day of the month or first month of the quarter to the last month of the quarter)
	5.	Provide the date of submission, name and telephone number of the Reporting Officer.
Section B Indicator Results	6.	**Number of OVC and, or Household Members enrolled in the program:** Enter the total numbers of OVC and, or Household Members enrolled in the programme. Disaggregate these numbers by sex, and age group, using information from the OVC 4 - Enrolment Summary Sheet.

- Currently enrolled OVC – Add data from row 1 ("enrolled from previous period") and row 2 ("newly enrolled OVC and, or Household Members") and subtract row 3 ("OVC and, or Household Members who have completed/exited programme"), by sex and age group, from results (row 1 +row 2 – row 3), by sex and age group.

- Newly enrolled OVC and, or Household Members – transfer data from row 2 of the OVC 4 showing number of "newly enrolled OVC" by age group and sex

  Note: "Newly enrolled" OVC and, or Household Members are those children and, or Household Members who were enrolled in the most recent reporting period.

7. **Number of OVC and, or Household Members who have completed/exited the programme:** Use data from row 5 of the OVC 4;

- Aggregate the totals for number of OVC and, or Household Members who have completed/exited the program, by age and by reason.

- Transfer the totals, by age and by reason for leaving, to the OVC 1.

8. **Number of OVC and, or household members receiving support:** Use data from all relevant OVC 2 -Support Summary Forms, for all Service Providers, to report aggregate totals for the reporting period:

- Aggregate the number of OVC receiving support, by type of support, age group and sex.

- Aggregate the number of household members receiving support, by type of support and sex

9. **Number of OVC referred for other services:** Use copies of all Two-Way Referral Forms (SCT 5) for all Service Providers
   - Aggregate the number of OVC referred, and disaggregate by type of referral and sex.

10. **Number of OVC service providers/Caregivers trained:** Use all relevant SCT 4 - Training Record forms to aggregate and report this data.

Section C
Submission

11. Enter the name of the person who prepared the OVC1 and the date.
12. Sign the OVC1 form.

National HIV Data Collection Tool
OVC 1: OVC Summary Indicator Form

Section A: Background Information

Name of Organization: _____   Region_____

District: _____   Reporting Period, From: _____ To: _____

Date of Submission: _____   Reporting Officer: _____

Telephone Number: _____

Section B: Indicator Results

Indicators	Results Achieved						
1. Number of OVC and, or Household Members enrolled in the program	**1.1 Currently Enrolled**						
		0-5	6-10	11-14	15-17	Total	Household Members
	Male						
	Female						
	Total						
	1.2 Newly Enrolled						
		0-5	6-10	11-14	15-17	Total	Household Members
	Male						
	Female						
	Total						

Indicators								
2. Number of OVC and, or Household Members who have completed/exited the programme	**2.1 By Age**							
		0-5	6-10	11-14	15-17	Total	Household Members	
	Male							
	Female							
	Total							
	2.2 By Reason	Reintegrated	Migrated	Dead	Unknown	Others	Total	Household Members
	Male							
	Female							
	Total							

Indicators								
3. Number of OVC and, or Household Members receiving support	**3.1 By Type of Support** (***An individual can receive support in more than one area)							
		Food & Nutritional Support	Shelter and Care	Protection/ Legal Support	Health Care	Psycho-social / Spiritual	Education	Cash Transfer
	Male							
	Female							
	Total							
	Household Member — Male							
	Household Member — Female							
	Household Member — Total							

	3.2 By Age					
	OVC	0-5	6-10	11-14	15-17	Total
	Male					
	Female					
	Total					

4. Number of OVC referred for other services	**4.1 By Type of Services** (***An individual can be referred for services in more than one area)									
		Medical screening	HTC	STI	Skills training	PEP	Legal Service	TB	ART	Others
	Male									
	Female									
	Total									
Number of OVC service providers / or caregivers trained	**6.1 By Sex**									
	Male									
	Female									
	Total									

Section C: Submission

Prepared by: _____   Signature: _____

Date: _____

OVC 2: OVC Support Summary Form

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS

Intervention Area: Services to Orphans and Vulnerable Children

General Information

Purpose	To report the number of Orphans and Vulnerable Children (OVC) and, or Household Members receiving services from an individual Service Provider or Institution during a reporting period
Reporting period	Monthly/Quarterly
Who completes form	Field Supervisor / Institutional Coordinator
Who verifies data	Next Supervisory Level
When completed	The OVC 2 is completed at the end of the month or quarter, using the OVC 3 (OVC Registers) for all Service Providers

Performance indicators using data from this form

National Summary Report (OVC 1)

- Number of OVC and, or Household Members receiving support services

- Number of OVC who have been referred for other services

- Number of OVC and, or Household Members who have completed/exited the OVC programme

National M&E Plan

- Number and percentage of orphaned and vulnerable children aged 0-17 whose households received free basic external support in caring for the child

  Note: this indicator is measured using data from the Department of Social Welfare (DSW). In the absence of data from DSW, the data from this report can be used as a proxy for this indicator.

