



PMTCT

Supervisory

Checklist

Abbreviations & Acronyms

AIDS: Acquired Immune Deficiency Syndrome

ANC: Antenatal Care

ART: Antiretroviral Therapy

ARV: Antiretroviral

CD4: Cluster Differentiation 4 cells – T4 helper cells

DBS: Dried Blood Spots

DNA: Deoxyribonucleic Acid

EID: Early Infant Diagnosis

HIV: Human Immunodeficiency Virus

HTC: HIV Testing and Counselling

MA: Medical Assistant

NACP: National AIDS/STI Control Programme

OI: Opportunistic Infection

OJT: On-the-Job Training

PCR: Polymerase Chain Reaction

PEP: Post-Exposure Prophylaxis

PHN: Public Health Nurse

PNC: Postnatal Care

PMTCT: Prevention of Mother-to-Child Transmission of HIV

TB: Tuberculosis



ANC

Facility's Name.....

Supervisor's Name.....

Date.....

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
HIV Test Kit								
Shortage of test kits over the past quarter	Yes: Shortage (specify duration of shortage)				1 - 2 months	≥ 3 months		
	No: Had some in stock (specify the quantity in stock)	≥ 3 months stock	1 - 2 months stock	< 1 month stock				
Expiry date of test kits	Kits should be used before the expiry date	> 3 months to expiry	3 months to expiry	2 months to expiry	1 month to expiry	Expired		
Supply source of test kits	Describe how the kits are supplied:							
Management of test kits	Security & safety of test kits	Good	Fair	Unacceptable				
Syphilis Test Kit								
Shortage of test kits over the past quarter	Yes: Shortage (specify duration of shortage)				1 - 2 months	≥ 3 months		
	No: Had some in stock (specify the quantity in stock)	≥ 3 months stock	1 - 2 months stock	< 1 month stock				
Expiry date of test kits	Kits should be used before the expiry date	> 3 months to expiry	3 months to expiry	2 months to expiry	1 month to expiry	Expired		
Supply source of test kits	Describe how the kits are supplied:							
Management of test kits	Security & safety of test kits	Good	Fair	Unacceptable				

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Storage, Disposal and Cost of Test Kits								
Storage of test kits according to national standard	Refer to storage condition provided by manufacturer	Good	Fair	Unacceptable				
Disposal of expired test kits according to national standard	National standard	Good	Fair	Unacceptable				
Cost of HIV/ Syphilis test per client	The cost of HTC and PMTCT is GHC 0.00	Free for all services		Comment if there are any charges –				
Availability of Testing Consumables								
Syringes	No shortage	Some stock		Shortage				
Needles or Lancet	No shortage	Some stock		Shortage				
Gloves	No shortage	Some stock		Shortage				
Cotton wool	No shortage	Some stock		Shortage				
Disinfectant (Methylated Spirit, Soap, Parazone, etc.)	No shortage	Some stock		Shortage				
Other Consumables	No shortage	Some stock		Shortage				

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions					
ANC Register													
Appropriately filled	More than 95% of PMTCT register items are appropriately filled	100%	95 - 99%	90 - 94%	80 - 90%	< 80%							
Timely submission of monthly return forms	Submit monthly return form by the 5th of each month	Report by 5th day		5 - 10th day	10 - 15th day	After 15th day							
Check TB screening data collation (check if TB screening tool is available)	Clients should be screened for TB	Clients are screened for TB (If client is TB suspect, what is the next procedure?)			Clients are not screened (Explain why?)								
Are HIV positive mothers provided with ARVs at the facility or are referred for ARVs in another facility?	Specify:												
Human Resources													
Number of midwives working at the ANC	Number of staffs:												
Number of trained staffs in PMTCT	Participated in a PMTCT training within 3 years	Number of staffs trained:											
General comments and suggestions													

Received by:

ANC 3 of 3

Name:..... Signature:..... Contact Number:.....



PNC

Facility's Name.....

Supervisor's Name.....

Date.....

Area of Supervision	Means of Verifications		Best Practices & Problems Observed	Comments & Suggestions
PNC Register (Are the HIV exposed infants being identified?)				
Number of babies born to HIV (+) mothers and listed as being followed up	Check any documentation	Period: Number of babies born to HIV (+) mother: Number of babies listed as being followed up: Documentation checked:		
Number of babies started on ARV prophylaxis	Check any documentation	Period: Number of babies started on ARV prophylaxis: Documentation checked:		
Number of babies tested at 6 weeks (EID/DNAPCR)	Check any documentation	Period: Number tested: Number positive: Documentation checked:		
Number of HIV (+) babies (by EID) initiated on ART	Check any documentation	Period: Number of positive babies initiated (by EID) on ART: Documentation checked:		
Number of babies started on Cotrimoxazole	Check any documentation	Period: Number of babies started on Cotrimoxazole: Documentation checked:		
Number of babies tested at 18 months by antibody test	Check any documentation	Period: Number tested: Number positive: Documentation checked:		
Number of babies started on ART after 18-month testing	Check any documentation	Period: Number of babies started on ART after 18-month tests: Documentation checked:		

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
PNC Register (Are the HIV exposed infants being identified?)								
Coverage of counselling for HIV (+) mothers at PNC (Family Planning, Breastfeeding, Vaccination, etc.)	Counseling should be done for all clients regularly	Regularly for all clients	Regularly for most (80 - 99%) of the clients	Regularly for some (60 - 80%) clients	Irregularly for some (< 60%) clients	Not done		
How are mother-baby pairs followed up?	Specify:							
Human Resources								
Assess staff knowledge on Early Infant Diagnosis (EID) (e.g. How, where and when is EID done?)	Evaluate knowledge of the staffs	Very good	Good	Fair	Need some training	Immediately need training		
Number of staff trained to perform DBS (PCR). What is the calibre of staff (PHN, midwife, doctor, laboratory, MA)?	Number of trained staffs: Number of staffs actually perform DBS:							
General comments and suggestions								

Received by:

Name:..... Signature:..... Contact Number:.....



Labour Ward

Facility's Name.....

Supervisor's Name.....

Date.....

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Delivery Register								
HIV status recorded?	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Pregnant women of unknown HIV status being offered HTC?	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Babies born to HIV (+) mothers given ARV prophylaxis?	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of HIV-exposed infants who were given ARVs	Period: Number of HIV exposed infants: Number given ARV prophylaxis:							
How are referrals and/or follow-up of HIV (+) mothers and their babies done?	Specify:							
Availability of HIV Test Kits, ARVs and other consumables								
Availability of HIV test kits at the labour ward	No shortage	Some stock			Shortage			
Availability of ARVs in the labour ward	No shortage	Some stock			Shortage			
Other consumables	No shortage	Some stock			Shortage			

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Staff Knowledge								
Assess staff knowledge on ARVs and Cotrimoxazole prophylaxis for babies	Who is eligible for ART? When to start and stop? What to give? When do you give Cotrimoxazole?	Very good	Good	Fair	Need some training	Immediately need training		
Assess staff knowledge on PEP for healthcare providers	Is contact person available in the facility? Is protocol available in the facility?	Very good	Good	Fair	Need some training	Immediately need training		
Within how many hours are clients observed before they are discharged? Are there any challenges in keeping the mothers for 24 hours?		Very good	Good	Fair	Need some training	Immediately need training		
Human Resources								
Total number of midwives in labour ward	Number of staffs:							
Number of staffs trained in PMTCT (Type of training: OJT or structured training?)	Participated in a PMTCT training within 3 years	Number of staffs trained:						
General comments and suggestions								

Received by:

Name:..... Signature:..... Contact Number:.....



ART Unit

Facility's Name.....

Supervisor's Name.....

Date.....

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
How is PMTCT linked to ART clinic?	Specify the current practice:							
PMTCT Register								
PMTCT register completed well <i>(check if the current copy available)</i>	More than 95% of PMTCT register items are appropriately filled	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Records storing <i>(confidentiality and access to patient data)</i>	The record kept in a safe place with lock	Kept in the drawer with the key locked where only medical staffs can access		Kept in the drawer where only medical staffs can access	Kept on the desk where only medical staffs can access	Kept on the desk where anybody can access		
Is there any computer for capturing clients' data? Any challenges with software?		No problem at all		Some problems but managed	Have a computer but not functioning	No computer		
Check ART folder <i>(at the back of the folder)</i> Is the baby's information recorded in the mother's folder?	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of HIV (+) mothers listed and followed up	Period: Number of HIV (+) mothers listed: Number of HIV (+) mothers followed up for PMTCT: Number of HIV (+) mothers put on treatment (or prophylaxis): Documentation checked:							

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
PMTCT Register								
Coverage of follow-up for HIV (+) mothers	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Coverage of treatment (or prophylaxis) for HIV (+) mothers	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of babies born to HIV (+) mothers and listed as being followed up	Check any documentation	Period: Number of babies born to HIV (+) mother: Number of babies listed as being followed up: Documentation checked:						
Number of babies started on ARV prophylaxis	Check any documentation	Period: Number babies started on ARV prophylaxis: Documentation checked:						
Coverage of prophylaxis for HIV exposed babies	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of babies tested at 6 weeks (EID/DNA PCR)	Check any documentation	Period: Number tested: Number positive: Documentation checked:						
Number of HIV (+) babies (by EID) initiated on ART	Check any documentation	Period: Number of HIV (+) babies (by EID) initiated on ART: Documentation checked:						
Coverage of treatment for HIV exposed babies after EID	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of babies started on Cotrimoxazole	Check any documentation	Period: Number babies started on Cotrimoxazole: Documentation checked:						

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
PMTCT Register								
Coverage of Contrimoxazole for HIV exposed babies after EID	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of babies tested at 18 months by antibody test	Check any documentation	Period: Number of HIV exposed babies that should be followed: Number tested: Number positive: Documentation checked:						
Coverage of testing at 18 months for HIV exposed babies	Target coverage: 100%	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of babies started on ART after 18 months	Check any documentation	Period: Number of babies started on ART after 18-month tests: Documentation checked:						
Assess staff's knowledge and practice on the testing of HIV-exposed babies								
When, how and by whom is EID (DBS) done? Any documentation to it?	Specify:							
When, how and by whom is infant antibody testing (rapid test) done at 18 months? Any documentation to it?	Specify:							

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions						
Assess staff's knowledge and practice on the testing of HIV-exposed babies														
What drugs will be given after the test at 6 weeks		Very good	Good	Fair	Need some training	Immediately need training								
How often is CD4 / viral load checked? (probe further to clarify the issue such as by whom and when it is done)	Every 6 months	Very good	Good	Fair	Need some training	Immediately need training								
Follow-up of defaulters: Any best practices?	Explain how follow-up of clients is done:													
General comments and suggestions														

Received by:

Name:..... Signature:..... Contact Number:.....



Pharmacy

Facility's Name..... Supervisor's Name..... Date.....

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Storage of Drugs								
Place	No direct sun light, Proper humidity, No rain drops, No dust	Good		Fair	Unacceptable			
Space	Enough space, Cleanliness	Good		Fair	Unacceptable			
Security	Securely locked	Good		Fair	Unacceptable			
Ambient temperature Check temperature log where relevant	Refer to storage condition provided by manufacturer	Good		Fair	Unacceptable			
Adherence Counseling								
Regular adherence counseling	Adherence counseling done regularly for all clients	Regularly for all clients	Regularly for most (80 - 99%) of the clients	Regularly for some (60 - 80%) clients	Irregularly for some (< 60%) clients	Not done		
Space for adherence counseling	Enough space available? Confidentiality & privacy secured?	Good		Fair	Unacceptable			
Logistics and Others								
Shortage of ART medications over past quarter	Yes: shortage (specify duration of shortage)				1 - 2 months	≥ 3 months		
	No: Some Stock (specify quantity in terms of months of stock)	≥ 3 months stock	1 - 2 months stock	< 1 month stock				
Supply source of test kits	Describe how the test kits are supplied:							

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Logistics and Others								
Supply source of ART medications	Describe how the ART medications are supplied:							
Expiry date of ART medications	Medications should be used before the expiry date	> 3 months to expiry	3 months to expiry	2 months to expiry	1 month to expiry	Expired		
Shortage of OI medications over past quarter	Yes: Shortage (specify duration of shortage)				1 - 2 months	≥ 3 months		
	No: Some Stock (specify the quantity of stock)	≥ 3 months stock	1 - 2 months stock	< 1 month stock				
Supply source of OI medications	Describe how the OI medications are supplied:							
Expiry date of OI medications	Medications should be used before the expiry date	> 3 months to expiry	3 months to expiry	2 months to expiry	1 month to expiry	Expired		
General record keeping at site	Target: 100% complete	100%	95 - 99%	90 - 94%	80 - 90%	< 80%		
Number of health personnel trained at Pharmacy		Number of staffs: Number of staffs trained (specify the type of training):						
General comments and suggestions								

Received by:

Name:..... Signature:..... Contact Number:.....



Laboratory

Facility's Name.....

Supervisor's Name.....

Date.....

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions		
State of Equipment										
CD4 machine & other equipment: Number and back-ups	Specify the number of the machine and other equipment:									
If the equipment not available, how are the investigations done for the clients?	Specify:									
Check maintenance records, calibration, storage, control, standards, etc.	Target: All machines are maintained according to the schedule	Good	Fair	Unacceptable						
CD4 testing / control (daily or on particular day)	Specify the day:									
Reagents and Test Kits										
Shortage of test kits and reagents over the past quarter	Yes: Shortage (specify duration of storage)				1 - 2 months	≥ 3 months				
	No: Some Stock (specify the quantity in terms of months of stock)	≥ 3 months stock	1 - 2 months stock	< 1 month stock						
Supply source of test kits	Describe how the test kits are supplied:									

Area of Supervision	Means of Verifications	Very Good	Good	Fair	Bad	Very Bad	Best Practices & Problems Observed	Comments & Suggestions
Reagents and Test Kits								
Expiry date of test kits	Kits should be used before the expiry date	> 3 months to expiry	3 months to expiry	2 months to expiry	1 month to expiry	Expired		
Management of test kits	Kits should be supplied from NACP and stored safely	Good		Fair	Unacceptable			
Storage of test kits according to national standard	Refer to storage condition provided by manufacturer	Good		Fair	Unacceptable			
Cost of HIV test per client	The cost of HTC and PMTCT is GHC0.00	Free for all services		Free for PMTCT services	Need some payment			
Cost of other baseline investigation (heamatology, chemistry, etc.)	The cost of HTC and PMTCT is GHC0.00	Free for all services		Free for PMTCT services	Need some payment			
Availability of Testing Consumables								
Syringes	No shortage	Some stock			Shortage			
Needles or Lancet	No shortage	Some stock			Shortage			
Gloves	No shortage	Some stock			Shortage			
Cotton wool	No shortage	Some stock			Shortage			
Disinfectant (Methylated spirit, Parazone, Soap etc.)	No shortage	Some stock			Shortage			
Other Consumables	No shortage	Some stock			Shortage			

[illegible]

Received by:

