NGO CODE OF GOOD PRACTICE

Self-Assessment Checklist:
Voluntary Counselling and Testing

The Code of Good Practice for NGOs Responding to HIV/AIDS (the 'Code') states that in establishing or scaling up voluntary counselling and testing (VCT), we need to provide and/or advocate for services that:

- are voluntary, enabling people to give their informed consent to be tested, based on pre-test information about the purpose of testing and the treatment, care and support available once the result is known;

- are confidential and do not increase stigma or discrimination in the community;

- incorporate post-test support and services that advise those who test HIV positive on the meaning of their diagnosis, and on referral to the treatment, care and support and prevention programmes and services available to assist them. For those who test negative, post-test counselling or discussions offer an important opportunity to reflect on personal risk reduction strategies or to refer people to prevention programmes.

The Code identifies one key principle on VCT:

- We provide and/or advocate for voluntary counselling and testing services that are accessible and confidential.

This self-assessment checklist will help you assess the degree to which your organisation is successfully implementing good practice on this principle. The questions are designed to be thinking points/guidelines to help you identify areas that are already at a 'good practice' level, and areas that need to be developed and strengthened.

author

This module was developed by the International Planned Parenthood Federation (IPPF).

NGO CODE OF GOOD PRACTICE

Self-Assessment Instructions

This checklist should be completed by a group of three to five staff members who are involved with the VCT programming processes at your organisation.

Please indicate your answer by marking the appropriate box.

Y   Yes, we undertake this work/activity

I   Insufficient, in preparation, or being considered

N   No, we've not yet tackled this work/activity

NR   Not relevant to our work

This self-assessment tool uses the Code's principles to develop standards which can help measure the readiness of organisations to undertake the development and provision of voluntary counselling and testing services. It is designed to be used by organisations exploring the possibility of providing VCT, or those already committed to providing or scaling up their VCT services. Some of the questions may be more or less relevant for mobile VCT services.

Please be honest in completing this checklist! It is expected that your scoring will vary between modules, depending on your area of expertise.

There is no formalized scoring process for this assessment. Instead, we suggest that you look at the questions that you answered 'no' or 'insufficient' to, and then select areas that are most relevant for your organisation to improve upon in the short-term.

the Code

The Code of Good Practice for NGOs Responding to HIV/AIDS (the 'Code') was created by a broad consortium of NGOs to provide a shared vision of good practice to which NGOs can commit and be held accountable.

The Code outlines principles and practices that are informed by evidence and underscore successful NGO responses to HIV. It identifies a series of areas that are key to HIV programming and articulates fundamental principles that should be applied to HIV programmes in each of these areas.

These principles are aspirational, setting out examples of good practice that NGOs can work towards over time.

For more information on the Code, go to www.hivcode.org

Action Plan

We challenge you to use this tool to identify areas that your organisation needs to strengthen in order to reach a 'good practice' level, and then develop a brief Action Plan that highlights examples of HOW you will improve your VCT programmes over the next six months. You can use the Action Plan template provided at the end of this module or create your own.

There are nine Key Questions highlighted in the checklist in red. These questions address fundamental issues that you need to consider first when assessing your organisation's VCT programmes. As you develop your Action Plan, keep these questions in mind and if you have answered 'no' to any of them, this would be a good starting point for improving your programmes.

How to save the Action Plan:

Complete the self-assessment module and Action Plan electronically, save the file and submit it to the Code Secretariat by email. The Secretariat will credit all NGOs that submit Action Plans as 'Implementing' NGOs and full signatories of the Code. After the period of six months, we will ask you to measure your progress against your Action Plan.

Checklist

Please indicate your answer by marking the appropriate box.

○ **Y** Yes, we undertake this work/activity

○ **I** Insufficient, in preparation, or being considered

○ **N** No, we've not yet tackled this work/activity

○ **NR** Not relevant to our work

A
Organisation Preparedness Assessment

This section will help you identify whether your organisation has a system in place to assess the community's need for VCT and the organisation's capacity to provide the relevant services.

A.1 Community Assessment

○ Y ○ I ○ N ○ NR   1. **Did your organisation conduct a client's survey (including questions on the community's knowledge and attitude concerning HIV and VCT services) before initiating the VCT service?**

○ Y ○ I ○ N ○ NR   2. Is relevant information regarding HIV/STI data – i.e. National AIDS Programme strategy, epidemiological information for the region and documents from other NGOs – available in the facility or organisation headquarters?

A.2 Organisational Capacity

Policy and Guidelines

○ Y ○ I ○ N ○ NR   1. Is part of your organisation's vision, mission or goal to create an enabling environment for quality services, including VCT, to all people?

○ Y ○ I ○ N ○ NR   2. **Does your organisation have policies and/or guidelines on VCT which emphasise voluntary and non-coerced counselling and testing, confidentiality and accessibility to all people without discrimination?**

○ Y ○ I ○ N ○ NR   3. Does your organisation follow national government reporting requirements?

○ Y ○ I ○ N ○ NR   4. Are women able to receive confidential VCT without the presence or knowledge of their spouse?

