Voluntary Medical Male Circumcision (VMMC)   Tool A – SOPs, Guidelines, Policies, Job Aids, and Staffing
External Quality Assurance (EQA)
Site Name:_____ Reviewer's Name:_____ Date:_____

This Tool (A) covers verification of the SOPs, guidelines, policies, job aids, and recording forms and registers related to VMMC services.

Reviewer Guidance:

Performance of each indicator will be assessed by documenting whether the guidelines, policies, etc. are available. The content does not influence whether the element is assessed as present (Y) or not present (N). If, however, the reviewer finds a document to be outdated or incomplete s/he must make a note of this. Some of the required documents may be found in national or international manuals kept on site.

Tool A should be completed by a thorough review of documents, supplemented by relevant discussions with key clinic personnel if additional issues need clarification. The reviewer will indicate either "Yes" (Y) if it is available and has been seen, or "No" (N) if it is not available. **Whenever "N" is checked, the reviewer should add an explanatory note. If uncertain, use the notes section to describe what is available**. If there is a date or version number on a document, please note this so we can confirm if it is the most recent.

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

These items need to be directly observed by the reviewer.

Question	Y	N	Notes
A1. **Patient Rights** – Is this document posted for patients to see? *If NO, skip to A3.*			
A2. Is the Patient Rights document in the local language?			
A3. **Staff Job Descriptions** – Are they available on site?			
A4. **Informed Consent Process** – Is there written guidance available at the site on properly obtaining informed consent from clients, specifically including			

processes and acceptable caregivers for consenting minors (e.g., written procedures, job aides, counseling guidelines)? (SIMS 5.4, Q3)			
A5. **HIV/AIDS Risk Reduction Counseling** – Are these guidelines available on site?			
A6. **HIV Testing** – Are these guidelines available on site? (Job aid or poster alone is not sufficient).			
A7. **STI Diagnosis and Treatment** – Are national guidelines available on site?			
A8. **Waste Management -** Are guidelines or SOPs on waste disposal on site? This includes disposal of biohazardous and non-biohazardous waste and disposable instruments.			
A9. **Client Record Forms** – Are blank (unused) VMMC client record forms available on site?			
A10. **Infection Prevention and Control** – Are these protocols available on site?			
A11. **Instrument Reprocessing** – Does the site use reusable instruments? **If no, skip to A12, if yes**, **please answer the following question.** Is an SOP available onsite that covers all steps of instrument reprocessing being performed there? (Includes all sites using reusable instruments, since some on-site steps are always needed.)			
A12. **Blood-borne Pathogen Exposure, including PEP guidelines** – Is a protocol or guidelines available on site?			
A13. **VMMC Surgical Manual** – Is this available on site? (WHO or national).			
A14. **Provider VMMC Training –** Have all providers have received initial and any partner or country-required refresher trainings on performing VMMC?			
A15. **Adverse Event (AE) Prevention and Management** – Is a written procedure or algorithm available for classifying, documenting and managing adverse events (including emergency complications and life-support measures) in the areas where VMMC surgery and clinical care are provided at the facility? (SIMS 5.3, Q3)			
A16. **Adverse Event (AE) Prevention and Management** – Are there meeting minutes from a facility-level AE review committee with notes reflecting that all moderate/severe AEs are reviewed at least monthly and corrective actions have been taken (as necessary)? (SIMS 5.3, Q4)			
A17. **Immediate Post-Operative Care** – Are these guidelines available on site? (These may be within the surgical manual).			
A18. **Post-Operative (return visit) Follow-up Protocol** – Are these guidelines available on site? (These may be within the surgical manual).			
A19. **Post-Operative Written Instructions** – Are these available for clients on site?			
A20. **Surgical Register** – Is this available on site?			
A21. **Adverse Event Register**– Is this available on site? *If NO, skip to A22.*			

Question	Y	N	N/A	Notes
A22. Does the AE register indicate which clients were referred for AEs?				
A23. Are the outcomes of AEs documented in the AE register? (Reviewer should verify the documentation of the resolution of an AE).				
A24. **Guidelines or Protocols for Medical Emergencies** (anaphylaxis, etc.) – Are these available on site?				
A25. **Minutes from Quality Improvement Team Meetings** - Are these available on site?				
A26. **Referral record**: Is a register(s) or other system(s) being used to track referrals made to key services and whether the beneficiary received those services? Please document which services are covered: STI treatment, HIV care, PLHIV support groups, OVC programs, TBHIV, condom and lubricant provision, and any others. *If NO, skip to A28.*				
A27. Are the outcomes of referrals documented in the referral record? (Reviewer should verify the documentation of the linkage to an STI program).				

Complete this section only if this site offers device-based VMMC.				
Question	**Y**	**N**	**N/A**	**Notes**
A28. Is ShangRing VMMC offered at this site? *If yes, please complete the following questions as appropriate.*				
A29. **Devices** -- Are guidelines on the use of the device available on site?				
A30. **Devices** -- Are guidelines/SOPs on monitoring, reporting and management of device-related AEs available on site (may be included in the device guidelines)?				
A31. **Devices** -- Are care instructions for clients **while wearing** the device available on site for the client to take home?				
A32. **Devices** -- Are care instructions for clients **after removal of** the device available on site for the client to take home?				
A33. **Devices** -- Is a record of clients referred for device-related adverse events available on site?				
A34. **Devices** -- Is there a record of outcomes for clients referred for device-related AEs available on site (verify documentation of the resolution of an AE)?				

Staffing			
Question	**Y**	**N**	**Notes**

A35. **Staffing** - In your observation today, was the client flow free of bottlenecks caused by insufficient staffing in one area? *If NO, skip to A37.*			
A36. **Staffing** - Please identify where the bottlenecks took place:			
A37. **Staffing** - Is staffing sufficient to let intake, education, HTC and individual counseling, medical screening and examination, and surgery all go on simultaneously?			
A38. **Staffing** - For the past 6 months, has staffing been sufficient to let services continue as scheduled, and meet any surge in demand, without interruptions due to staff availability?			
A39. **Staffing** – Has the site, partner, or national program determined a safe maximal number of VMMCs per hour per provider? (please ask what that number is)			
A40. **Staffing** – Does the site have a plan to respond to changes in client volume? (e.g. can they bring in more staff to meet demand)			
A41. **Staffing** – Does the site have a shortage of any particular type of staff? (e.g. counselors, providers, mobilizers; please ask the site manager and document the shortage staff type(s) in notes)			
A42. **Staffing** – Does the site have a surplus of any particular type of staff? (e.g. counselors, providers, mobilizers; please ask the site manager and document the surplus staff type(s) in notes)			

Additional Comments/Notes: