

**Voluntary Medical Male Circumcision (VMMC)  
Review  
External Quality Assurance (EQA)**

**Tool D – Client Record**

**Site Name:** \_\_\_\_\_ **Reviewer's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This Tool (D) is used to verify the maintenance of clinic records.

**Reviewer Guidance:**

If the site uses a sequential method for numbering charts, use chart numbers rather than physical charts to follow the below directions for choosing charts to review. For example, if charts 1-100 are eligible for review, look for every 4<sup>th</sup> chart number to choose 25 charts. This will give you the opportunity to determine whether some charts are missing. If a chart number is missing, write "MISSING" across its row on the tool.

A systematic sample of client records will be reviewed with 25 being the target number of records reviewed. Some of the SIMS questions at the end of this tool only require reviewing 10 of these charts; this is indicated in the question where applicable.

- If the site changed its record forms longer than 3 months ago, modify the instructions below to restrict your sampling to records filled since the change.
- If this is the first EQA visit to this site: Determine (consult with staff) the number of MCs that have been performed at the site after the beginning of VMMC program, but at least 3 weeks prior to the date of the site visit (to allow time for clients' post-operative follow up visits after procedure.)
  - Divide the number of MCs performed by 25 to calculate the sampling interval, N.
  - Request that staff pull every N<sup>th</sup> client record for review.
- If this is a repeat EQA visit to this site: Determine (consult with staff) the number of MCs that have been performed at the site after the last EQA visit to this site, but again at least 3 weeks prior to the date of the site visit. Divide the number of VMMCs performed by 25 to calculate the sampling interval, N.
  - Request that staff pull every N<sup>th</sup> client record for review.
- If the site has performed fewer than 25 circumcisions in the target period, then review all available records.

**If the site is also implementing ShangRing, review an additional 15 records specific to each device offered on site.** If the site has performed fewer than 15 device-based VMMCs, then review all available device records. Consider printing additional copies of tool D to allow for review of records for up to 25 surgical and 15 device-based VMMCs.

Provide comments for any patterns of missing content (for example: no place on client form for cadre of surgeon) and for any section left blank.

Please fill out the SIMS questions included below, regardless of whether this visit counts as a SIMS visit. They capture unique information that should be included in this quality assessment.

**These items need to be directly observed by the reviewer**

D1. Type of site (check one)	Fixed		D2. Type of service delivery observed TODAY (check one):	Regular	
	Mobile/ Outreach			Campaign	
D3. Are VMMC client records stored on site	Yes	D4. If YES, are client records stored in a secure area	Yes	D5. If YES, are client records filed in a manner that facilitates easy searching by name or date of service	Yes
	No		No		No
D6. Has the site changed record forms during the last 3 months	Yes	D7. What is the range of dates selected for the client record review	From:		
	No		To:		
D8. What is the national age of consent for VMMC?		D9. Explain why this range of dates (in C7) was selected:			

**Client Records**

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
D10. Age	In Years																									
	No Documentation																									
D11. What is the result of the client's documented HIV test? Documentation may include HIV test results provided outside the VMMC site.	Negative																									
	Positive																									
	Indeterminate																									
	No documentation																									
	Testing not done																									









**Additional Comments/Notes:**