

Development of Tools for Monitoring & Reporting VMMC Program Indicators

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1. Assessment of VMMC Data Tools

2. Sample Paper Data Collection Tools

3. VMMC Health Information System





Assessment of VMMC Data Tools





Background

- While VMMC is being scaled up to support HIV prevention, standardized clinical forms are not yet available
- Ministries of Health, Defence & implementing partners are using a variety of forms
- A review of existing forms and systems is necessary to inform development of standardized forms and reporting processes





Assessment: Goal & Objectives

- To inventory data tools currently being used to support VMMC program implementation in PEPFAR-supported countries
- Objectives
 - Collect data tools from PEPFAR implementing partners
 - Comparing MC client record and adverse event forms
 - Identifying best practices in MC data use for sharing across other country programs



Methods

- Develop standardized survey instrument
- Invited PEPFAR coordinators in countries supporting MC to request implementing partner participation
- Survey administered through phone interviews averaging 30-60 minutes during March-June 2011
 - Interview respondents were MC focal points from implementing partners (IPs) & USG agencies
 - Copies of clinical forms and reporting tools requested



Analysis of Interview Responses & Data Tools

- 28 respondents from 12 organizations across 7 countries
- 57 clinical MC data tools received
- 29 MC & HTC reporting forms received
- Performed a comparative analysis of data fields from MC client record forms
- Built data dictionary (reviewed by physicians & TWGs)
- Adverse Event Forms used the WHO format



Findings

- A variety of different data tools and forms being used
- Data fields vary considerably between implementers
- Organizations are reporting to at least 3 different types of institutions: implementing partner HQ, USG, MoH
- Respondents reported that an electronic database would facilitate data collection, help fulfill various reporting requirements & track the continuum of care
 - Some Implementers using electronic systems now
 - USG agencies endorse electronic database to improve data quality
 - Interest by MoH, but need capacity building & infrastructure



Action Steps

- Build a standard database for the minimal datasets required by all VMMC programs for facility, partner, national, and donor reporting requirements
 - Provide standard paper forms & processes
 - VMMC Health Information System
- Work with military programs to build capacity by providing training on data tools, use & processes



Sample Paper Data Collection Tools





Registration Form

		Reg	sistration F	orm			
Date:	DD/MM/	YYYY	Unique ID:				
Registration Locat	ion:						
Client Details							
First Name				Date of Birth:	DD/MM	Y Y Y Y N	
Middle Name				Gender:	Male	Female	
Surname				Phone No.			
Home Address:							
Current Physical A	ddress (<i>Military</i>):						
Next-Of-Kin							
First Name				Home Address:			
Middle Name				Relationship:			
Surname				Phone No:			
Marital Status				Education			
Currently Ma	rried	Currently col	habitating	Primary		College/University	



Education Attendance Sheet

	Education Atten	dance Sheet			Pa	ige of	ř,
Date of Education Session:	MM/YYY	Topic:					
ocation/Venue:		Organizatio	on:				
ducator Name:	Educator Unique ID:		Gender	Age,	in years (check one)	14
Surname	First Name	Unique ID	Male Female	1-9 10-14	15-19 20-24	25-34 35-49	50+ Civilian
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Education Event Summary Report

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	Education Even	nt Summary Report				
Date of Education	Session: DD/MM/YY	Y . Y	Start Time:		1	
Location/Venue:			End Time:			
Educator Information	on					
First Name		Unique ID:				
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Surgery/Immediate Post-Op Form

8 / 17			Comment
	Surgery and Immedia	te Post-Operative Form	
Client Surname:		Client First Name:	
Client Date of Birth:	DD/MM/YYYY	Client Unique ID:	
Date of MC:	DD/MM/YYYY		
Surgery Notes		Immediate Post-Op Notes	
Location of Surgery:		Blood pressure:	
Start Time:	H H : M M AM/PM	Pulse: Temperature:	
Anesthesia:	Marcaine 0.5% . mL	Adverse events observed? Yes	No
	Lignocaine 1% . mL	If yes, specify type and degree of severity	below:
	Lignocaine 2%	Adverse Event Mild Mo	oderate Sever
DBNP	DBNP + ring block	AN Anaesthesia reaction	
Procedure used:	Sleeve	BL Bleeding	
	Dorsal Slit	Damage to Penis	
	Forceps Guided	ES Excessive Skin Removed N/A	