Instructions for Using This Form

Section 1
Background
Information

1. Enter the name of the Service Provider's <u>organization</u>

2. Enter the <u>reporting period</u> ("from" date," to" date).

   Note: The "from" and "to" dates must coincide with the monthly or quarterly reporting period

3. Identify the <u>Region</u> and <u>District</u> where services are provided

4. Enter the name of the <u>Service Provider</u>

Section 2	**OVC and, or Household Members Receiving Support Services**
OVC Support Services and Referrals	**1.** Tally the data from all the Service Providers' OVC Registers (OVC 3) to report the number of OVC, disaggregated by age group and sex, and, or Household Members who received Support Services during the reporting period.

1. Tally the data from all the Service Providers' OVC Registers (OVC 3) to report the number of OVC, disaggregated by age group and sex, and, or Household Members who received Support Services during the reporting period.

Note: *This form does not report the number of Support Services provided. Instead, it reports the number of OVC clients and, or Household Members who received the Support Services.*

For example:

- *If an OVC and, or Household Member receives a Support Service (e.g., "Food / Nutritional Supplement") more than once during a reporting period, the number of OVC and, or Household Members served is still only one.*

- *If an OVC client and, or Household Member receives more than one category of a given service (e.g., "School Fee" and "School *Material" with the Education Support Service), there is still only one service provided ("Education").*

It is important to remember these guidelines in aggregating data from the OVC Registers (OVC 3) for individual OVC and, or Household Member to the OVC Support Summary Form (OVC 2) for their Service Provider.

2. To begin this aggregation process:

- Group all OVC 3 (OVC Registers) for an individual Service Provider into two groups – one for males, the other for females.

- Using the "Age Cohort" field in Section 1 of the OVC 3 Registers, further organize all the OVC 3 forms, for each sex group, into sub-groups corresponding to "Age Groups" (0-5, 6-10, 11-14, and 15-17).

Male OVC

3. Using the Home Visit Registers for male OVC in the age group "0-5", tally the number with tick marks in the column for "Food / Nutritional Supplementation"

Note: *Remember that this indicator is tracking the number of male OVC receiving the service, not the number of times the service was provided, in the reporting period. If an OVC 3 form has more than one tick mark in the column for "Food / Nutritional Supplementation", disregard the other tick marks for the reporting period (since they are multiple instances of the service provided to the same OVC).*

4. Tally the total number of male OVC receiving the "Food / Nutritional Supplementation" service from the Service Provider. Transfer this total into the OVC Support Summary Form (OVC 2) in the cell for Males, Age Group "0-5", "Food / Nutritional Supplementation".

5. Repeat step 4 for the "Shelter and Care" Support Service for the OVC in the "0-5" Age Group.

   Note: *The "**Shelter** and Care" Support Service has two categories ("Shelter" and "Reintegration of institutionalized children"). A tick mark in <u>either</u> column qualifies as an OVC being served in this Service area. Only count the service once, even if more than one category of service was provided, or if the same category of service was provided more than once in the reporting period.*

   Example: *In the "Health Care Category", both the "General Health Needs" column and the "Prevention of HIV" column are ticked on the first, third, and fourth rows. These services, provided on different days, are <u>only</u> counted as a <u>single</u> service to the client for two reasons:*

   - *the service is "Heath Care", not the two categories of health care*

   - *the same service delivered more than once in a reporting period can only be counted as a single service (to avoid double counting).*

6. Enter the totals for the number of male and female OVC receiving "Shelter and Care" into the appropriate cells for OVC 2.

7. Repeat this process for the other four Support Services and Age Groups.

Female OVC

8. Using the OVC 3 Home Visit Registers for Female OVC, follow the same procedure for aggregating Support Services by Age Group.

9. As with males, do not tally a service more than once to an individual female OVC– even if it was provided multiple times to that client, or if more than one of the service categories was provided in the reporting period.