Staff

○ Y ○ I ○ N ○ NR   5. **Does the organisation have staff adequately trained to provide and support comprehensive VCT?**

○ Y ○ I ○ N ○ NR   6. Does your organisation identify training facilities that can provide VCT training to selected staff?

○ Y ○ I ○ N ○ NR   7. Does the organisation undertake meeting(s) with staff in which community needs, epidemiological data, policy/law, resources and staff's opinions are discussed?

Checklist

Facility

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	8. Does the facility have enough private space that can be used to ensure clients privacy and confidentiality?
◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	9. Does the facility have private and secure storage space that can store clients' personal information?
◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	10. Does the facility have a recording and reporting system that ensures confidentiality and is the system used by VCT staff?
◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	11. Does the facility have the required electricity, running water and waste disposal system for successful integrated VCT or stand alone VCT services?
◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	12. Has the organisation identified/used reliable suppliers for the provision of VCT services (HIV test kits and other necessary supplies)?
◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	13. Does the facility have an adequate and sustainable supply of free, accessible condoms?

Finance

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**	14. Has the organisation allocated appropriate funds to provide and sustain VCT services?

Actions needed to support Section A:

Checklist

B

Service Provision Assessment

This section will help you to assess whether your organisation has systems in place and provides high quality VCT services.

B.1   Access to services

○ **Y** ○ **I** ○ **N** ○ **NR**	1.	Are there clear signs to show the facility/clinic location on access streets and/or outside the clinic building?

○ **Y** ○ **I** ○ **N** ○ **NR**   2. Is the entrance to the building discreetly located to avoid embarrassment of clients?

○ **Y** ○ **I** ○ **N** ○ **NR**   3. Are there guiding signs indicating the location of different examination rooms and other facilities inside the facility/clinic itself?

○ **Y** ○ **I** ○ **N** ○ **NR**   4. Are the clinic working hours convenient for different target groups (for example school students, sex workers, men who have sex with men)?

○ **Y** ○ **I** ○ **N** ○ **NR**   5. Are the list of services and cost/fee charges of services clearly displayed for all clients to see?

○ **Y** ○ **I** ○ **N** ○ **NR**   6. Does the clinic have a system in place to enable clients who cannot afford to pay to access VCT services?

○ **Y** ○ **I** ○ **N** ○ **NR**   7. Does the clinic have procedures in place to periodically assess and review the cost of services in accordance with clients' willingness and ability to pay?

○ **Y** ○ **I** ○ **N** ○ **NR**   8. Does the clinic have systems in place to ensure that HIV positive clients are treated in a non-discriminatory way (for example, complaint forms/ client exit interviews/checklists for staff)?

○ **Y** ○ **I** ○ **N** ○ **NR**   9. Are staff members who are trained in information, education, counselling and testing always present and available during opening hours?

Actions needed to support Section B.1:

B.2 Client-Centred

○ **Y** ○ **I** ○ **N** ○ **NR**	1. Does the facility/clinic have a comfortable waiting area?
○ **Y** ○ **I** ○ **N** ○ **NR**	2. Does the facility/clinic have a reliable lighting system?
○ **Y** ○ **I** ○ **N** ○ **NR**	3. Is there gender equity in the staff? (for example, male, female, transgender)
○ **Y** ○ **I** ○ **N** ○ **NR**	4. Are staff trained to provide tailored services to different groups without discrimination (for example young people, sex workers, their clients and regular partners, men who have sex with men, transgender people, people who use drugs and couples)?
○ **Y** ○ **I** ○ **N** ○ **NR**	5. Does the clinic have systems in place to ensure that clients are treated with respect and dignity and are not discriminated against?

6. Are the following IEC materials available in the local language(s):

○ **Y** ○ **I** ○ **N** ○ **NR**	• written materials (poster, leaflets, flipchart)?
○ **Y** ○ **I** ○ **N** ○ **NR**	• audiovisual materials (video, TV)?
○ **Y** ○ **I** ○ **N** ○ **NR**	• visual aids (model of anatomy, etc)?
○ **Y** ○ **I** ○ **N** ○ **NR**	7. Do all people receive their test results face-to-face with a counsellor in a private space?
○ **Y** ○ **I** ○ **N** ○ **NR**	8. Are people who receive an HIV-positive test result encouraged to ask and encourage their partner(s) to access VCT services?
○ **Y** ○ **I** ○ **N** ○ **NR**	9. Is there provision for 'contact tracing' whereby the person receiving an HIV-positive result informs staff at the facility of prior sex partner(s), and staff contact these and encourage them to test, without the person who tested HIV-positive having to take on this responsibility?

