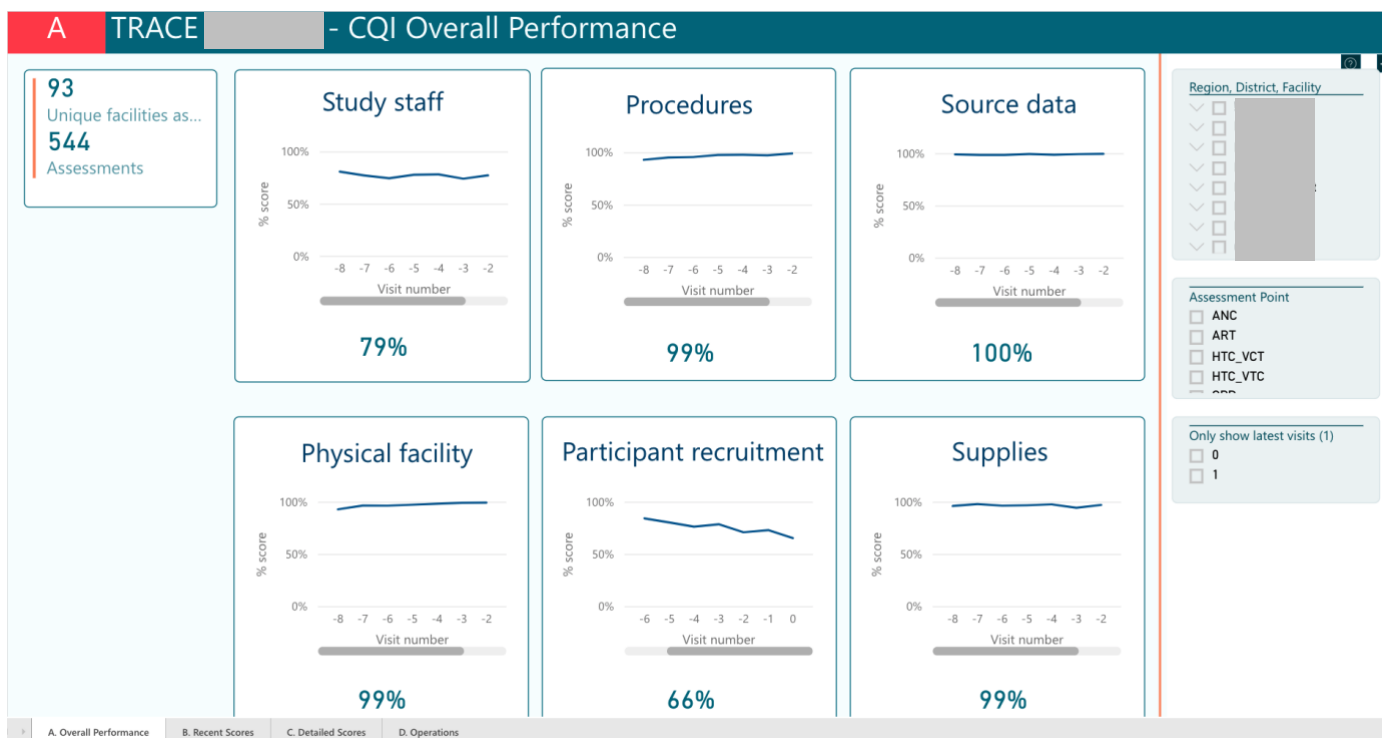


Standard Operating Procedures

Data Use: Using the CQI Dashboard

1. **Brief:** This document is intended for internal use by the CQI officers and routine HTS and recent HIV infection surveillance program teams. It outlines important procedures and information related to making efficient use of the Recency Continuous Quality Improvement (CQI) dashboard. This document will assist the CQI officers and program team in the use of recency CQI data from the dashboard.
2. The **purpose** of the recency CQI dashboard is to view Open Data Kit (ODK) CQI checklist form submissions that were completed during routine CQI visits at sites implementing recency testing. One is able to view all the data that has been submitted by the ODK checklist form to the recency CQI database. To access the CQI dashboard, log into **[insert country specific log-in details]**.
3. **Overall Performance of the 6 Components of the Site Monitoring Checklist:** At the bottom of the page you will see four tabs: overall performance; recent scores; detailed scores; and operations. Overall performance displays findings from the six core components of the site monitoring checklist: Study Staff; Procedures; Source Data; Physical Facility; Participant Recruitment; and Supplies. This page also highlights scores over time, with “0” being the most recent visit and “-1” is the visit prior, “-2” is two visits prior, “-3” is three visits prior, and so on. On the right hand side of the page you can filter by region, district, and facility; assessment point; and latest visits. To see data from the latest visits at a particular facility, select “0” on the filter. The most recent visit scores are also highlighted in the percentages for each of the six categories (e.g. 79% is the latest score for staff staff). See figure below.



