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Introduction to the HII Quality Checklist Tool

Why a quality checklist

This tool is designed to provide the prescribed user with information on how well the high impact interventions are implemented when compared to the guidelines provided in the concomitant toolkit available on TCI U. It will offer guidance on what components of the implementation process need an adjustment, which actions to take and who is responsible for them.

How to use the checklist

Format

The checklist is presented in a standards format and requires all verification criteria under a standard to be fulfilled (“YES” or “Not Applicable”) in order to be consider the activity as having met the particular standard.

Scoring

Each standard achieved scores 1 point. Summarize the total points at the bottom of the tool. Total achievable points vary per activity quality tool. Calculate a % performance score (Total points scored/Total achievable points).

Frequency

The tool can be filled in on a quarterly basis to allow time to carry out recommended actions and improve performance in subsequent cycles. Performance can be shared during the following events:

- Facility supportive supervision
- Monthly PIT meeting

Users

The following officers can use the tool

1. TCI Geography focal managers
2. TCI M&E officers
3. PIT members
4. Facility in-charge (where activity took place)
5. SKS Coaches



1. FP/AYSRH champions

Region:
Date completed:
By whom:

Verification criteria	Yes	No	NA	Comment
1. Availability of FP/AYSRH champions <i>(Review and confirm from champions orientation report/Probe HF in charge)</i>				
2. Champions are oriented/trained on advocacy tactics as well as FP/AYSRH to better advocate for FP/AYSRH. <i>(Review orientation/Training report/Probe HF in charge)</i>				
3. Champions are equipped with adequate and printed tools i.e. information packages on FP/AYSRH, advocacy briefs and IEC materials. <i>(Review samples of the tools)</i>				
4. Champions have a documented plan of FP/AYSRH activities and documentation of completed activities with clear outcomes <i>(Observe activity plans and the activity reports)</i>				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



2. FP commodity management

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. RH commodity managers at the facility and sub county levels are trained on RH commodity management <i>(Review the training/Orientation reports and probe health workers on their understanding of inventory management and quantification)</i>				
2. Regular commodity management review meetings with FP commodity managers reviewing commodity security and addressing challenges <i>(Observe for meeting reports with action plans)</i>				
3. Facility submits timely and accurate commodity management reports <i>(Confirm report submission dates for the last 3 months and assess the accuracy of quantities ordered based on consumption)</i>				
4. FP commodities are available at service delivery points and in store <i>(Confirm stock levels at SDP and store)</i>				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



3. On-site mentorship

Region:
Date completed:
By whom:

Verification criteria	Yes	No	NA	Comment
1. FP/AYSRH capacity gaps identification prior to mentorship (Review gaps assessment report)				
2. Availability of mentors with standardized knowledge and skill set (Review the mentors skills standardization report, Probe H/F or Unit In-Charge and beneficiaries)				
3. Does regular FP/AYSRH mentorships sessions take place (Review activity Reports, mentees log books, Probe H/F in charge and the beneficiaries)				
4. Mentees who successfully complete the mentorship process are assessed and certified (Observe for certificates of completion)				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



4. Whole site orientation

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. WSO plan with schedule of topics to meet staffs learning needs and current within 2months update period <i>(Review the whole site orientation facilitator report)</i>				
2. Facility meeting held to discuss the need and purpose of a whole site orientation activity was conducted. <i>(Review facility meeting report, Probe H/F or Unit In-Charge and WSO Facilitators)</i>				
3. Proper documentation of whole site orientation sessions. <i>(Review the facility WSO schedule and participants register)</i>				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



5. Integrated facility in-reach

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. Availability of a competent and well equipped in-reach team. (Probe to confirm a doctor, and support staff with adequate equipment to offer long-term and permanent FP methods are available)				
2. Schedule of in-reach activities from which the in-reach team selects and prioritizes facilities to conduct in-reach events. (Review the in-reach schedule)				
3. Effective community mobilization for in-reach events (Look for evidence of community mobilization activity-through community health workers and public announcements and distribution of flyers- from activity reports, Probe the in-reach team and facility manager)				
4. Post-in reach meetings held to review any operational or logistical issues that will inform future implementation of integrated In-reach activities. (Review activity reports)				
5. Service statistics data captured in the facility data collection tools and the national HIS (Review the facility FP service data collection tools and HIS summary reports)				
Total performance Score (%)				