Actions needed to support Section B.2:

B.3 Privacy, Confidentiality and Informed Consent

◯ Y ◯ I ◯ N ◯ NR	1. **Does the facility /clinic have a private room for counselling and related clinical services?**
◯ Y ◯ I ◯ N ◯ NR	2. Are women and young people given the option of doing their HIV test and receiving their results without the permission or presence of a family member?
◯ Y ◯ I ◯ N ◯ NR	3. **Does the facility/clinic have a standardised record-keeping system where forms (registration, filing, recording, client's feedback) are kept confidentially and according to national government standards?**
◯ Y ◯ I ◯ N ◯ NR	4. Are there procedures in place to ensure that HIV test results are only reported to the client (unless clearly and unambiguously stated otherwise by the client themselves)?
◯ Y ◯ I ◯ N ◯ NR	5. Are health education talks/sessions scheduled and carried out for clients on a regular basis - weekly/monthly/quarterly?
◯ Y ◯ I ◯ N ◯ NR	6. Are there procedures in place to ensure complete information is given to each client during counselling sessions in a language that they understand, according to guidelines (checklists/copies of guidelines distributed to all service providers/assessment of service providers)?
◯ Y ◯ I ◯ N ◯ NR	7. Are there procedures in place to ensure that the client has given voluntary and informed consent before the test is performed?

Actions needed to support Section B.3:

B.4 Safety and Supply Management

○ **Y** ○ **I** ○ **N** ○ **NR**	1. Are there reliable supplies of clean water?
○ **Y** ○ **I** ○ **N** ○ **NR**	2. Is the facility clean?
○ **Y** ○ **I** ○ **N** ○ **NR**	3. Is there sufficient and well organised storage space?
○ **Y** ○ **I** ○ **N** ○ **NR**	4. Is all equipment maintained in good working condition?
○ **Y** ○ **I** ○ **N** ○ **NR**	5. Is medical waste properly handled according to guidelines?
○ **Y** ○ **I** ○ **N** ○ **NR**	6. Are there protocols/guidelines available on infection prevention (IP), HIV testing and counselling, post-exposure prophylaxis (PEP), and logistical management?
○ **Y** ○ **I** ○ **N** ○ **NR**	7. Are the protocols visibly displayed in order for staff to follow the protocols when performing their tasks (for example, flowcharts, testing procedures, IP and PEP checklists, etc)?
○ **Y** ○ **I** ○ **N** ○ **NR**	8. Are staff trained in logistic management, as necessary?
○ **Y** ○ **I** ○ **N** ○ **NR**	9. Is stock of supplies adequately monitored as per logistic management guidelines?
○ **Y** ○ **I** ○ **N** ○ **NR**	10. Are there systems in place to follow up clients and to track down drop-out clients?

Actions needed to support Section B.4:

B.5 Staff Competency to Deliver Services

○ **Y** ○ **I** ○ **N** ○ **NR**   1. Are staff meetings periodically held to discuss and update information related to the service?

○ **Y** ○ **I** ○ **N** ○ **NR**   2. Are staff trained on current information, education, counselling and testing procedures?

○ **Y** ○ **I** ○ **N** ○ **NR**   • Are policies and guidelines on VCT including procedures, client flow, price, counselling, education, testing, and referral available and accessible to all staff?

○ **Y** ○ **I** ○ **N** ○ **NR**   • Are procedures in place to ensure all staff are using the materials listed above?

○ **Y** ○ **I** ○ **N** ○ **NR**   3. **Are staff trained on issues of stigma and discrimination in relation to the VCT service?**

○ **Y** ○ **I** ○ **N** ○ **NR**   4. Are documents related to HIV epidemiology and STI prevalence available and accessible to all staff?

○ **Y** ○ **I** ○ **N** ○ **NR**   5. Are staff members trained to provide clients with appropriate information about HIV prevention, including information about all contraceptive options and pregnancy choices?

Actions needed to support Section B.5:

B.6 Monitoring and Evaluation

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   1. Does the facility/clinic have a supervision/monitoring plan that is used regularly?

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   2. Are staff trained on supervision/monitoring?

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   3. Are service statistics collected and analysed periodically and findings shared with staff members?

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   4. Is data reported to the national government as required?

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   5. Are there systems to gather client and providers' feedback on service delivery (i.e. suggestion box, client's exit interview, additional surveys etc)? Are they used to bring changes to the service?

Actions needed to support Section B.6:

B.7 Collaboration with Other Care and Support Services

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   1. **Are care and support services provided in the same facility (for example, antiretrovirals (ARV), sexually transmitted infection (STI) management, the prevention of mother to child transmission (PMTCT), etc)?**

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   2. **Is a referral system in place to other care and support services? (for example, PMCT, opportunistic infections, ARV, tuberculosis, STIs, mental health, income generating activities, food aid)?**

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   3. Is the service linked to support groups for PLHIV inside or outside the clinic/facility?

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   4. **Are PLHIV, both men and women, involved in VCT service delivery as counsellors, peer educators, etc?**

◯ **Y** ◯ **I** ◯ **N** ◯ **NR**   5. Are addresses for referral services and support available at the clinic?

Actions needed to support Section B.7:

Action Plan:
Voluntary Counselling and Testing

In completing this self-assessment checklist, you are likely to have identified some areas that are in need of improvement and some that are already at a 'good practice' level.

Please complete the Action Plan table on the next page and highlight examples of how you will improve your organisation's work on VCT over the next six months, thinking first about the Key Questions below. If you answer 'no' to any of these eight questions, it would be important for you to start here in improving your work!

Key Questions

1. Did your organisation conduct a client's survey (including questions on the community's knowledge and attitude concerning HIV and VCT services) before initiating the VCT service?

2. Does your organisation have policies and / or guidelines on VCT which emphasise voluntary and non-coerced counselling and testing , confidentiality and accessibility to all people without discrimination?

3. Does your organisation have staff adequately trained to provide and support comprehensive VCT?

4. Does the facility / clinic have a private room for counselling and related clinical services?

5. Does the facility / clinic have a standardised record-keeping system where forms (registration, filing, recording, client's feedback) are kept confidentially & according to national standards?

6. Are staff trained on issues of stigma and discrimination in relation to the VCT service?

7. Are care and support services provided in the same facility (for example, antiretrovirals (ARV), sexually transmitted infection (STI) management, the prevention of mother to child transmission (PMTCT), etc)?

8. Is a referral system in place to other care and support services? (for example, PMCT, opportunistic infections, ARV, tuberculosis, STIs, mental health, income generating activities, food aid)?

9. Are PLHIV, both men and women, involved in the VCT service delivery as counsellors, peer educators, etc?

Please remember to save your completed action plan and email it to **info@hivcode.org** or send it to **PO Box 372, 1211 Geneva 19, Switzerland.**

Name of Organisation	Contact Person	Email Address

Signed	Date

Expected Outcomes (What do we want to achieve?)	Key Activities (What do we need to do?)	Action Points (What kind of support do we need to do it?)	Resources (What kind of support do we need to do it?)	Timeframe (When will we do it?)

Supplementary Instructions

An explanation of what each question seeks to determine is presented below. Explanations for responses of NR (Not relevant to our work) are not included as these responses require no action. It is important to read the following section before the self-assessment tool is completed so the staff involved in the assessment are familiar with the questionnaire and the type of information required for each question.

A. Organisation Preparedness Assessment

A.1. Community Assessment

The questions in this section aim to find out whether an organisation has a system in place to assess the community's needs for VCT service.

• **Question 1: Ask whether there is a report from a client's survey (or similar document) available that were used to assess the community's needs for VCT services.** Answer
Yes if there is a report available;
I if the organisation is preparing the survey and/or other community's needs assessment but has not yet conducted it, or if the organisation staff are considering conducting the survey;
No if staff are neither considering nor planning to conduct a client survey or any other community needs assessment.

• **Question 2: Ask whether there is information available on the HIV/STI situation in the country and/or region. Please revise the information to confirm that it is kept up to date.** Answer
Yes if relevant documentation is available in the facility or at the headquarters level, and it is accessible to staff;
I if sufficient information is not available or it has not been recently updated, or if the organisation plans to collect relevant documentation;
No if relevant information is not available and there are no plans to collect it.

A.2. Organisational Capacity

The questions below determine whether the organisation has a system in place, and uses the criteria listed to assess current policies and guidelines and analyse its capacity and staff training needs before implementing VCT services.

Policy and Guidelines

• **Question 1: Ask about the current organisation's vision, mission and goals.** Answer
Yes if the current organisation's vision, mission and goals include the creation of an enabling environment that support access to essential HIV/AIDS services for all;
I if the organisation is in the process of revising its current vision, mission and goals to include access to essential HIV/AIDS services, or if a revision of the current organisation's vision, mission and goals is being considered;
No if the organisation has no plan to include access to essential HIV/AIDS services in its mission, vision and goal, and is not considering such a plan in future.

• **Question 2: Find out if the organisation has policies and/or guidelines in place on VCT that emphasise voluntary and non-coerced counselling and testing, confidentiality and accessibility to all people without discrimination.** Answer
Yes if the organisation has policies and guidelines in place;
I if these policies and guidelines are in preparation or if they are not in place or in preparation, but have been considered;
No if they have neither considered nor plan to have policies and guidelines in place.

• **Question 3: Does your organisation follow national government reporting requirements?** Answer

• **Question 4: Are women able to receive confidential VCT without the presence or knowledge of their spouse?** Answer

Staff

• **Question 5: Ask if there are appropriate trained staff available to provide VCT services.** Answer
Yes if there are appropriately trained staff;
I if there are appropriate staff but they need to be trained on HIV counselling and testing, or if the organisation does not have appropriate staff but plan to recruit them in the near future;
No if the organisation is not considering recruiting or training more staff before starting the VCT service.

• **Question 6: Ask if the organisations have identified potential sources for training staff on HIV counselling and testing.** Answer
Yes if there is MOU or similar agreement with a training institution that can train staff on VCT;
I if the organisation has been in contact with a training institution but have not formalised agreement yet, or if the organisation is considering

identifying and/or contacting a training institution;
No if the organisation is neither considering nor planning to contact a training institution.

• Question 7: Ask if the organisation holds regular meetings with staff to discuss the community's needs, epidemiological data in relation to HIV/STI, policy/law, resources and staff's opinions. Request to see minutes from the meetings. Answer
Yes if there are minutes available from meetings held at headquarters and facility level;
I if organisation is holding regular meetings but minutes are not available, or if organisation is considering holding regular meetings with staff and taking minutes from the meetings;
No if organisation does not hold regular meetings or take minutes from the meetings, and does not plan to do so.

Facility

• Question 8: Observe the facility/clinic and verify if there is enough private space that can ensure clients' privacy and confidentiality. Answer
Yes if there is enough private space available;
I if there are plans to reorganise the facility/clinic to create more private spaces, or if the reorganisation of the facility/clinic is being considered but implementation has not taken place yet;
No if there are no plans to reorganise the facility/clinic.

• Question 9: Observe the facility/clinic and verify if there is private and secure storage space. Answer
Yes if the facility/clinic has a storage space that is private and kept locked;
I if the facility/clinic has a storage space but security is not guaranteed or if there are plans to put a lock in place, or if the facility/clinic plans to have a storage space that is private and secure;

No if the facility/clinic do not have a secure storage space and do not intend to create one.

• Question 10: Observe the facility/clinic's records and verify if a reporting/recording system is in place that ensures confidentiality and is used by VCT staff. Answer
Yes if there is a reporting/recording system in place, staff involved in VCT service can explain procedures for using the system, and records are kept up to date;
I if there is a system in place but staff are not trained on how to use the system or records are not kept up to date, or if there are plans to develop a reporting/recording system and staff will be trained to use it;
No if no reporting/recording system is in place and no plans for one have been considered.

• Question 11: Observe the facility/clinic and verify if there is continuous supply of electricity, running water and waste disposal system in place. Answer
Yes if the facility/clinic has continuous supply of electricity and running water and a good disposal system exists which is collected/incinerated regularly;
I if the facility/clinic has electricity, running water and waste disposal in place but there are regular power cuts, water shortcuts or no good system for waste disposal, or if the facility/clinic plans to improve the system to ensure continuous supply of electricity and running water and/or improve waste disposal system;
No if the facility/clinic has no continuous supply of electricity, running water or waste disposal system, and no plans to introduce them.

• Question 12: Ask if the organisation or the facility/clinic has a list of qualified and reliable suppliers (i.e. HIV test kits, needles, gloves, etc). Answer
Yes if a list is available;
I if the list of suppliers is under

preparation, or if preparation of a list of suppliers is being considered;
No if the organisation/facility/clinic does not have a list of reliable suppliers and does not plan to have one.

• Question 13: Ask if the facility has an adequate and sustainable supply of free, accessible condoms? Answer

Finance

• Question 14: Ask if the organisation has allocated a budget to establish the VCT service. Answer
Yes, if a sufficient budget is being allocated;
I if a budget is being allocated but it will not be sufficient to cover all costs to set up the service, or if the allocation of funds has been considered and proposals are in the process of being developed;
No if no appropriate budget is being allocated and there are no plans to mobilize resources.

B. Service Provision Assessment

This section determines whether the organisation has systems in place and uses the criteria listed in the questionnaire to ensure the provision of high quality VCT services.

The criteria include a set of questions to assess whether the services are:

1) truly accessible to all people;
2) client centered;
3) delivered in a way that ensures privacy and confidentiality;
4) provided in a way that ensures safety in the facility and ongoing supply of commodities;
5) delivered by staff who are confident and competent in their skills;
6) framed under a clear monitoring and evaluation framework; and
7) offered in collaboration with other care and support services.

B.1 Access to Services

The purpose of these questions is to assess if the services are truly accessible to all people.

• **Question 1: Observe if the facility/clinic has clear signs that can easily direct clients to the clinic location.** Answer
Yes if you observe clear signs to direct clients to the facility/clinic;
I if signs exist but are not clearly displayed, or if signs are not displayed yet but are being considered;
No if there are no signs displayed, and there are no plans to have them.

• **Question 2: Observe if the entrance to the building discreetly located to avoid embarrassment of clients?** Answer

• **Question 3: Observe if the facility/clinic has clear signs indicating the** location of different examination rooms and other services inside the facility. Answer
Yes if you observe clear signs showing where each room and services are located;
I if the signs exist but are not clearly displayed, or if signs are not displayed yet but are being considered;
No if there are no signs displayed, and there are no plans to have them.

• **Question 4: Observe if the facility/clinic displays a sign with working hours and ask service providers if the working hours are convenient for different target groups (working men and women, young people, sex workers, men who have sex with men).** Answer
Yes if the facility offers flexibility in the working hours which are convenient for different target groups;
I if the clinic is changing working hours to increase accessibility, or if the clinic is revising the current working hours to ensure better accessibility by different groups;
No if working hours are limiting accessibility and there are no plans to change them.

• **Question 5: Observe if the facility/clinic displays the list of services offered and services fee at a place where clients can clearly see it.** Answer
Yes if the list is displayed near to the cashier, waiting room or entrance;
I if the list is not clearly displayed or services fee are not included, or if the facility are planning to display the services list and fee in the near future;
No if no list of services and fees is displayed, and there are no plans to do so.

• **Question 6: Ask service providers if the facility/clinic has a written policy on waiving fees for people who can not afford to pay for services.** Answer
Yes if a written policy is in place and staff use it;
I if the policy is being prepared but not yet implemented, or if the policy is being considered;
No if there is no written exemption policy in place and there are no plans to introduce one.

