# Online Annex 2: Facility-level questionnaire for baseline assessment of differentiated HIV treatment

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Facility questionnaire on differentiated HIV treatment** | **Site:** |  |  |  |
| **1. The elements of differentiated HIV treatment** |  |  |  |  |
| Is ART delivery differentiated for clients who are established on ART? |  |  |  |  |
| Is ART delivery differentiated for clients with a high viral load? |  |  |  |  |
| Is ART delivery differentiated for clients with other medical needs? |  |  |  |  |
| Is ART delivery differentiated for pregnant and breastfeeding women? |  |  |  |  |
| Is ART delivery differentiated for children? |  |  |  |  |
| Is ART delivery differentiated for adolescents? |  |  |  |  |
| Is ART delivery differentiated for men? |  |  |  |  |
| Is ART delivery differentiated for key populations? |  |  |  |  |
| Is ART delivery differentiated for any other population? specify population |  |  |  |  |
| Is ART delivery differentiated for any contextual factors? |  |  |  |  |
| **2. The building blocks of differentiated HIV treatment** | **Adults** | **Adolescents** | **Children** | **Pregnant & breastfeeding women** |
| Where is ART delivered? (facility or facility & community) |  |  |  |  |
| What is the schedule for clinical follow up in the clinic? |  |  |  |  |
| What is the schedule for counselling follow up? |  |  |  |  |
| What is the schedule for laboratory follow up? |  |  |  |  |
| What is the maximum ART refill allowed for patients? |  |  |  |  |
| What maximum refill ( X months) is actually given routinely for clients who are established on ART? |  |  |  |  |
| Do patients see the nurse every visit or are clinical and refill visits differentiated? |  |  |  |  |
| Who performs the ART consultation? |  |  |  |  |
| Do patients collect ART as individuals? |  |  |  |  |
| Do patients collect ART in any group dynamic? |  |  |  |  |
| **3. Health care worker perspective** | **Adults** | **Adolescents** | **Children** | **Pregnant & breastfeeding women** |
| How many days of the week is ART given? |  |  |  |  |
| From what time is ART provided from and to? |  |  |  |  |
| How many clients does each HCW see on an ART day? |  |  |  |  |
| **4. Client perspective** | **Adults** | **Adolescents** | **Children** | **Pregnant & breastfeeding women** |
| How far are patients travelling to reach your clinic? |  |  |  |  |
| How long do clients wait from when they arrive to when they leave? |  |  |  |  |
| **5. Monitoring and Evaluation** | **Adults** | **Adolescents** | **Children** | **Pregnant & breastfeeding women** |
| Number on ART |  |  |  |  |
| Retention at 12 months % |  |  |  |  |
| Retention at 48 months % |  |  |  |  |
| Is there an appointment and tracing system? |  |  |  |  |