Action plans

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



6. Integrated community out-reach

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. Health facility held a community outreach planning meeting with sub county/District team. (Review meeting report/Probe HF and Sub county HMTs)				
2. Effective community mobilization strategy used for out-reach event. (Look for evidence of community mobilization activity-through community health workers and public announcements and distribution of flyers- from activity reports, Probe the in-reach team and facility manager)				
3. Service integration occurred during outreach. (Review activity reports, Probe H/F or Unit In-Charge)				
4. Post-outreach event meeting held to review any operational or logistical issues to inform future integrated outreach activities. (Review activity reports)				
5. Service statistics data captured in the facility data collection tools and the national HIS (Review the facility FP service data collection tools and HIS summary reports)				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



7. FP/AYSRH facility integration

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. Facility held an FP/AYSRH integration feasibility review meeting (Review minutes of meeting/Probe the facility/departmental in charges)				
2. Capacity of service providers to integrate FP/AYSRH services built (Review report on FP/AYSRH whole site orientation, SKS coaching and other mentorship activities)				
3. Proper FP/AYSRH services data collection and reporting reports are available, and integration data is summarized from all service delivery points and reported to the HIS. (Review facility data collection tools and HIS summary reports)				
Total performance Score (%)				

Action Plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



8. Special family planning day

Facility name:

Date completed:

By whom:

Verification criteria	Yes	No	NA	Comment
1. A comprehensive SFPD schedule is available at the facility (Review SFPD schedule)				
2. A team of skilled providers are available to offer services as SFPD events (Observe SFPD schedule and probe H/F or Unit in-charge)				
3. Effective community mobilization for SFPD used (Look for evidence of community mobilization activity-through community health workers and public announcements and distribution of flyers- from activity reports, Probe the in-reach team and facility manager)				
4. Post-outreach event meeting held to review any operational or logistical issues to inform future integrated outreach activities. (Review activity report)				
5. Service statistics data captured in the facility summary tools and the national HIS (Review the facility FP service data collection tools and activity report)				
Total performance Score (%)				

Action plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



9. Community dialogue days

Region:
Date completed:
By whom:

Verification criteria	Yes	No	NA	Comment
1. Stakeholder planning meeting between community leaders and facility held to prepare for effective and open community dialogue <i>(Probe H/F or Unit In-Charge, observe meeting report and community dialogue plan)</i>				
2. Effective community dialogue mobilization strategy used <i>(Look for evidence of community mobilization activity-through community health workers and public announcements and distribution of flyers- from activity reports, Probe the in-reach team and facility manager)</i>				
3. Issues discussion and identification of solutions <i>(Review activity report for action plan)</i>				
4. Implementation of action plans are implemented <i>(Review follow up meeting reports, Probe the community dialogue day facilitators).</i>				
Total performance Score (%)				

Action plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



10. Increasing contraception access to adolescents and youth through pharmacies

Region:
Date completed:
By whom:

Verification criteria	Yes	No	NA	Comment
1. Mapping of pharmacies that meet the criteria <i>(Review the pharmacy mapping report and compliance with criteria of selected pharmacies)</i>				
2. Signed memorandum of understanding that clearly outlines the roles and responsibility of each stakeholder. <i>(Review the signed MOU)</i>				
3. Capacity building of selected pharmacists/pharmaceutical technologist on FP/AYSRRH provision <i>(Review training/coaching reports)</i>				
4. Service statistics data captured in the facility summary tools and the national HIS <i>(Review the pharmacy service data collection tools and HIS summary report)</i>				
Total performance Score (%)				

Action plan

Gap Identified	Recommended action	Person responsible	Resources required	Timeline



Performance Summary

HII	Total % performance score			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
1. FP/AYSRH champions				
2. FP commodity management				
3. On-site mentorship				
4. FP/AYSRH whole site orientation				
5. Integrated facility in-reach				
6. Integrated community outreach				
7. FP/AYSRH facility Integration				
8. Special family planning days				
9. Community dialogue days				
10. increasing contraception access to adolescents and youth through pharmacies				



Overall comments on performance progress