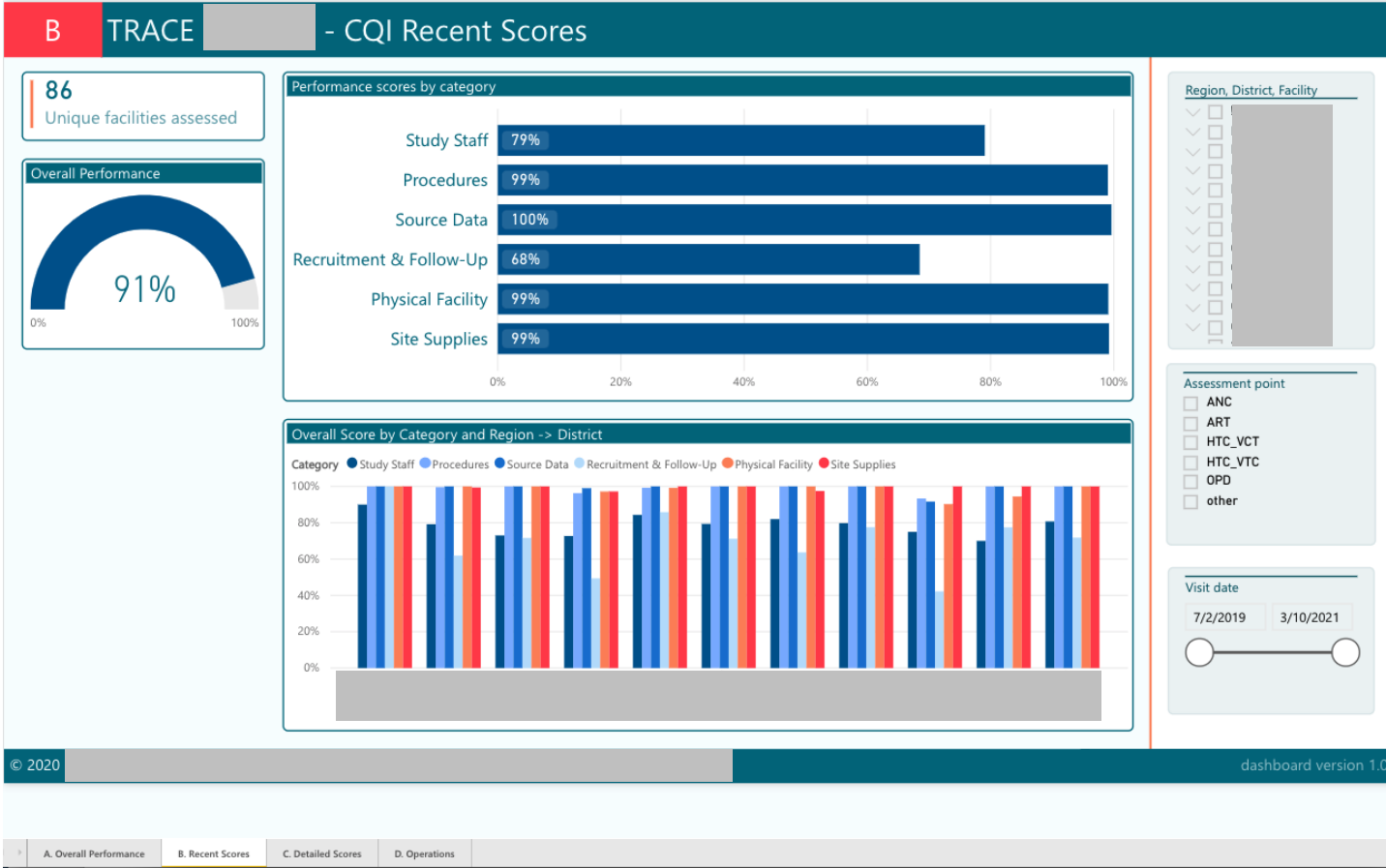
4. Data Use for the six Components

- A. Study Staff:** Data on study staff can be used for decision-making about recency staff training and adherence to enrollment protocols. Data can provide you with an understanding of the number of counselors available, the number trained, and the extent to which staff are adhering to protocols to enroll eligible clients in recency testing. These data can assist QI staff to assess the need for increasing the number of staff, the need for supplemental refresher training(s) on recency, and the need for capacity building around adherence to protocols with regard to eligibility and consent.
- B. Procedures:** Data on procedures can be used for decision-making about the presence and used of SOPs and job aids at facilities implementing recency testing. Data can provide you with an understanding of the proper procedures and support tools that are needed for adherence to recency protocols. These data can assist QI staff in the identification of capacity building needs around the presence and use of SOPs and job aids, the need for additional support aids and potential need for training on specific SOPs and job aids to improve the quality of recency testing. This section is meant to capture when there are quality issues with the actual testing procedures and following the steps of RTRI testing.
- C. Source Data:** Information on source data can be used for decision-making about the presence and proper use of record keeping on recency testing. Data can provide you with an understanding of the status and accuracy of