• **Question 7: Ask if the facility/clinic has a system in place to periodically review the cost of services in accordance with clients' willingness and ability to pay.** Answer
Yes if a system is in place and the service's costs are analysed regularly;
I if a system is being developed but not yet implemented, or if a system to revise service costs is being considered for the first time;
No if there is no system in place, and there are no plans to have such system.

• **Question 8: Ask if the facility/clinic has a system in place to ensure HIV positive people are treated in a non-discriminatory way (i.e. complaint forms, client exit interviews, checklist for staff).** Answer
Yes if the facility has a system in place and discrimination against clients is treated seriously;
I if a system is not yet in place but it is under development, or if a system is being considered;
No if there is no system in place, and there are no plans to develop one.

• **Question 9: Ask if there are always trained staff in the facility that can provide information, education, counselling and testing during opening hours.** Answer
Yes if there is always at least one trained member of staff during opening hours;
I if sufficiently trained staff do not work every day but there are plans to recruit more staff to ensure availability of services at all times, or if there are no sufficiently trained staff and there are budgetary constraints on recruiting more staff;
No if there are no sufficiently trained staff and no plans to recruit more.

B.2. Client Centered

The purpose of these questions are to assess if the VCT services are organised in a way that are client centered.

• **Question 1: Observe if the facility/clinic has a comfortable waiting area.** Answer
Yes if it is comfortable and offers sufficient space for clients;
I if there is not sufficient space but they have plans to improve it, or if plans to improve the waiting area have been considered;
No if there is not sufficient space and no plans to improve it.

• **Question 2: Observe if the facility/clinic has a reliable lighting system.** Answer
Yes if there is a reliable lighting system;
I if there is not a reliable system in place but they have plans to improve it, or if plans to improve the lighting system have been considered;
No if there is not a reliable lighting system and there are no plans to improve it.

• **Question 3: Ask if there are male, female or transgender trained staff to provide VCT services so clients have the option to select the counsellor according to gender.** Answer
Yes if there is a well balanced ratio of male and female trained staff, and clients have the option to choose the counsellor;
I if there are more staff from one gender but they plan to recruit more staff to increase gender equity, or if plans to improve gender equity have been considered;
No if there is not gender equity in the facility and there are no plans to improve this.

• **Question 4: Ask if staff have received training in order to offer VCT services that are tailored to meet the needs of different groups (i.e. young people, sex workers, , their clients and regular partners, men who have sex with men,** transgender people, people who use drugs and couples. Answer
Yes if staff received appropriate training or a member of target group has been recruited to offer this service;
I if training is planned or they plan to recruit people from target groups, or if this has been considered;
No if staff are not trained and there are no plans for recruitment/training.

• **Questions 5: Ask if the facility/clinic has a system in place to ensure that clients are treated with dignity and respect regardless of gender, sexual orientation, profession, drug use and/or HIV status (i.e. complaint forms, client exit interviews, staff assessments).** Answer
Yes if a system is in place and it is monitored regularly;
I if a system is planned to be put in place and/or improve an existing one, or if a system is being considered for the first time;
No if there are no plans to put a system in place.

• **Question 6: Observe if information, education and communication (IEC) materials are clearly displayed in the facility/clinic and ask if the following materials are available in the appropriate languages so clients can consult or take them away: a) written materials; b) audiovisual materials; c) visual aids.** Answer
Yes if sufficient materials are displayed and available for clients to take away;
I if there are not sufficient materials available but they are planning to have more, or if plans have been considered to increase the availability of IEC materials;
No if there are no plans to have IEC materials. Please tick the appropriate box in the assessment column for each type of material.

• **Question 7: Ask if all people receive their test results face-to-face with a counsellor in a private space.** Answer

• **Question 8: Ask if people who receive an HIV-positive test result are encouraged to ask and encourage their partner(s) to access VCT services.** Answer

• **Question 9: Ask if there is provision for 'contact tracing' whereby the person receiving an HIV-positive result informs staff at the facility of prior sex partner(s), and staff contact these and encourage them to test, without the person who tested HIV-positive having to take on this responsibility.** Answer

B.3. Privacy, Confidentiality and Informed Consent

These questions assess whether the VCT services are organised in a way that protects the privacy and confidentiality of each client, and that informed consent is always requested before performing an HIV test.

• **Question 1: Observe if the facility/clinic has private counselling and examination rooms.** Answer
Yes if there are private counselling rooms and clients cannot be overheard;
I if there are not private rooms but there are plans to have one, or if plans have been considered;
No if there are no separate counselling rooms and no plans to have one.

• **Question 2: Ask if women and young people are given the option of doing their HIV test and receiving their results without the permission or presence of a family member.** Answer

• **Question 3: Observe if the facility/clinic has a standardized record-keeping system and forms that are kept confidentially.** Answer
Yes if a system is in place and all records are kept confidentially;
I if they have a limited system in place but they plan to improve the current system, or if a system is being

considered;
No if there is no system in place and no plans to have one.

• Question 4: Ask what procedures are in place to ensure HIV test results are only reported to clients. Answer
Yes if a system is in place and all records kept confidentially;
I if they have a limited system in place but plans to improve it, or if a system is being considered;
No if there is no system in place and no plans to have one.

