

Additional file 1: Health Worker Engagement Assessment Tool (English)

Background:

The purpose of this questionnaire is to examine factors that affect your work. Data from this study will be collected, held, analyzed, used for improvement purposes by MOH and other partners. The findings from this assessment will help inform activities to improve the work environments, management and working conditions of those providing HIV services.

This is an anonymous and confidential questionnaire. You will not be identifiable and individual responses will not be published.

Instructions:

Thank you for agreeing to complete this questionnaire. Please answer all the questions in full. If you have questions about any of the items, please ask the data collector. Please hand the completed questionnaire to the data collector when you have finished.

Thank you for your time.

SECTION A

This section collects background information about you and your work situation.

1. Gender: A. Male B. Female

2. Age:.....Years

2. What is your position at this facility? *Please tick one (The category of position may vary according to the type of cadres available)*

A. Clinical officer

E. Nursing Officer

I. Pharmacist

B. Physician

F. Assistant nursing officer

J. Pharmacy technician

C. Assistant medical officer (AMO)

G. Public health nurse

K. Laboratory technician

D. Medical officer

H. Nurse Midwife

L. Medical attendant

M. Other (*specify*):.....

3. How many years have you worked in providing health services? Year(s)

4. How long have you worked at this facility? Year(s)(*Adapt according to the country context*)

4b. Facility type:

A. Public national hospital

G. FBO health center

B. Public regional hospital

H. FBO dispensary

C. Public district hospital

J. Private hospital

D. Public health center

K. Private health center

E. Public dispensary

L. Private dispensary

F. FBO hospital

M. Other (describe).....

5. Is there a quality improvement team that meets regularly in your workplace? (if no skip to number 11)

A. Yes

B. No

C. Don't know

5a. IF YES, are you a member of the quality improvement team?

A. Yes

B. No

6. Is there a system in your facility to monitor performance indicators on a regular basis?

A. Yes

B. No

C. Don't know

7. Is there a process for implementing suggested improvements at your workplace?

A. Yes

B. No

C. Don't know

8. Do you intend to change your job within the next two years?

A. Yes

B. No

C. Unsure

8a. IF YES, do you plan to:

- Leave this facility? A. Yes B. No C. Unsure

- Leave the public sector? A. Yes B. No C. Unsure

- Leave your profession? A. Yes B. No C. Unsure

- Migrate abroad? A. Yes B. No C. Unsure

8b. Have you applied for another position within the past 6 months? A. Yes B. No

SECTION B

This section collects information about your perceptions about your work. Please read each statement carefully and tick one option which most appropriately reflects your response.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
9. I can interact easily with my coworkers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I believe that all clients deserve to be treated respectfully.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
11. I do not think that my clients trust me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I am known by my coworkers for my reliability.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I am proud to be part of this facility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. I believe that the clients' privacy is not important.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. I find it difficult to have empathy for clients to whom I provide services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I prefer to give the same quality of care to all clients rather than better care to a few.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I feel happy with the work that I do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I believe that my male and female patients deserve my equal attention.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I don't think there is anything wrong with asking clients for a small token before providing services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION C

This section collects information about the way you approach your work. Please read each statement carefully and tick one option which most appropriately reflects your response.

	Always	Most of the time	Sometimes	Rarely	Never
20. The goals of my job are very clear to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I suggest solutions when discussing challenges with my coworkers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I evaluate my own work performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. I help my coworkers to learn new skills.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. When I learn new skills, I apply them in my workplace.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I complete my tasks on time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I stay on the job until I complete my tasks.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. I start at work early.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I encourage my colleagues to discuss challenges together.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Alwa ys	Most of the time	Sometimes	Rarely	Never
29. I give feedback to my coworkers on their performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION D

This section collects information about your perceptions about your job and workplace. Please read each statement carefully and tick one option which most appropriately reflects your response. (This section asks about factors that may influence an individual's engagement, they are optional and may not be necessary to include.)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
30. I have the knowledge I need to do my job well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. We have adequate infrastructure in this facility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. The number of employees in this facility is adequate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. I have the skills I need to do my job well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. We have adequate equipment in this facility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I receive feedback from my immediate supervisor when I make mistakes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. The salary I get is enough for my basic needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION E

This section collects information about your experiences at your workplace. Please read each statement carefully and tick one option which most appropriately reflects your response. Do not fill the shadowed area. (This section asks about factors that may influence an individual's engagement, they are optional and may not be necessary to include.)