10. Enter the totals for all female OVC for the Service Provider, by type of Support Service and Age Group, into the OVC 2 - Home Visit Summary.

11. Also, tally the totals for support services provided for a Household Member, for each support service, disaggregate by Sex and fill the Household member columns for each Support Service.

<u>OVC Referred for Other Services</u>

12. Gather all completed Two-Way Referral Forms (SCT 5), completed by the Service Provider during the reporting period.

13. Aggregate the data according to type of Referrals, by Sex and Age Group, and transfer totals to the OVC Support Summary Form (OVC 2) for the Service Provider.

Section 3

Other Information

OVC and, or Household Member Who Have Completed/Exited from Programme

14. By Reason for Completion/Exit: Using the OVC 3 Registers for all the Service Providers, tally the number of OVC who have completed/exited the OVC programme during the reporting period by;

- by reason for completing or exiting
- Sex
- total number

15. By Age Group: Using the OVC 3 (OVC Registers) for all the Service Providers, tally the number of OVC who have completed / exited the OVC programme during the reporting period by;

- age group
- total number

16. Household Member: Using the OVC 3 (OVC Register) for all Service Providers, tally the number of Household Members who have completed / exited the OVC programme during the reporting period by;

- Sex
- total number

17. Comments. Provide any comments or remarks.

Signature   Provide date and signature of Service Provider.

OVC 2: OVC Support Summary Form

Section 1: Background Information

Name of organization: _____   Reporting Period: From: _____ To: _____

Name of Service Provider: _____   Region: _____ District: _____

Section 2: Summary Data

Support Services		Sex	Age Group					Household Member
			0-5	6-10	11-14	15-17	Total	
Support Services	Food & Nutritional Support	**Male**						
		Female						
		Total						
	Shelter and Care	Male						
		Female						
		Total						
	Protection/ Legal Support	Male						
		Female						
		Total						
	Psycho social	Male						
		Female						
		Total						
	Health Care	Male						
		Female						
		Total						
	Education	Male						
		Female						
		Total						

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Referrals	Medical screening	Male						
		Female						
		Total						
	HTC	Male						
		Female						
		Total						
	Skills training	Male						
		Female						
		Total						
	PEP	Male						
		Female						
		Total						
	Legal Services	Male						
		Female						
		Total						
	TB	Male						
		Female						
		Total						
	ART	Male						
		Female						
		Total						
	STI	Male						
		Female						
		Total						

OVC and, or Household Members who have completed/							
Male							
Female							
Total							
By REASON	**Reintegrated**	**Migrated**	**Dead**	**Unknown**	**Other**		
Male							
Female							

exited from programme	Total					

Section 3: Comments and Remarks

Signature: _____   Date: _____

OVC 3   OVC Visit Register

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS

Intervention Area: Services to Orphans and Vulnerable Children

General Information

Purpose	To track OVC services provided to OVC and, or Household Members by a Service Provider or Institution.
Reporting period	Monthly or Quarterly
Who uses form	Service Providers (OVC Institutions, Community-level Caregivers)
Who verifies data	Field Supervisor, M&E Assistant, Institutional Coordinator
When form is used	The OVC 3 is updated, one row at a time, when services are provided to OVC and, or Household Member

Performance indicators using data from this form

National Summary Report (OVC 1)

- Number of OVC and, or Household Member enrolled in the program

- Number of OVC and, or Household Member who have exited the program

- Number of OVC and, or Household Member receiving support

- Number of OVC referred for other services

- Number of persons trained to provide services to OVC

National M&E Plan

- Number and percentage of orphaned and vulnerable children aged 0-17 whose households received free basic external support in caring for the child

Note: this indicator is measured using data from the Department of Social Welfare (DSW). In the absence of data from DSW, the data from this report can be used as a proxy for this indicator.

Instructions for Using This Form

Section 1
Background
Information

1. Enter background information about the <u>service provider</u>
   - Name of organization providing services
   - Region and District where services are provided

2. Date Started: Enter the date the child and, or Household Member started receiving OVC Support Services.

3. OVC Information: Enter information about the OVC and, or Household Member receiving services.
   - Name
   - Sex
   - Type of beneficiary (Child or Household Member – Tick as

appropriate)
- Age and Age Cohort (Tick appropriate Age Cohort for OVC)
- Address and Community