• Question 5: Ask if health educational talks/sessions are regularly carried out for clients and observe if a schedule when sessions take place is clearly displayed. Answer
Yes if health education sessions are regularly carried out and schedule clearly displayed;
I if health education sessions are conducted but schedule is not displayed at the clinic, or if health education sessions are being considered;
No if there are no plans to carry out health education sessions.

• Question 6: Ask if there are procedures in place to ensure complete information is given to clients according to guidelines during counselling sessions and observe if guidelines are available to service providers (i.e. checklists, copies of guidelines, flow charts). Answer
Yes if procedures are in place and service providers use them;
I if procedures exist but service providers do not use them, or if procedures and guidelines have been considered to put in place to help service providers;
No if there are no procedures and guidelines in place for counselling sessions, and no plans to have them.

• Question 7: Ask what system is in place to request informed consent

from clients to be tested (i.e. written, verbal, finger proof).** Answer
Yes if a system is in place and staff always use it;
I if a system is in place but not always used, or if a system is being considered;
No if informed consent is not requested, and there are no plans to introduce it.

B.4. Safety and Supply Management

The purpose of these questions is to assess if the VCT services are organised in a way that ensures safety in the facility or clinic and ongoing supply of commodities.

• Question 1: Verify if the facility/clinic has a reliable source of clean water. Answer
Yes if there is a reliable source of clean water;
I if there is some reliable source which is not continuous and they have plans to improve it, or if plans to improve the reliable source of clean water been considered;
No if there is no reliable clean water and no plans to improve it.

• Question 2: Verify if the facility/clinic is clean. Answer
Yes if regular maintenance is conducted to keep the facility clean;
I if there are some areas that need improvement and plans are in place to do so, or if plans to ensure the facility is regularly cleaned have been considered;
No if the facility is not always maintained and clean.

• Question 3: Observe the facility/clinic and verify if there is a well organised and secure storage space. Answer
Yes if the facility/clinic has a storage space that is well organised and kept locked;
I if the facility/clinic has a storage space but it is not well organised and

security is not guarantee but plans are in place to improve it, or if the facility/clinic plans to have a storage space that is well organised and secure;
No if the facility/clinic neither have or plan to have a well organised storage space.

• Question 4: Observe if all equipment is in good working condition and ask if a maintenance plan is in place. Answer
Yes if all equipment is in good working condition and a maintenance plan is put in place;
I if not all equipment is in good working condition but a plan for repairing and maintaining equipment is in place, or if improving some equipment and having a maintenance plan is in place;
No if most equipment is not working and there is no plan to repair it.

• Question 5: Observe the facility/clinic and verify if there are clear procedures to dispose medical waste. Answer
Yes if the facility/clinic has clear procedures to dispose medical waste, all staff follow them and waste is collected/incinerated regularly;
I if the facility/clinic has clear procedures to dispose of medical waste in place but not all staff follow it and/or there is not a good system to dispose of medical waste, or if the facility/clinic plans to develop clear procedures to dispose of medical waste and staff will be trained to follow them;
No if the facility/clinic do not have clear procedures to dispose of medical waste, and do not plan to change this situation.

• Question 6: Ask if there are clear protocols or guidelines (HIV counselling, HIV testing, Infection Prevention (IP), Post Exposure Prophylaxis (PEP), logistic management) available which are used by all trained staff. Answer
Yes if all described guidelines are available and used by staff;

I if some guidelines are available but the rest are on the process of development, or if the facility/clinic has plans to develop them;
No if the clinic neither has guidelines or plans to develop them.

• **Question 7: Ask if staff have been properly trained on the use of above mentioned protocols/guidelines and follow them correctly.** Answer
Yes if involved staff are trained and use them correctly,
I if there are plans to train staff on the use of protocols/guidelines, or if plans have been considered to train staff;
No if any training is not planned for staff.

• **Question 8: Ask if involved staff are trained in logistic management and follow the guidelines correctly.** Answer
Yes if involved staff are trained and use them correctly;
I if involved staff are not trained but plans are in place for improving logistic management, or if plans are being considered to train relevant staff and improve logistic management;
No if no plans are in place to improve logistic management, and there are no plans to change this situation.

• **Question 9: Ask if any stock has run out in the last 6 months.** Answer
Yes if stock is always sufficient and stock books are updated regularly,
I if stock runs out sometimes (less than 2 times a year) and a system is planned to be put in place to monitor supply, or if stock often runs out (between 3-6 times a year) and some solutions have been considered;
No if stock is never sufficient (runs out over 6 times a year) and no plans are in place to improve monitoring.

• **Question 10: Ask if the clinic has procedures to follow up clients and contact those who do not return for follow up appointments.** Answer
Yes if there are procedures in place and assigned staff can contact clients

when appropriate;
I if there are procedures in place but are under development, or if procedures are being considered for the facility/clinic;
No if no procedure is in place and there are no plans to develop one.

B.5. Staff Competency to Deliver Services

The purpose of these questions is to assess if VCT services are delivered by staff that can provide the service in a confident and competent manner.

• **Question 1: Ask if technical meetings are conducted regularly to discuss and update information related to the VCT service.** Answer
Yes if meetings are taking place regularly and minutes from meetings are available;
I if meetings are conducted regularly but there are no minutes available, or if the facility is considering introducing regular technical meetings;
No if no regular meetings are in place and there are no plans to hold them in the future.