	Always	Most of the time	Sometimes	Rarely	Never
37. I get feedback from my immediate supervisor on my performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. My supervisor praises good work performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional file 2a: Health Worker Engagement Assessment Tool (Swahili)

Usuli

Dhumuni la dodoso hili la utafiti ni kuangalia hali zinazoathiri kazi yako. Taarifa katika utafiti huu zitakusanywa, kutunzwa, changanuliwa, tumiwa na kulindwa bila jina na kwa siri kwenye sehemu ya kutunzia nyaraka kwa matumizi ya utafiti na Mradi wa Uboreshaji wa Huduma za Afya wa USAID na washirika wake waliothibitishwa. Matokeo ya utafiti huu yatasaidia kuonyesha/julisha hali ya utendaji kuboresha mazingira ya kazi, utawala, na hali ya kazi kwa wale wanaotoa huduma za ukimwi (kwa wenye Virusi vya Ukimwi) Tanzania.

Dodoso hili haliandikwi jina na ni siri. Hautatambulika na mambo yanayokuhusu hayatachapishwa.

Maelekezo

Asante kwa kukubali kujaza dodoso hili. Tafadhali jibu maswali yote. Kama una maswali lolote kuhusu kipengee chochote tafadhali muulize anayekusanya taarifa. Kama una maswali yoyote au maoni kuhusu utafiti huu, tafadhali wasiliana na Joseph Kundy, mratibu wa utafiti kupitia barua pepe jkundy@urc-chs.com

Tafadhali kabidhi dodoso ulilojaza kwa anayekusanya taarifa mara umalizapo kujaza.

Asante kwa muda wako

SEHEMU A

Sehemu hii inakusanya taarifa zako na hali ya kazi yako. Tafadhali kumbuka kuwa taarifa hizi zitatumizwa kwa siri sana.

1. Jinsia: A. Mwaname B. Mwanamke 2. Umri: Miaka.....

3. Una nafasi ipi katika kituo hiki? Tafadhali weka alama ya vema sehemu moja .

- | | | |
|--------------------------------|---------------------------|-----------------------|
| A. Mganga | E. Afisa Muuguzi | I. Mfamasia |
| B. Tabibu | F. Afisa Muuguzi Msaidizi | J. Mfamasia sanifu |
| C. Afisa mganga msaidizi (AMO) | G. Muuguzi –jamii | K. Msanifu wa maabara |
| D. Afisa mganga
(taja)..... | H. Mkunga/ muuguzi mkunga | L. Nyinginezo |

4. Umefanya kazi kwa muda wa miaka mingapi katika utoaji wa huduma za afya?
Miaka.....

5. Umefanya kazi kwa muda wa miaka mingapi katika kituo hiki? Miaka.....

5b; Aina ya Umiliki wa kituo

- | | |
|-----------------------------------|---------------------------------|
| A) Hospital ya Serikali ya Taifa | B) Hospital ya Serikali ya Mkoa |
| C) Hospital ya Serikali ya Wilaya | D) Kituo Cha Afya cha Serikali |

- E) Zahanati ya Serikali
 G) Kituo cha afya cha mashirika ya dini
 D) Hospital binafsi
 K) Zahanati binafsi
 F) Hospitali ya Mashirika ya Dini
 H) Zahanati ya mashirika ya dini
 J. Kituo cha afya binafsi
 L. Nyinginezo.Taja

6 .Je, kuna kikundi/kitengo cha kuboresha ubora ambacho hukutana mara kwa mara katika sehemu yako ya kazi?

- A. Ndiyo
 B. Hapana
 C. Sijui

6 a. **KAMA NDIYO**, na wewe ni mmojawapo katika hicho kikundi/kitengo?