Section 2 Services Provided to OVC	Complete each row to describe the services provided to OVC and, or Household Member. Use one row for each day that services and/or referrals are provided. 4. **Date:** specify the date when the services are provided. 1. **Services:** specify the service(s) provided by ticking the appropriate column(s). 2. **Referrals:** tick the Referrals column when referrals are made, and complete SCT 5 Two-Way Referral Form.
Section 3 Program Exit	3. **If** the child and, or Household Member has completed or exited from OVC Support Service provision, enter the date. 4. Select the reason for completion or exit (Re-integrated, Migrated, Dead, Unknown, Other).
Section 4 Comments	5. Provide any comments or remarks

National HIV Data Collection Tool

OVC 3: OVC Register

Section 1: Background Information

Name of Organization: _____   Date Started: _____

Region: _____   District: _____

Name of Beneficiary: _____   Sex: Male □ Female □   Type of Beneficiary   Child □   Household Member □

Age: _____ | Age Cohort (select one for OVC): | _____ 0-5   _____ 6-10   _____ 11-14   _____ 15-17

Complete Address of Child/Household Member_____ Community: _____

Section 2: Services Provided to OVC and, or Household Member

Date	1) Food and Nutritional Support	2) Shelter and Care		3) Protection / legal services			4) Health Care			5) Psychosocial			6) Education			7) Cash Transfer			Referral
	Food / Nutritional supplementation	Shelter	Reintegration of institutionalized children	Stigma Reduction	Inheritance Claim	Child Abuse	General Health Needs	Health Insurance	Prevention of HIV	Life Skill	Counselling	Rehabilitation / Re-Integration	School Fee	School Material	Skill Development	LEAP	WFP	Other (Specify)	If yes, use referral form (SCT 5)

Section 3: Program Completion/Exit

Date Child and, or Household Member completed/exited the program: _____

Reason for Completion/Exit: 1) Re-integrated □,   2) Migrated □,   3) Dead □,   4) Unknown □,   5) Other (Specify)_____

Section 4: Comments and Remarks:

OVC 4: OVC Enrolment Summary Sheet

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS
Intervention Area: Services to Orphans and Vulnerable Children

General Information

Purpose	To aggregate and report enrolment information, by age group and, or sex, from the OVC Register (OVC 3) and the OVC Support Summary Form (OVC 2).
Reporting Period	Monthly or Quarterly
Who completes	Field Supervisor / Institutional Coordinator
Who verifies data	Next Supervisory Level
When completed	At the end of the month or quarter.

Performance indicators using data from this form

National Summary Report (OVC 1)

- Number of OVC enrolled in the program

- Number of OVC who have exited the programme

National M&E Plan

- Number and percentage of orphaned and vulnerable children aged 0-17 whose households received free basic external support in caring for the child

  Note: this indicator is measured using data from the Department of Social Welfare (DSW). In the absence of data from DSW, the data from this report can be used as a proxy for this indicator.

Instructions for Using This Form

Section 1
Background Information

1. Enter the name of the Organization providing OVC services

2. Enter the Region and District where services are provided.

3. Enter the reporting period ("from" date" and "to" date).

   Note: The "from" and "to" dates must coincide with the monthly or quarterly reporting period

4. Indicate the name of the person preparing the form.

Section 2
Summary of Enrolment Data

5. **Enrolled from previous reporting period:** Enter the summary totals for OVC and or Household Members, by age group and, or sex, from the previous month's OVC 4 (Row 4).

6. **Newly enrolled OVC:** Enter the number of newly enrolled OVC and, or Household Member since the last report was completed.

   This number will be based on a review of all OVC 3 Registers (from all Service Providers), noting which members have been registered since the last report ("Date Started").

   - Disaggregate the number of newly enrolment OVC and, or Household Members by age group and, or sex.

   - Add "Male" and "Female" for each age group to obtain at "Total" OVC enrolled since the last period.

   - Add "Male" and "Female" for Household Members to obtain the "Total" for Beneficiary Household Members.

7. **OVC and, or Household Members who have completed/exited from programme:** Enter the number of OVC and, or Household Members who have completed/exited the program, by age group and, or sex, since the last report was completed.

   - This data will be aggregated from all the OVC 2 – OVC Support Summary Forms. Use the totals in the section for "OVC who have completed/exited programme", by Age Group as well as the figure in the Total section for Household Members who have completed or exited the programme.

   - Transfer these totals, for OVC who have completed/exited the program (by Age Group and Sex) and Household Members who have completed or exited the programme (by Sex), to the Row 3 of the Section 2 on the OVC 4 Enrolment Summary.