• **Question 2: Ask if staff receive regular training to update technical information, education, counselling and testing procedures.** Answer
Yes if regular training is carried out and staff have up-to-date information;
I if the facility/clinic has plans to introduce regular training, or if ad hoc training is provided and more regular training has been considered;
No if no regular training has been carried out, and there are no plans to change this situation.

• **Question 3: Ask if staff are trained on issues of stigma and discrimination in relation to the VCT service?** Answer
Yes if the VCT guidelines are in place for the facility which are available and accessible by all staff;

I if they are all available but are not accessible by all staff, or if the development of VCT guidelines have been considered;
No if there are no plans to make VCT guidelines available to staff.

• **Question 4: Ask if there is a system in place to ensure staff follow VCT procedures and guidelines (i.e. routine checklists).** Answer
Yes if there is a system in place;
I if routine checklist or similar systems are in the process of being developed/implemented, or if the system is being considered;
No if no system is in place and there are no plans to develop one.

• **Question 5: Verify if documents related to HIV epidemiology, STI prevalence and other relevant documents are available and accessible to staff.** Answer
Yes if they are both available and accessible to staff;
I if they are available but not accessible to all staff, or if a compilation of relevant documents have been considered;
No if documents are not available and there are no plans in place to collect them.

B.6. Monitoring and Evaluation

These questions assess whether the facility or organisation has a supervision, monitoring and evaluation system in place and uses the system to ensure the programme meets the needs of the clients

• **Question 1: Ask if the facility/clinic has supervision and monitoring plan in place which is used regularly to assess quality of the clinic and progress on activities. Verify if schedules for supervision and reports are available.** Answer
Yes if supervision is carried out according to the plan and reports are available;

I if the supervision is not carried out according to the plan but plans are in place to improve it, or if a plan is being considered;
No if no plan is in place, and there are no plans to create one.

• Question 2: Ask if staff have been trained to carry out supervision and/or monitoring tasks, or if a team is in charge of carrying out this task. Answer
Yes if there is team or staff trained on supervision and/or monitoring;
I if staff or a team have been identified but not yet trained, or if the clinic plan to set up a team or designate staff for this task;
No if no staff or team have been assigned and trained for this task, and there are no plans to change this situation.

• Question 3: Ask if service statistics are collected and analysed periodically and findings shared with staff members. Answer
Yes if the service statistic are analysed periodically and share with all staff;
I if the service statistics are analysed periodically but not share among staff, or if the analysis of service statistics is being considered;
No if service statistic have never been analysed and/or staff didn't know about it.

• Question 4: Ask if the facility/clinic has a system in place to gather client and providers' feedback (i.e. suggestion box, client's exit interviews, complaints book, etc). Answer

• Question 5: Ask if the facility/clinic has a system in place to gather client and providers' feedback (i.e. suggestion box, client's exit interviews, complaints book, etc). Answer
Yes if a system is in place and information is analysed and used to improve the service;
I if a system is in place but the information is not analysed or used, or

if a system is being considered;
No if no system is in place and there are no plans to develop one.

B.7. Collaboration with Other Care and Support Services

These questions assess whether the organisation has a referral system in place which supports collaboration with other care and support services.

• Question 1: Ask if there is a system in place to refer clients to other services that are provided within the same clinic (i.e. ART, STI management, PMTCT, family planning, etc). Answer
Yes if there is such referral system within the clinic;
I if there is no system but plans are in place to better integrate services in the same facility, or if they are considering better integrating services in the same facility;
No if there are no referrals in place, and no plans to introduce them.

• Question 2: Ask if there is an established referral system in place (i.e. MOU signed with other organisations, communication letters, referral cards or slips, etc) that are used to link VCT with other care and support services (i.e. PMTCT, MCH, OI, ARV, TB, STI management, family planning, mental health, community supports, income generating activities, food aid). Answer
Yes if a referral system is in place and documentation is available;
I if there is an informal referral system in place and plans are underway to formalize it, or if a formal referral system has been considered;
No if no system is in place and there are no plans to develop one.

• Question 3: Ask if the VCT service is linked to support groups for people living with HIV (PLHIV) for those who

test HIV positive (either inside or outside the facility/clinic).** Answer
Yes if the service is linked to support groups;
I if the service is not formally linked but plans have been developed, or if linking VCT services to support groups has been considered;
No if no such link exists, and there are no plans to create one.

• Question 4: Ask if PLHIV are involved in the delivery of VCT services, (i.e. as lay counsellors or peer educators). Answer
Yes if there are PLHIV involved;
I if they are in process of being recruited or plans are in place to recruit PLHIV, or if recruitment of PLHIV is being considered;
No if no PLHIV have been recruited and there are no plans in place to do so.

• Question 5: Verify if there is a list available that includes addresses of various care and support services, and service providers use it to refer clients to other services. Answer
Yes if there is a list available in the clinic which is used by providers;
I if the list is in the process of being developed, or if the facility is considering developing a contact list of other services;
No if a list is not available, and there are no plans to develop one.