- A. Ndiyo
 B. Hapana

7. Je, kuna mfumo unafanya kazi wa kuangalia mara kwa mara vigezo ashiria vya utendaji?

- A. Ndiyo
 B. Hapana
 C. Sijui

8. Je kuna utaratibu wa kutekeleza mapendekezo ya uboreshaji katika sehemu yako ya kazi?

- D. Ndiyo
 E. Hapana
 F. Sijui

SEHEMU B

Sehemu hii inakusanya taarifa kuhusu mtazamo wako kuhusu kazi yako. Tafadhali soma kila maelezo kwa makini na weka alama ya vema kwenye jibu ambalo hakika linatoa picha halisi ya mwitikio wako kwa kila maelezo.

	Nakubali kabisa	Nakubali	Sikubali wala Sikatai	Sikubali	Sikubali kabisa
9.Ninaweza kushirikiana na wafanyakazi wenzangu kirahisi	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10.Ninaamini kwamba wateja wote wanastahili kuhudumiwa kwa heshima	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Sidhani kama ninaaminiwa na wateja wangu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Ninafahamika na wanyakazi wenzangu kwa kutumainiwa kwangu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Ninajisikia fahari kuwa sehemu ya kituo hiki	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Ninaamini kwamba faragha ya wateja sio muhimu.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Naona ni vigumu kuhisi hali ya wateja ninaowahudumia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Napendelea kutoa huduma yenye ubora sawa kwa wateja wote badala ya kutoa huduma nzuri zaidi kwa wachache	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Ninajisikia furaha kwa kazi ninayofanya	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Ninaamini kwamba wagonjwa wangu wa kike na wa kiume wanasitahili uangalizi sawa kutoka kwangu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Sidhani kama kuna ubaya wowote kumwomba mteja kitu kidogo kabla ya kutoa huduma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SEHEMU C

Sehemu hii inakusanya taarifa kuhusu unavyoichukulia kazi yako. Tafadhali soma kila maelezo kwa makini na weka alama ya vema

kwenye jibu ambalo hakika linatoa picha halisi ya mwitikio wako kwa kila maelezo.

	Mara zote	Mara nyingi	Wakati mwingine	Mara chache	Sijawahi
20. Malengo ya kazi yangu yanaeleweka vizuri sana kwangu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Ninapendelea ufumbuzi wakati wa kujadili changamoto na wafanyakazi wenzangu.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Ninatathimini utendaji wangu wa kazi	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Nina wasaidia wafanyakazi wenzangu kujifunza ujuzi mpya.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. Nikijifunza mbinu/ujuzi mpya, ninautumia kazini kwangu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Huwa ninakamilisha kazi zangu kwa wakati	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Ninabaki kazini hadi nimalizapo kazi zangu.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Ninaanza kazi mapema.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Ninawahamasisha wenzangu kujadili changamoto pamoja	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. Huwa ninawapa wafanyakazi wenzangu mrejesho kuhusu utendaji wao wa kazi.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SEHEMU D

Sehemu hii inakusanya taarifa kuhusu mtazamo wako juu ya kazi na sehemu yako ya kazi. Tafadhali soma kila maelezo kwa makini na weka alama ya vema kwenye jibu ambalo hakika linatoa picha halisi mwitikio wako kwa kila maelezo.(Sehemu hii inaulizia kuhusu mambo ambayo yanaweza kuongeza kiwango cha ushiriki wa wafanyakazi katika kufikia malengo ya kazi, sio ya lazima sana kwenye kuangalia kiwango cha ushiriki na ushirikishwaji wa wafanyakazi)

	Nakubali kabisa	Nakubali	Sikubali wala Sikatai	Sikubali	Sikubali kabisa
30. Nina maarifa yanayostahili ili kufanya kazi yangu vizuri.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. Tuna miundo mbinu ya kutosha katika kituo hiki.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Idadi ya wafanyakazi katika kituo hiki inatosheleza.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Nina ujuzi ninaohitaji kufanya kazi yangu vizuri	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Tuna vitendea kazi vya kutosha katika kituo hiki.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Huwa ninapata mrejesho kutoka kwa msimamizi wangu wa mwanzo pindi tu ninapokuwa nimekosea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. Mshahara ninaopata unatosheleza mahitaji yangu muhimu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SEHEMU E

Sehemu hii inakusanya taarifa kuhusu uzoefu wako katika sehemu yako ya kazi. Tafadhali soma kila maelezo kwa makini na weka alama ya vema kwenye jibu ambalo hakika linatoa picha halisi ya mwitikio wako kwa kila Maelezo.

	Mara zote	Mara nyingi	Wakati mwingine	Mara chache	Sijawah i	Sijui
37. Ninapata mrejesho kutoka kwa msimamizi wangu wa kazi juu ya utendaji wangu.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
38. Msimamizi wangu huwa anapongeza utendaji mzuri wa kazi	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Additional file 2: Health Facility Performance Assessment Tool (English)

Instructions to data collectors

Please read the following introduction in order to obtain needed information. Ensure that you get appropriate support from the facility in charge or focal person for data management at the facility level to assist in identification of monitoring and evaluation tools for the ART/PMTCT program

Introduction:

Hello. My name is I work for an organization involved in research on improving health services. We have been conducting survey about the involvement/ engagement of health workers at your facility. Now, I would like to gather some of the performance indicators for your facility as classified by clinical and resource management indicators Information obtained will be assessed in order to find problems that interfere with health work performance. Your facility will not be identified by its name, and no detail that may reveal the identity of your facility will be published.

There will be no consequences for you or your facility to provide any data; rather, the information obtained from your monitoring and evaluation tools will be used to inform management about measures to improve provision of quality health services. Your answers will be kept confidential. In addition, the name of your facility will be kept anonymous, and no detail that may reveal the identity of it will be published.

This data collection will take approximately 60 minutes. You will not be paid for this, but the organization recognizes the time you have spent and the help you've provided to the team.

Do you agree for your performance indicator data to be collected by the research assistant teams?

IF YES: Have the respondent sign and date the consent form.

IF NO: Thank him/her for their time.

Now explain that:

Basic information concerning health workers will help by giving a clear picture during analysis if the number of positions or vacancies affect performance.

Cadre	Number of available positions	Number of those present	Number of employees that left their positions within the past year	Number of those recruited within the past year
Physician				
Clinical officer				
Assistant Medical officer (AMO)				
Medical Officer (MD)				
Nursing Officer				
Assistant Nursing Officer				
Public health nurse				
Nursing midwife				
Pharmacist				
Pharmacy technician				
Laboratory technician				
Medical Attendants (MA)				

Performance indicators have been divided as clinical resource management. This research favors information **within the past 30 days.**

- Clinical/Scientific:
 - % of pregnant women attending ANC that were tested and found to be infected then registered to attend CTC.
 - % of children born to HIV infected mothers who started on co-trimoxazole during their first two months of life
 - % of HIV patients with HIV currently on ART who do not show up for follow up.

- % of HIV patients at this CTC who were screened for TB.
- % of HIV patients checking their CD4 count every 6 months.
- Resource Management :
 - Number of days that read nil at the PMTCT register due to unavailable drugs.
 - Number of days that read nil the ART dispensing register.
 - Number of days that there hasn't been CD4 count services due to in functional CD4 machine or reagent problems.

Details, type of information needed and source of information for every indicator have been explained below. If the participant asks for explanation about an indicator, one can read below.

Clinical indicators.

Indicator: 1	% of pregnant women attending ANC that were tested and found to be infected then registered to attend CTC within the past 30 days.	
Details: all pregnant women attending ANC are supposed to be tested for HIV. Those found to be infected are registered for CTC for further management and treatment during their pregnancy and after delivery.		
Source of information: PMTCT care register, Pre-ART register, , or recent CTC and PMTCT report <i>Source of information (list):</i> -----		
Numerator: number of pregnant women attending ANC/LD who were tested for HIV and found to infected with HIV and then registered for CTC within the past 30 days if not available, write NA	Denominator: Total number of pregnant women who were tested for HIV in ANC/LD and found to be infected with HIV within the past 30 days. if not available, write NA	

Indicator: 2	% of children born to HIV infected mothers who started on co-trimoxazole during their first two months of life within the past 30 days.	
Details: Every child exposed to HIV infected mother should be started on co-trimoxazole prophylaxis in order to prevent pneumonia (<i>Pneumocystis pneumonia</i>) starting from 4 weeks of life or as soon as possible thereafter. Co-trimoxazole prophylaxis should continue till it has been confirmed that the baby is not infected with HIV (DNA PCR) and the mother has stopped breast feeding for at least 6-12 wks.		
Source of information: mother and child follow up register, PMTCT register. <i>Source of information (list):</i> -----		
Numerator: total amount of infants exposed to HIV infected mothers, below 3 months within the past 30 days started on co-trimoxazole prophylaxis within 2 months of life. If not available, write NA	Denominator: total amount of infants exposed to HIV infected mothers below 3 months within the past 30 days. If not available write NA	

indicator: 3	% of HIV infected patients on ARTs who are lost to follow up in at the time of data collection	
Details: HIV patients on ART who have not attended clinic as they were supposed to, continuously for 3 months.		
Source of information: Recent CTC report, ART register, NACP data base <i>source of information (list):</i> -----		
Numerator : total number of patients on ART that do not show up at the clinic continuously for 3 months at the time of data collection If not available, write NA	Denominator: total amount of patients on ART in at the time of data collection If not available, write NA	

Indicator: 4	% of HIV infected patients screened for TB on attending clinic within the past 30 days.	
Details: HIV patients, or those on ART or other health services, are to be screened for TB whenever they attend CTC clinic by using TB screening tool		
Source of information: recent CTC reports/ CTC-2 cards/ NACP data base <i>Source of information (list):</i> -----		
Numerator: Total number of HIV patients on ART or general health services seen at the CTC clinic screened for active TB during their regular visit in the past 30 days <i>If not available, write NA</i>	Denominator: Total number of HIV patients (on ART and general services) seen at the clinic in the past 30 days <i>If not available, write NA</i>	

Indicator: 5	% of HIV patients from CTC getting CD4 at least once every 6 months within the past month.	
Details: HIV patients on ART seen at the clinic are supposed to be checked for CD4 counts at least every 6 months.		
Source of information: ART register <i>Source of information (list):</i> -----		
Numerator : total number of HIV patients on ART seen at the clinic in the past 30 days with CD4 count less than six month old <i>If not available, write NA</i>	Divide by: total number of HIV patients on ART attending clinic within the past 30 days. <i>If not available, write NA</i>	

Comments, /notes/ summary on performance indicators.

Indicators of resource management

Indicator :1	Number of days that read nil on the PMTCT drug dispensing register within the past 30 days.
Details: Check the PMTCT drug dispensing register at the labor ward and the ANC. Count the number of days where ARV drugs remained nil. <i>Source of information (list):</i> -----	
Total number of days within the past 30 days: <i>If register not available or not filled write NA:</i>	

Indicator:2	Number of days that read nil on the ART dispensing register within the past 30 days.
Details: Check the ART dispensing register at the CTC and count the number of days where stock level for ART medicine read zero. <i>Source of information (list):</i> -----	
Total number of days within the past 30 days: <i>If register is not available or not filled write NA</i>	

Indicator3	Number of days where CD4 services were not available due to in functional CD4 machine or shortage of reagents within the past 30 days
Details: Ask the head of health facility , or head of CTC how many days within the past 30 days how many days they failed to request CD4 count test due to absence of CD4 reagent or the CD4 machine wasn't working. <i>Source of information (list):</i> -----	
Total amount of days within the past 30 days:	

Comments, /notes/summary of indicators of resource management.

Additional file 2a: Health Facility Performance Assessment Tool (Kiswahili)

Maelekezo kwa wanaokusanya taarifa

Tafadhali soma utangulizi ufuatao ili kuhakikisha ukusanyaji wa habari zinazokusudiwa. Hakikisha kuwa unapata ushirikiano unaotakiwa kutoka kwa mkuu wa kituo au mtu anayehusika na udhibiti wa taarifa/data katika ngazi ya kituo kusaidia katika utambuzi wa zana za usimamizi na tathimini ya mpango wa ART/PMTCT.