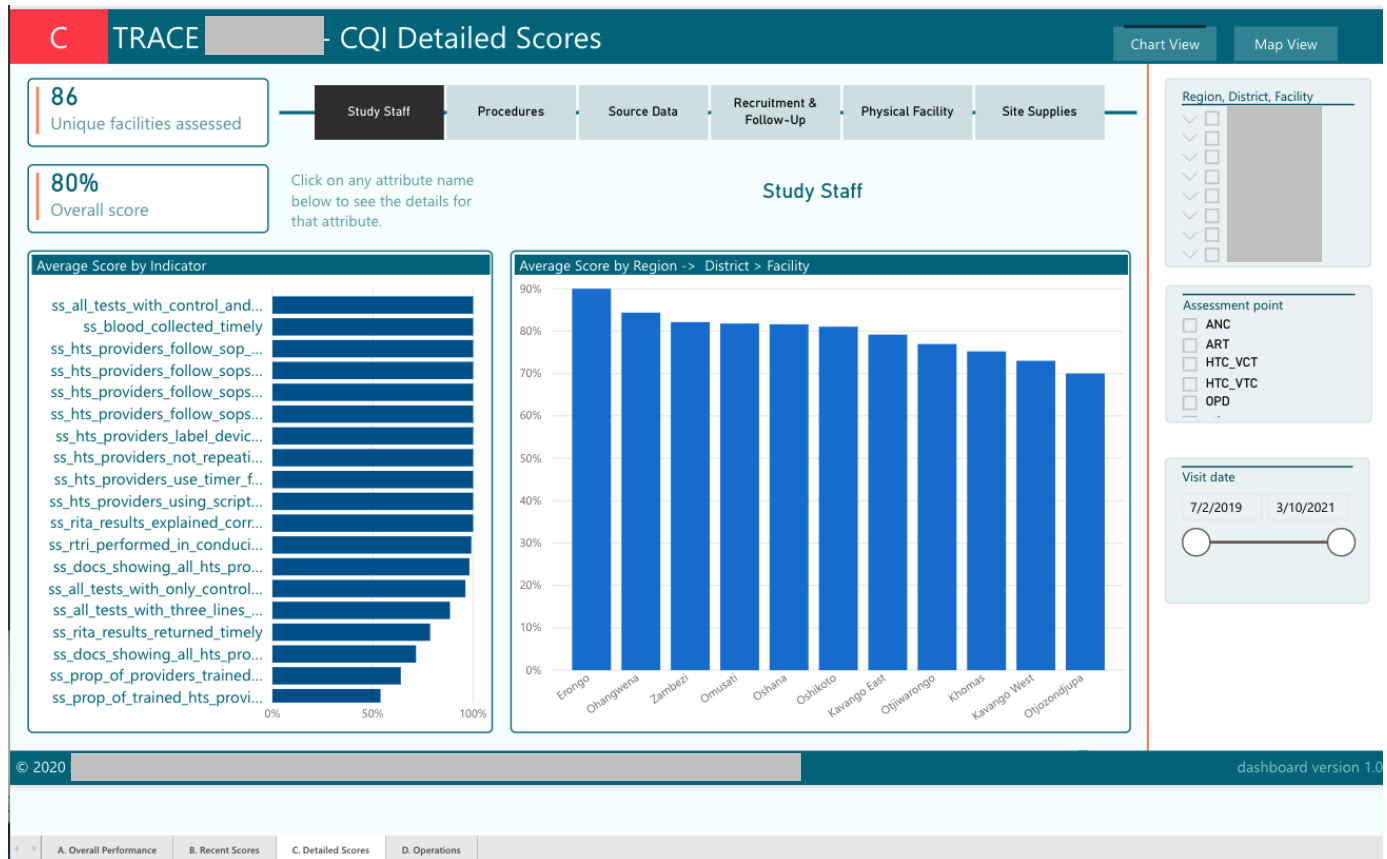
record keeping. These data can assist QI staff in assessing the need for additional record keeping supplies (registers, forms, log books) and in assessing the need for additional capacity building around the proper use of these records in terms of completeness and accuracy.

- D. Physical Facility:** Data on physical facility can be used for decision-making about the physical components of healthcare facilities needed for high-quality recency testing. Data can provide you with information on the physical environment in which recency testing procedures take place. These data can assist QI staff in the determination of needs for the facility's physical improvements, with regard to a temperature-controlled environment to store test kits, requirements for biosafety, safe storage of patient-level information, and the extent to which electronic tools are password-protected. Determinations can be made about the need for training, mentoring, or job aids needed in these areas.
- E. Participant Recruitment and Follow up Data:** Data on participant recruitment and follow-up data can be used for decision-making about the processes and procedures used for these activities. Data can provide you with information on the extent to which proper rules are followed with respect to adherence to HTS standards and guidelines. These data can assist QI staff in the assessment of capacity building needs around correct requirements for clients participating in recency testing and surveillance (age and HIV status), presence of information on consent and number of people with recency results.
- F. Site Supplies:** Data on site supplies can be used for decision-making about the availability of reporting forms, lab consumables and test kits for recency testing and surveillance. Data can provide you with information on the presence and correct use of site supplies. These can assist QI staff with necessary information on availability of RTRI tests, lab requisition forms, specimen tracking logs and testing log books at the service delivery point. QI staff can assess the need for additional supplies and the possible capacity building needs around the use of supplies in terms of training, mentoring or use of job aids.

- 5. Recent Scores:** The second tab on the dashboard is for recent scores. This tab provides the scores from the most recent visits to facilities implementing recency testing for the six site level monitoring components. On the right, you will see filters for region, district, and facility; assessment point; and visit date. On the left, you will see the number of facilities assessed and the overall performance score. This tab allows for the assessment of performance by geographic and site level areas. See above data use section for use of data for decision-making for the six components. See below for screenshot of the tab. The overall score by category and region may also guide CQI teams to better know which geographic areas, types of facilities, etc. to target for future CQI visits if resources are limited.