8. **Currently enrolled OVC.** For each age group and sex group:

   - Add the totals from Row 1 (enrolled from previous reporting period) and Row 2 (newly enrolled OVC) of the OVC 4.

   - Subtract the totals in Row 3 (OVC and, or Household Members who have completed/exited from programme)

   - Enter net total, by age group and, or sex, in Row 4 (currently enrolled in programme)

9. **OVC, and Household Members who have completed/exited from programme, by reason.**

   - Aggregate data from all OVC 2 – OVC Support Summary Forms, for all Service Providers, for number of OVC and, or Household Members who have exited the program, by reason.

   - Transfer totals to Row 5 of the OVC 4.

Section 3
Other

6. **Comments and Remarks:** Enter any clarifying comments and remarks for the information or calculations in the OVC 4**.**

7. **Signatures:** Provide dates and signatures of Service Provider and Supervisor.

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OVC 4: OVC Enrolment Summary Sheet

Section 1: Background Information

Name of Organization: _____

Region: _____ District: _____

Reporting Period: From _____ To _____ | Prepared By: _____

Section 2: Summary of Enrolment Data

Age -->		OVC Age Group					Household Member
		0-5	6-10	11-14	15-17	Total	
(1) OVC and, or Household Member enrolled from the previous reporting period	Male						
	Female						
	Total						
(2) Newly enrolled OVC, and or Household Members	Male						
	Female						
	Total						
(3) OVC and, or Household Members who have completed / exited from programme	Male						
	Female						
	Total						
(4) Currently enrolled OVC and, or Household Members = (1)+(2)-(3)	Male						
	Female						
	Total						

	By REASON	Re-Integrated	Migrated	Dead	Unknown	Other	Household Member
(5) OVC and, or Household Members who have completed / exited from programme, By Reason	Male						
	Female						
	Total						

Section 3:   Other

Comments and Remarks

Signature of Service Provider: _____ **Date:** _____

Signature of Supervisor: _____ **Date:** _____ _____

SCT 4: Training Record Form

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS
Intervention Area: Services to Orphans and Vulnerable Children

General Information

Purpose	To capture information about training events
	• the target population (Caregivers or Service Providers of OVCs)
	• 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	<u>National Summary Reports</u> • Number of OVC service providers / or caregivers trained - Orphans and Vulnerable Children (OVC1)

Instructions for Using This Form

Section 1

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

   • Name of the organization 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: Note: The target population refers to the specific group of persons that will benefit from this training. These target populations may include OVC Service Providers and Institutions.

   • 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
- organization
- 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 Training Organiser

National HIV Data Collection Tool

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: Mitigation of Social and Economic Impact of HIV and AIDS

Intervention Area: Services to Orphans and Vulnerable Children

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General Information	
Purpose	To facilitate the referral for services of an individual from one organization to another
Reporting period	Monthly or Quarterly
Who uses this form	OVC Service Provider who is referring a child for services, and an Officer at the receiving organization
Who verifies data	Field Supervisor / Regional Project Officers / Next Supervisory Officer
When form is used	The SCT 5 is used when OVC service provider determines that a child should be referred for services from another organization and when / if the child is served by the receiving organization.
Performance indicators using data from this form	As reported in National Summary Reports: • Number of OVC referred for other services - Orphans and Vulnerable Children (OVC1)

Instructions for Using This Form	

REFERRING ORGANIZATION Sections

| *Section 1 (Part 1)*

(Completed by the Organization <u>Making</u> the Referral) | 1. **Basic client information:** Enter basic identifying information about the individual who is being referred for service: Name, Age, Sex, Address, Date of the Referral

 2. **Name of referring organization**: Enter the name of the organization making the referral.

 3. **Name of the organization OVC is referred to**: Enter the name of the organization that will provide other / additional services to the child.

 4. **Services:** Tick (✓) the services that the child is being referred to receive at the other organization. Indicate "other" services, as appropriate.

 5. **Name and signatures of referring party:** The individual making the referral must provide his name and signature.

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

Section 2	**7.**	**Copy** the information *from Section 1 (Part 1) into Section 1 of Part 2*.
(Completed by Organization <u>Making</u> the Referral)		
	8.	**Detach** *Part 2* along the dotted lines.
	9.	*Part 2* of SCT 5 is given to the Child or Household Member of the Child being referred.

RECEIVING ORGANIZATION SECTIONS

Section 3

(Completed by Organization <u>Receiving</u> the Referral)

1. **Receiving Organization Information:** Enter the name, phone number, and address of the receiving organization.