Utangulizi:

Habari. Jina langu ni Ninafanya kazi na asasi inayojihusisha na utafiti wa uboreshaji wa Huduma za Afya. Tumekuwa tukiendesha ukaguzi kuhusu kujishughulisha kwa wafanyakazi wa afya katika kituo chako. Sasa ningependa kukusanya baadhi ya viashiria vya utendaji wa kazi kwa kituo chako kama vilivyoanishwa na viashiria vya Kisayansi na menejimenti ya rasilimali. Taarifa itachanganuliwa ili kutafuta matatizo yanayoathiri utendaji wa wafanyakazi wa afya katika sehemu za kazi. Kituo chako hakitatambulishwa kwa jina, na hakuna undani utakaoonyesha utambuzi wa kituo chako utakaochapishwa.

Hakutakuwa na madhara yoyote kwa kituo chako kwa kutoa taarifa zozote. Taarifa itakayopatikana itatumika kuifahamisha menejimenti na wadau wengine ili kuboresha utoaji wa huduma bora za afya.

Ukusanyaji huu wa taarifa utachukua takribani dakika 60 za muda wako. Hautalipwa kwa muda wako. Ingawa Mradi wa Kuboresha Huduma za Afya unatambua muda wako kwa msaada unaoutoa kwa timu inayokusanya taarifa.

Unakubali taarifa za viashiria vya utendaji vikusanywe na timu za watafiti wasaidizi?

KAMA NDIYO: Mpe mshiriki fomu ya makubaliano aweke sahihi na tarehe.

KAMA HAPANA: Mshukuru kwa muda wake.

Sasa elezea kwamba:

Taarifa za msingi za wafanyakazi wa afya zitasaidia kutoa picha halisi wakati wa uchanganuzi kama idadi ya watumishi au nafasi tupu zinaathiri utendaji.

Kada	Idadi ya nafasi zilizopo	Idadi ya waliopo	Idadi ya watumishi walioacha nafasi zao katika kipindi cha mwaka mmoja uliopita	Idadi ya watumishi walioajiriwa katika kipindi cha mwaka mmoja uliopita
Tabibu (Physician)				
Mganga (CO)				
Afisa mganga msaidizi (AMO)				
Afisa Mganga (MD)				
Afisa Muuguzi				
Afisa Muuguzi msaidizi				
Muuguzi wa afya ya jamii				
Mkunga/Muuguzi mkunga				
Mfamasia				
Msanifu wa Famasia				
Msanifu wa maabara				
Wahudumu wa Afya wasaidizi (MA)				

Viashiria vya utendaji vimegawanywa kama vya kisayansi (clinical) na menejimenti ya rasilimali. Utafiti huu unapendelea taarifa za **siku 30 zilizopita**.

- Vya kisayansi (clinical)
 - Asilimia ya wajawazito waliohudhuria ANC na kupima na kukutwa wameathirika wakaandikishwa CTC.
 - Asilimia ya watoto waliopewa co-trimoxazole (septrin) waliozaliwa na akina mama wenye VVU
 - **Asilimia** ya wagonjwa wenye VVU wanaotumia ART ambao hawafuatili tena matibabu.
 - Asilimia ya wagonjwa wenye VVU hapa CTC waliochunguzwa Kifua kikuu
 - Asilimia ya wagonjwa wa VVU walio katika ART kutoka CTC waliopata kipimo cha CD4 angalau mara moja kila baada ya miezi 6

- Menejimenti ya raslimali:
- Idadi ya siku ambazo rejesta ya PMTCT ya kutolea dawa ilisomeka **0** (hapakuwa na dawa)
- Idadi ya siku ambazo rejesta ya kutolea dawa za ARV ilisomeka **0** .
- Idadi ya siku ambazo hakukuwa na kipimo cha CD4 kwa sababu ya masuala ya mashine kutokufanya kazi au kukosekana kwa vitendanishi (riajenti)

Maelezo, aina ya taarifa zinazotakiwa na vyanzo vya taarifa kwa kila kiashiria vimemelezewa hapa chini. Kama mshiriki akiuliza ufafanuzi kuhusu kiashiria, unaweza kusoma maelelezo hapo chini.