6. Detailed Scores: The third tab on the dashboard provides data on detailed performance scores. This tab provides you with information on overall performance scores sorted by component and the number of unique facilities assessed (at the top of the screen). On the right side of the screen you will see filters for regional, district and facility levels; assessment point and visit date. In the middle of the screen you will see data displayed on average score of each component sorted by region, district and facility. As with the Recent Scores tab, this information provides the CQI officer with the capacity to assess performance across component and by geographic region and site levels. See above data use section for use of data for decision making for the six components. On the left side of the screen you will see a breakdown of the average score by indicator. This provides the CQI officer with information to assess performance by component matched with performance by indicator to enable a more detailed assessment of performance. See below screenshot:

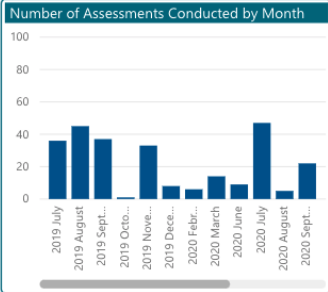


7. Operations: The fourth and final tab of the dashboard provides information of CQI. Operations. On the row in the middle, you will see number of CQI assessments conducted by month and facility, district and visit date. On the bottom row in the middle you will see performance score by indicator (from the site monitoring checklist). On the right you will see the filters for region, district site; assessment point; latest visits; and visit date. On the left you will see number of unique facilities assessed and the total number of assessments. This information can be used to identify locations where assessments have and have not been conducted to allow for a strategic targeting of geographic regions and site levels for CQI assessments by number, visit date and site monitoring indicator. This allows for a detailed picture of which specific indicators need to be flagged for follow up. See below for screenshot:

D TRACE CQI Operations

View as matrix View as rows

86
Unique facilities assessed
515
Assessments



Assessments conducted

Facility	District	Visit number	Visit date	Asses...
		3	Wednesday, February 17, 2021	HTC...
		1	Friday, September 18, 2020	HTC...
		5	Friday, November 13, 2020	HTC...
		22	Friday, March 5, 2021	HTC...
		1	Monday, July 22, 2019	HTC...
		2	Tuesday, August 20, 2019	HTC...
		3	Monday, September 16, 2019	HTC...
		4	Tuesday, November 19, 2019	HTC...
		5	Wednesday, March 4, 2020	HTC...
		6	Tuesday, July 28, 2020	HTC...
		7	Monday, October 5, 2020	HTC...
		8	Wednesday, February 24, 2021	HTC...

Performance scores and indicator

Category	Indicator
Study Staff	% of HTS providers attended a qc training
Study Staff	% of HTS providers attended a recency training
Study Staff	Are all tests with all three lines marked as Long-term?
Study Staff	Are all tests with control line (C) + positive verification line (V) marked as Recent?
Study Staff	Are all tests with control line absent OR control line and long-term line present without verification line marked as Invalid?
Study Staff	Are all tests with only control line marked as Negative?
Study Staff	Are counselors observed following protocol SOPs for confirming new diagnosis?
Study Staff	Are counselors observed following protocol SOPs for eligibility, testing and counseling?
Study Staff	Are HTS providers accurately using a timer for recency tests?
Study Staff	Are HTS providers correctly labeling of test devices with client identifiers?
Study Staff	Are HTS providers following the SOP for performing recency tests?
Study Staff	Are HTS providers not repeating testing of invalid recency tests?
Study Staff	Are observed counselors following protocol SOPs for data entry?
Study Staff	Are observed counselors using scripts for return of results?
Study Staff	Are RITA results explained correctly?

region_name, district_na...

assessment_point

- ANC
- ART
- HTC_VCT
- HTC_VTC
- ODD

Only show latest visits (1)

0

1

Visit date

7/2/2019 3/10/2021