2. **Services Provided:** Indicate the services provided in the appropriate rows and cells of the table. For each service, indicate:

   a. the name / type of service provided
   b. whether the services were completed as requested (yes / no)
   c. whether follow-up is needed (yes/no)
   d. 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:** Provide the name and signature of the individual providing the service(s).

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

National HIV Data Collection Tool

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	( )	167. Skills Training	( )
2. STI Treatment	( )	10. Welfare Assistance/LEAP	( )	18. Micro Credit Scheme	( )
3. HTC	( )	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/HIV	( )	14. Peer Counselling	( )	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

Part 2: To be Sent to Receiving Organisation

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

Client's name: ……………………………………………………………… 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. HTC	( )	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/HIV	( )	14. Peer Counseling	( )	22. HBV Screening	( )
7. SRH/FP	( )	15. NHIS	( )	23. HCV Screening	( )
8. PrEP	( )	16. Nutrition Support	( )	21. Other (Specify)……….	( )

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

Section 2: 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 Caregiver: …………………………………………………………. Title/Position: …………………………………………

DATA COLLECTION AND REPORTING PROCEDURES: OVC

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 OVC Service Area.

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

These data collection and reporting procedures describe:

- General information about the OVC 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.

Overview

Thematic Area: Mitigation of Social and Economic Impact of HIV and AIDS
Services to Orphans and Vulnerable Children

**Intervention
Area:**

**Target
Population
Service Types**

Orphans and Vulnerable Children (OVC)

- Food and Nutritional Support
- Shelter and Care
- Protection / Legal Support
- Psychosocial
- Health Care
- Education
- Cash Transfer

**Performance
Indicators**

<u>National Indicator Summary Report</u> (OVC 1)

1. Number of OVC and, or Household Members enrolled in
   programme

2. Number of OVC and, or Household Members who have
   completed/exited the OVC programme

3. Number of OVC and, or Household Members receiving support
   services

4. Number of OVC referred for other services

5. Number of OVC service providers/caregivers trained

<u>National M&E Plan</u>

- Number and percentage of orphaned and vulnerable children aged
  0-17 whose households received free basic external support in
  caring for the child

  *Note: this indicator is measured using data from the Department of
  Social Welfare (DSW). In the absence of data from DSW, the data
  from this report can be used as a proxy for this indicator.*

**Source
Documents:**

OVC 3   OVC Register
SCT 5   Two-Way Referral Form
SCT 4   Training Record Form

**Summary
Reports:**

OVC 2   OVC Support Summary Form
OVC 4   OVC Enrolment Summary
OVC 1   OVC Summary Indicator Form

Preparation of Source Documents

There is one OVC source document, as well as two Standard Common Tool source documents:

- **OVC Register (OVC 3)**: Registers and documents services provided to an individual child and, or household member by an OVC Service Provider. It is completed, one row at a time, when OVC services are provided to a child and, or household member.

- **Training Record Form (SCT 4)**: provides information about an OVC Service Provider Training event

- **Two-way Referral Form (SCT 5)**: facilitates the referral of OVC for additional services

OVC 3: OVC Register

	Who	What Activity	When	Result
1	Service Provider	Provides OVC services through one-on-one interactions in their homes or in institutions	Continuously	Services are provided to OVC and, or household members
2	Service Provider	Records information into OVC 3 about services provided to OVC and, or household members, using a new row for each time that services are provided	Continuously	Services are documented in OVC Register (OVC 3)
3	Field Supervisor	Reviews the recorded information to verify its completeness and accuracy	During monthly visits of Field Supervisor	OVC 3 entries have been verified by Field Supervisor

SCT 5: Two-way Referral Form

	Who	What Activity	When	Result
1	OVC Service Provider	Determines that OVC needs other services, and completes top portion of SCT 5 - Two-Way Referral Form	Continuously	Decision to refer OVC for other services
2	OVC Service Provider	Completes Part 1 and Section 1 of Part 2 and signs form	When referring OVC to other organization	SCT 5 is completed by referring organization
3	OVC Service Provider	May complete other SCT 5 forms, as needed, for additional services provided by other organizations	As needed	OVC has referrals for services from different organizations
4	OVC Service Provider	Detaches part 2 of SCT 5 form(s) and gives to OVC or Household Member of OVC	When referring OVC to other organization	OVC has referral for additional service(s)