Viashiria vya kiliniki

Kiashiria: 1	Asilimia ya wajawazito waliohudhuria ANC na kupima na kukutwa wameathirika wakaandikishwa CTC katika siki 30 zilizopita.	
Maelezo:	Wajawazito wote wanaohudhuria ANC/LD wanatakiwa kupimwa VVU na wanaokutwa wameathirika wanaandikishwa CTC kwa huduma endelevu na matibabu wakati wa ujuzito na baada ya kujifungua.	
Vyanzo vya taarifa:	Rejesta ya huduma ya PMTCT, Rejesta ya kuandikishwa CTC (Pre ART Register), Rejesta ya huduma ya PMTCT au taarifa za siku za karibuni za CTC na PMTCT. <i>Vyanzo halisi vya taarifa (orodhesha):-</i> -----	
Kigawo:	Idadi ya wajawazito waliohudhuria ANC/LD na kupima VVU na kukutwa wameathirika wakaandikishwa CTC. Katika siku 30 zilizopita	Kigawe: Idadi ya wajawazito wote waliohudhuria ANC/LD, wakapimwa VVU na kukutwa wameathirika ndani ya siku 30 zilizopita. <i>Kama hakuna andika NA</i>
	<i>Kama hawapo andika NA</i>	

Kiashiria: 2	Asilimia ya watoto waliopeva co-trimoxazole (septrin) waliozaliwa na akina mama wenye VVU katika siki 30 zilizopita.	
Maelezo:	Kila mtoto aliyezaliwa na mama mwenye VVU anatakiwa kuanzishiwa kinga ya co-trimoxazole (septrin) ya kuzuia maradhi ya homa ya mapafu (Pneumocystis pneumonia) kuanzia umri wa majuma manne. Kinga ya Co - trimoxazole (septrin) inatakiwa kuendelea hadi inapothibitishwa kuwa mtoto hana VVU na mama ameacha kumnyonyesha mtoto wiki 6 mpaka 12 kabla ya kipimo cha VVU (DNA PCR) kwa mtoto.	
Vyanzo vya taarifa:	Rejesta ya ufuatiliaji wa tiba wa mama na mtoto, <i>Vyanzo halisi vya taarifa (Orodhesha):-</i> -----	
Kigawo:	Jumla ya watoto walio chini ya umri wa miezi 3 waliozaliwa na akina mama wenye VVU, na kuanzishiwa kinga ya co-trimoxazole (septrin) ndani ya miezi miwili ya kuzaliwa katika siku 30 zilizopita. <i>Kama hawapo andika NA</i>	Kigawe: Jumla ya watoto waliozaliwa na akina mama wenye VVU, wenye umri wa miezi 3 katika siku 30 zilizopita. <i>Kama hawapo andika NA</i>

Kiashiria: 3	Asilimia ya wagonjwa wenye VVU wanaotumia ART ambao hawafuatili tena matibabu katika siki 30 zilizopita.	
Maelezo:	Wagonjwa wenye VVU walio kwenye ART ambao hawakuonekana katika kliniki ya CTC kwa muda wa miezi 3 mfululizo katika siku thelathini zilizopita.	
Vyanzo vya taarifa:	Taarifa za siku za karibuni za CTC, Rejesta ya ART, database ya Mpango wa Taifa wa Kudhibiti UKIMWI. <i>Vyanzo halisi vya taarifa (Orodhesha):-</i> -----	
Kigawo:	idadi ya wagonjwa walio kwenye ART ambao hawaonekani kliniki kwa miezi mitatu mfululizo ndani ya siku 30 zilizopita <i>Kama hawapo andika NA</i>	Kigawe: Jumla ya wagonjwa walio kwenye ART katika kipindi cha siku 30 zilizopita <i>Kama hawapo andika NA</i>