VMMC Health Information System





VMMC Health Information System

• Primary audience: Military VMMC programs

- Objectives
 - eHealth Solution to support VMMC M&E reporting
 - HIS based on informatics/engineering standards
 - Training of HIS and ICT skills
 - Implement VMMC HIS



eHealth Solution

- Designed for partner militaries
 - Total cost of ownership \$200 USD/year/user
 - Enterprise Architecture based ICT standards
 - Military "Signal" Corps support & maintain
- Mobile User Device
 - Ruggedized netbook computer
 - Wireless or wired network
 - Touch screen, camera, audio, 10-12 hour battery
- Software packages on mobile device for field use
 - Electronic Medical Record
 - Office, Email, Internet/Web, Skype, etc.
 - Anti-virus, data storage & backup





Login Screen

Mokolodi Client - v.1.0.0.148 (Offline)		- a x
Botswana Defence Fo	rce SMC Application	dave test Refresh Close
	Please enter your login information below. User ID: Password: Login	
Vista Automatica Sciences		▲ I III III III IIII IIII IIIIIIIIIIII
		9/1//2012



Patient Registration

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Patient Registratio	n Scheduling Co	unseling Testir	ng Med History Phys	sical Exam Surgery/Post-Op	Follow-up Patient Search User Adn
Personal Info Em	ergency/Guardian C	ontact Employ	ment Info Military In	fo	
First Name	dave	OMANG ID	12345		Save 🚽
Second Name		Surname	test		
Permanent Address					Close
					Next 📄
Current Physical					
Address					Prev.
District	Please Select		•		
	1 MIL. Garrison		÷	Add Location	
Phone No.	3335557777	Gender	Please Select	*	
Cell No.		Education	Please Select	*	
Date Of Birth	03/01/2011 *	Marital Status	Please Select		



.ifeSciences

HIV Testing

		rce SMC Application					dave test	Refresh Clos
	on Scheduling	ts Reporting Help Counseling Testing	Med History	Physical Exam	Surgery/Post-Op	Follow-up	Patient Search	User Admi
Risk Assessment	Testing History		Date: Testing OYes ONc	17/09/2012 •	New 🎦 Save 🛃			
© Docu © Unki © Self-	ecent test 17/09/ eceived umented HIV posit umented HIV nega nown HIV status/re reported HIV nega	tive result from other HT ative result from other HT	FC provider st (HIV status no		Close 💥			

W

Ps





Physical Exam

Botswana Defence Force SMC Applicat	ion	dave	e test Refresh Close
Application Counseling Patients Reporting He Patient Registration Scheduling Counseling Testin Provider: Please Select Physical Exam Genital Exam Examination of penis: Normal O Abnormal If abnormal, specify below: Phimosis OYes O No Ulcers Paraphimosis OYes O No Balanitis Episadias OYes O No Torsion		Surgery/Post-Op Follow-up Patient S New P Save Close **	
Hypospadias O Yes O No Irrectractable foreskin Did patient have previous circumcision? O Yes O No If yes, specify grade: Please Select	○Yes ○No		



Surgery Notes



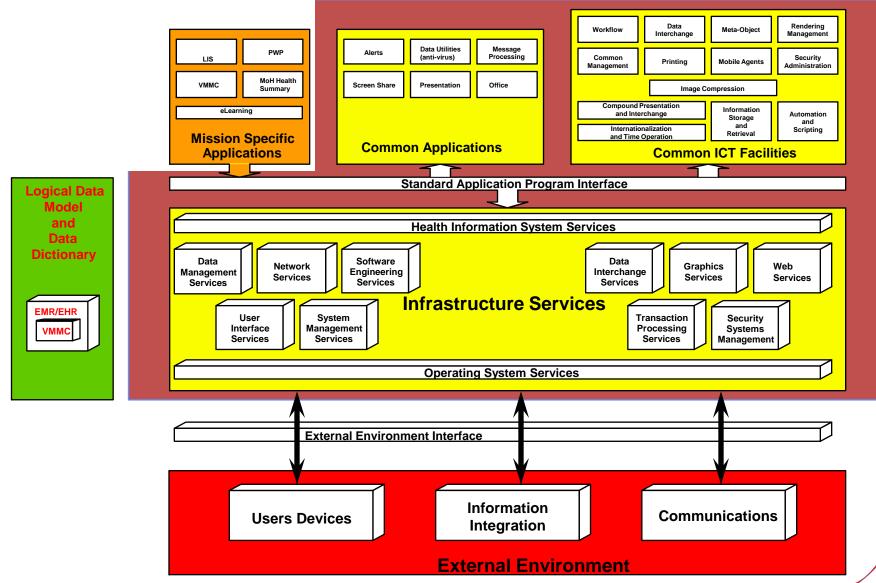


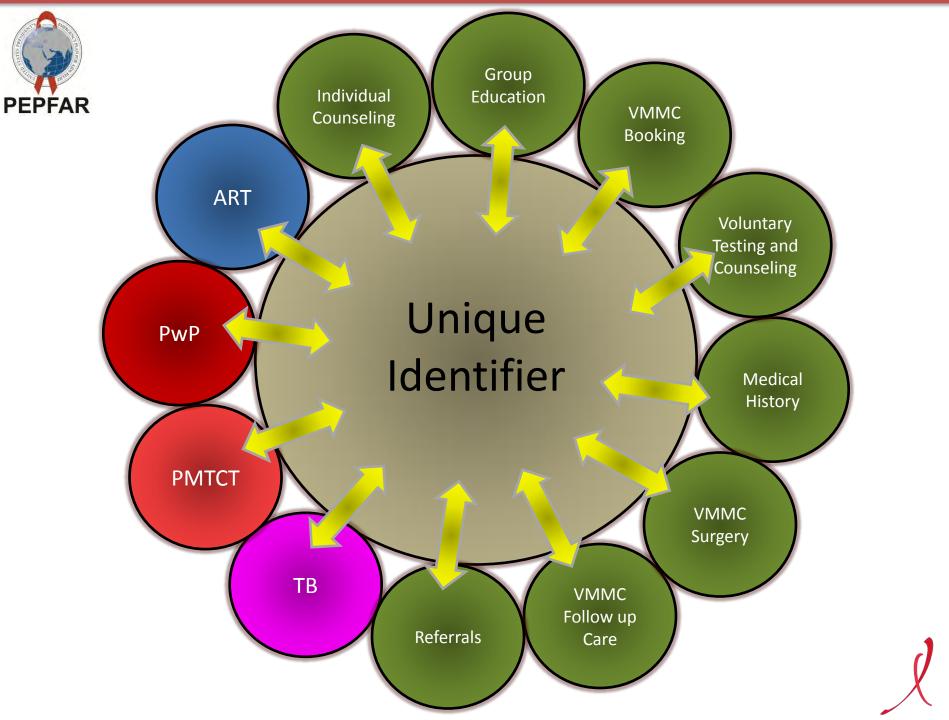
Reports

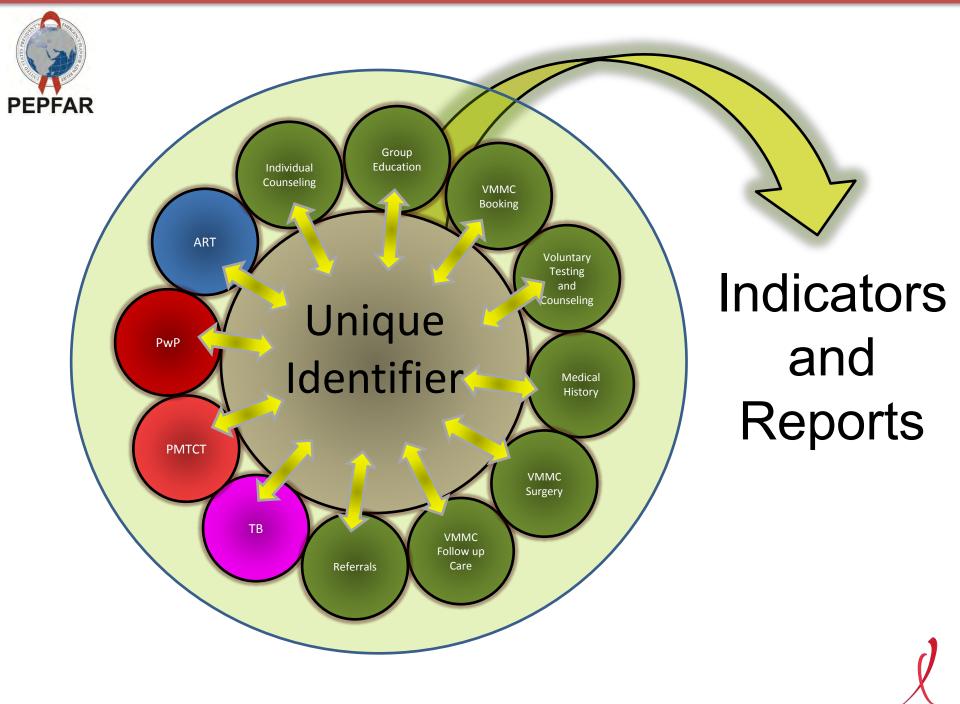
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MOH Rep	ort Pa	tient Reg	gistrati	on	Schedu	uling	Cou	nseling	, Te	sting	Med H	listory Physica	al Exam Sur	gery/Post-C	Dp Follow-	up Patient Sea
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	Age Group	Anaes			e sev – se Sleeding		Haemato	ma	Infec	tion						



Enterprise Architecture Approach









Sexual and Other Risk Prevention

 Number of targeted population reached with individual and/or small group level prevention based on evidence and/or meet the minimum standards

• P8.1.D

HIV Counseling and Testing (T&C)

- Number of individuals who received T&C services for HIV & received their test results
- By sex
- By age category
- By test result
- By type: individual/ couple
- P11.1.D

<u>VMMC</u>

- Number of
 VMMC
 - By Age
 - By HIV status
- Number AE
 - By Severity
- Number of MC Locations
- Proportion of males circumcised

• P5.1.D + others

<u>HSS</u>

- Number of healthcare workers trained
- By Type: Male Circumcision Training/ Pediatric Treatment

• H2.3.D

Training

Post Exposure Prophylaxis

- Number of persons provided with postexposure prophylaxis (PEP)
- By exposure type

• P6.1.D



PEPFAR VMMC Indicators

 Number of males circumcised as part of the minimum package of MC for HIV prevention services

- By Age: <1; 1-9; 10-14; 15-19; 20-24; 25-49; 50+

- Number of circumcised clients experiencing at least one moderate or severe adverse event (AE) during or following surgery
- Number of locations providing MC surgery as part of the minimum package of MC for HIV prevention services
- Number of males circumcised who return at least once for postoperative follow-up care (routine or emergent) within 14 days of surgery
- Number of healthcare workers who successfully completed an inservice training program
 - By MC Training and Pediatric Treatment Training





Training

- M&E
- HIS
- Basic & advanced computer skills
- Data use & reporting
- 47 peer educators, nurses, counselors, physicians, HIV coordinators trained
- 2 ICT Signal Corps trained









Botswana Defence Force Implementation







Summary

• Sample paper data collection tools available

- Implementation of HIS system in partner military programs to satisfy various reporting requirements
 - Plans to implement in 12 countries
 - Demo of the system





Thank You!

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