	Who	What Activity	When	Result
5	OVC, Household Member and/or Referring Service Provider	Takes Part 2 of the completed SCT 5 form(s) to new organization(s) / service provider(s)	When seeking other services at new service delivery site	OVC is received by new service provider(s)
6	Service Provider(s) in receiving organization(s)	Receive(s) OVC, provide(s) appropriate services, and document(s) services provided in Section 2 of Part 2 of SCT 5, and signs it	During and after services are provided	Service(s) provided are recorded
7	Service Provider(s) in receiving organization(s)	Maintain(s) Part 2 of SCT 5 form(s) on file for use in monthly reporting on referral activity	After SCT 5 forms have been completed	SCT 5 forms are available for use in monthly reporting

SCT 4: Training Record Form

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

Aggregating Data for District, Regional, and National Reports

This Section describes the processes for aggregating the OVC source documents into three summary reports:

- **OVC Support Summary Form** (OVC 2) – aggregating data for services and referrals, by age group and, or sex.

- **OVC Enrolment Summary Form** (OVC 4) – aggregating enrolment data for OVC and, or household member, by age group and, or sex.

- **OVC Summary Indicator Form** (OVC 1) – aggregating data for number of OVC and, or household member enrolled, completed/exited, receiving support services, referred for other services; and number of OVC service providers trained.

The aggregation process takes places at several organisational levels:

- Service Delivery points
- Districts
- Regions
- National

The procedures for aggregating data for Services to OVC are described for each of these levels.

Community Aggregation and Reporting

Activity: Report number of OVC and, or household members receiving services from all Service Providers at the Service Delivery points, using the OVC Support Indicator Summary Form (OVC 1).

Forms / Reports Used
OVC 3 Registers (for each OVC served)
OVC 4 Enrolment Summary
OVC 2 Support Summary (for each Service provider)

Due Date: Monthly or Quarterly

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Field Supervisor / Institutional Coordinator	Gathers completed OVC 3 Registers for all OVC and, or household members served by all Service Providers in reporting period.	OVC 3 Registers	Service Registers for individual OVC and, or household members, served by all Service Providers, are available for aggregation
2	Field Supervisor / Institutional Coordinator	Aggregates services and referrals data from OVC 3 Registers, for all Service Providers, to Support Summaries (OVC 2), one for each Service Provider	OVC 3 Registers OVC 2 – Support Summary Form	All service and referral data for individual Service Providers are recorded on **OVC 2-Support Summary Forms**

	Who	What Activity	Summary Report(s), Forms Used	Result
3	Field Supervisor / Institutional Coordinator	Aggregates enrolment data from OVC Registers (OVC 3) and transfers totals to an Enrolment Summary (OVC 4).	OVC 3 Registers OVC 4 - Enrolment Summary	Completed **OVC 4**, with aggregated enrolment data
4	Field Supervisor / Institutional Coordinator	Aggregates services data from all completed Support Summaries (OVC 2) and transfers totals to the Summary Indicator Form (OVC 1).	OVC 2 - Support Summary OVC 1 – Indicator Summary Form	Aggregated services data for all Service Providers are recorded in **OVC 1**
5	Field Supervisor / Institutional Coordinator	Aggregates referrals data from all Two-way Referral Forms (SCT 5) and transfers total to the Summary Indicator Form (OVC1)	SCT 5 - Two-Way Referral Forms OVC 1 – Indicator Summary Form	Aggregated referrals data for all Service Providers are recorded in **OVC 1**
6	Field Supervisor / Institutional Coordinator	Transfers enrolment data from Enrolment Summary (OVC 4) to Summary Indicator Form (OVC 1).	OVC 4 - Enrolment Summary OVC 1 – Indicator Summary Form	Aggregated enrolment data for all Service Providers are recorded in **OVC 1**
7	Field Supervisor / Institutional Coordinator	Aggregate service providers training SCT 4 - Training Report Form and transfer to Summary Indicator Form (OVC 1).	SCT 4 - Training Report Form OVC 1 – Indicator Summary Form	Aggregated training data recorded in **OVC 1**
8	Field Supervisor / Institutional Coordinator	Send completed OVC 1 to next level for aggregation and file copy	OVC 1 - Summary Indicator Forms	Completed OVC 1 is sent to next level for aggregation and copy filed

District Aggregation and Reporting

Activities:
1. Report all services and referrals on the OVC 1 - Summary Indicator Form (District)
2. Report all training activities on the OVC 1 - Summary Indicator Form (District)

Forms / Reports Used   Summary Indicator Forms (OVC 1), one for each service provider