Kiashiria: 4	Asilimia ya wagonjwa wenye VVU waliochunguzwa Kifua kikuu walipohudhuria kliniki katika kipindi cha siku 30 zilizopita.
Maelezo: Wagonjwa wa VVU, ambao wako kwenye ART au huduma za kawaida, wanatakiwa kuchunguzwa Kifua Kikuu kila wanapohudhuria kliniki kwa kutumia nyenzo ya kupimia kifua kikuu.	
Vyanzo vya taarifa: Taarifa za siku za karibuni za CTC , kadi za CTC-2, database ya Mpango wa Taifa wa Kudhibiti UKIMWI. <i>Vyanzo halisi vya taarifa (Orodhesha):</i> -----	
Kigawo: Idadi ya wagonjwa wa VVU(walio kwenye huduma za kawaida au wako kwenye ART) wanao onwa kliniki waliochunguzwa kwa maambukizo ya kifua kikuu katika zamu zao za kuhudhuria, ndani ya siku 30 zilizopita. <i>Kama hawapo andika NA</i>	Kigawe: Jumla ya idadi ya wagonjwa wa VVU (walio kwenye huduma za kawaida au wako kwenye ART) wanao onwa kliniki ndani ya siku 30 zilizopita. <i>Kama hawapo andika NA</i>

Kiashiria: 5	Asilimia ya wagonjwa wa VVU walio katika ART kutoka CTC waliopata kipimo cha CD4 angalau mara moja kila baada ya miezi 6 katika kipindi cha siku 30 zilizopita.
Maelezo: Wagonjwa wa VVU walio kwenye ART walioonwa kwenye kliniki wanahitaji kupata kipimo cha CD4 angalau kila miezi 6.	
Chanzo cha taarifa: Rejesta ya ART <i>Vyanzo halisi vya taarifa (Orodhesha):</i> -----	
Kigawo: Idadi ya wagonjwa wenye VVU walio kwenye ART waliopata kipimo cha CD4 cha miezi 6 ya karibuni ya matibabu ya ART ndani ya siku 30 zilizopita. <i>Kama hawapo andika NA</i>	Kigawe: Jumla ya wagonjwa wenye VVU walio kwenye ART waliostahili kupata kipimo cha CD4 cha miezi 6 ya karibuni ya matibabu ya ART ndani ya siku 30 zilizopita. <i>Kama hawapo andika NA</i>

Maoni, /Angalizo/Muhtasari kuhusu viashiria vya utendaji

Viashiria vya Menejimenti ya rasilimali

Kiashiria 1	Idadi ya siku ambazo rejesta ya PMTCT ya kutolea dawa ilisomeka 0 (hapakuwa na dawa)
Maelekezo: Angalia katika rejesta ya kutolea dawa ya PMTCT kwenye wodi ya wazazi na ANC na hesabu idadi ya siku ambapo kiasi cha dawa za ARV hazikuwepo. <i>Vyanzo halisi vya taarifa (Orodhesha):</i> -----	
Jumla ya idadi ya siku katika kipindi cha siku 30 zilizopita: <i>Kama rejesta haipo au haijazwa andika NA:</i>	

Kiashiria2	Idadi ya siku ambazo rejesta ya kutolea dawa za ARV ilisomeka 0 katika siku 30 zilizopita.
Maelekezo: Angalia katika rejesta ya kutolea ART kwenye CTC na rejesta ya famasi na hesabu idadi ya siku ambapo kiasi cha dawa za ART zilikosekana. <i>Chanzo halisi vya taarifa (Orodhesha):</i> -----	
Jumla ya idadi ya siku katika kipindi cha siku 30 zilizopita: <i>Kama rejesta haipo au haijazwa andika NA</i>	

Kiashiria3	Idadi ya siku ambazo hakukuwa na kipimo cha CD4 kwa sababu ya masuala ya mashine kutokufanya kazi au kukosekana kwa vitendanishi (riajenti) kwa kipindi cha siku 30 zilizopita.
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Maelekezo: Muulize mkuu wa kituo, au mkuu wa CTC ni siku ngapi katika siku 30 zilizopita wameshindwa kufanya kipimo cha CD4 kwa wagonjwa wanaostahili kwa sababu ya kukosa riajenti ya CD4 au kwa sababu mashine haifanyi kazi.

Chanzo halisi vya taarifa (Orodhesha):-----

Jumla ya idadi ya siku katika kipindi cha siku 30 zilizopita:

Maoni, /Angalizo/Muhtasari kuhusu viashiria vya menejiment ya rasilimali.