Due Date: Monthly or Quarterly, 5 days after end of month or quarter

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Field Supervisor / Coordinator	Collects OVC 1 - Summary Indicator Forms from all Service Providers/Institutions in the reporting month or quarter	OVC 1 - Support Summary Report	All OVC 1 for district aggregation are available
2	Field Supervisor / Coordinator	Conducts a final quality review of all OVC 1 for completeness and accuracy in calculations	OVC 1 - Support Summary Report	Verified data for aggregation at District Level
3	Field Supervisor / Coordinator	Aggregates OVC 1 Summaries from all Service Providers into a District-level OVC 1	Service Provider OVC 1 Summary Forms	District-level OVC 1 completed
4	Field Supervisor / Coordinator	Makes copies of District-level OVC 1 Summary Form. Transmits original to Regional level, with a copy to District HIV Focal Person. Additional copy is filed for future reference.	District OVC 1 Summary Form	District Level OVC 1 Report is submitted to regional level and District Focal Person. Copy available for reference
5	Field Supervisor / Coordinator	Analyses monthly results for OVC services	District level IP Summary Indicator Reports	Data are analyzed for trends and key findings at district levels
6	Field Supervisor / Coordinator	Provides feedback to Field Supervisors at Service Delivery level	District Level Reports	Feedback provided by District level M&E to service delivery point at district

Regional Aggregation and Reporting

Activity:　　　　Report all OVC services, referrals, and training activities for the region by combining all District OVC 1 reports into a regional OVC 1 Report

Forms Used:　　　District OVC 1 Summary Indicator Report

Due Date:　　　　Monthly or Quarterly, 10 days after end of month or quarter

	Who	What Activity	Summary Report(s), Forms Used	Result
1	Regional Coordinator / Program Officer	Collects and review District OVC 1 reports completed for the quarter	All District OVC 1 Reports	District OVC 1 Reports available for regional aggregation
2	Regional Coordinator / Program Officer	Aggregates data from all District OVC 1 reports to a new OVC 1 for the region	District OVC 1 reports; new Regional OVC 1 report	Completed Regional OVC 1 , with aggregated data from all District OVC 1 reports
3	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
4	Field Supervisor / Coordinator	Makes copies of Regional OVC 1 Summary Form. Transmits original to National IP, with a copy to Regional HIV M&E Focal Person / TSU. Additional copy is filed for future reference.	Regional OVC 1 Summary Form	Regional Level OVC 1 Report is submitted to national level and regional Focal Person. Copy available for reference
5	Regional Coordinator / Program Officer	Provide feedback to Field Supervisors at District level	District Level Reports	Feedback provided by Regional level M&E to District Field Supervisors

National Aggregation and Reporting: Implementing Partners

Activity: Report all OVC services, referrals, and training activities in a national OVC 1 Summary Indicator Form for the Implementing Partner

Forms Used: Regional OVC 1 Summary Indicator Forms

Due Date: Quarterly, 15 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 (OVC 1)	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 (OVC 1), 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 (OVC 1)	National Level IP Reports (OVC 1)	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 OVC services	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 (assisted by Data Officers)	Aggregated national IP data are submitted to Ghana AIDS Commission	National Level IP Reports (OVC 1)	Ghana AIDS Commission receives National IP Reports
7	IP National M&E Officer	Provides feedback to Regional Coordinator / Program Officer on District and Regional-level reports submitted	Regional Level Reports (OVC 1), with supporting District reports	Feedback provided by National level M&E to regional level M&E

National Aggregation and Reporting: Ghana AIDS Commission

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

Forms Used: OVC 1 Summary Indicator Report from National level 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 OVC services. Summary reports are transferred to Director RM&E	National Level IP Summary Indicator Reports (OVC 1)	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 (OVC 1)	National IP Summary Indicator Reports are reviewed for quality
3	Data Management Officer	Approved national-level IP Summary Indicator Reports are validated against data entered into CRIS, recording any errors in error log	National Level IP Summary Indicator Reports (OVC 1)	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 (OVC 1)	Hard copy National IP Reports are filed and available for reference
5	Data Quality Assurance Manager	Applies quality checks to submitted data	CRIS database	CRIS data is quality assured
6	Data Manager	Analyses quarterly results for OVC services provided	CRIS database	Data are analysed for trends and key findings
7	Data Quality Assurance Manager	Provides feedback to all national IP M&E Officers on submitted reports	National IP Summary Indicator Reports (OVC 1)	Feedback provided by National level GAC to national level IPs