# Annual Unit Assessment

\*Conducted annually, like all the other IME activities.

(I) = interview coordinator

(E) =assessor can complete question

# Program Goals and Objectives

1. (E) Does it exist? PLEASE SEE PASA INTRO TO ANSWER THE FOLLOWING QUESTIONS:
   1. Goals:
   2. Objectives:

# Program management cycle

1. (E) Does it exist? PLEASE SEE PASA.4 TO ANSWER THE FOLLOWING QUESTIONS.
2. (E) GHAP DONOR Is this timeline/cycle being adhered to? Explain in the past year what scheduled program management activities have been met, and which ones have been delayed/not met and the reasons.
3. (E) PARTNER DONOR Explain in the past year what scheduled field implementation activities have been met, and which ones have been delayed/not met and the reasons.

# Coordinator and other program staff roles and responsibilities

1. (I) Are there clear delineations of roles between different levels of staff in the office (not field)? YES NO
2. (I) In the last year, were there clear backstopping plans in place when primary coordinator was absent? YES NO
3. (I) Do field staff have clear job descriptions? YES NO

# Cross unit coordination

ie the level of engagement and coordination with other units of the health organization in order to smoothly implement program

1. (I) What other units in your organization do you work with?

|  |
| --- |
| Unit Name |
|  |
|  |
|  |
|  |

1. (I) Think about the last full month prior to this interview. How many times did you coordinate with these units in that month?

# Finance

1. (E) Have they been submitted in a timely manner over the past year?  YES NO
2. (E) Did they follow agreed submission requirements? YES NO

# Trainings

1. (E) PLEASE SEE TRAINING EVALUATIONS.

# Health Information\*

1. (E) In the past year, did the coordinator approach you (unprompted) asking you for guidance about the data?
2. (E) If not, explain a time when you provided assistance without their request?
3. GHAP DONOR  What is the mechanism for providing feedback to the field sites?

# Resiliency\*

1. (I) PARTNER DONOR  Do they have protocols in place for security issues/situations? If yes, describe.
2. (I) Do they have back up plans if the donor is going to pull out? If yes, describe.
3. (I) Do they have referral system for ties to more complex health services delivery in case of complications? If yes, describe.

# Health Worker skills management

1. (I/E) GHAP DONOR  Does the administration have protocols in place to assess the health workers responsible for carrying out the unit intervention?  If yes, explain here and explain the last 6 month's summary on this.
2. (I/E) And if so, is there a plan for those HWs who do not pass the assessment? If yes, please explain.\*
3. (I/E) Please complete table

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Total Number | Total Number Passed | % Passed | Passing Score Standard for this level |
| Health Worker |  |  |  |  |
| VHW |  |  |  |  |
| Supervisor |  |  |  |  |

PLEASE SEE TRAINING EVALUATIONS IF NECESSARY.

# File Management

1. (I) Ask coordinator to pull up the “supplies” worksheet from the last 6 months.
   1. Were they able to locate this file?
   2. Did it have a non-meaningful name?
   3. Was it the most current file?
   4. Were there duplicates floating around in other locations?
   5. Are the formulas correct?
   6. Do they know what the columns mean?

# Supplies

1. (I/E) PARTNER DONOR Are supplies being ordered on time? Check the last 6 months. YES NO
2. (I/E) PARTNER DONOR Are supplies being delivered on time? Check the last 6 months YES NO
3. (I/E) PARTNER DONOR Are supplies being accounted for in the field? Check for a report form used to report medicines in the field. YES NO
4. (I/E) PARTNER DONOR Are supplies/inventory being tracked at the unit administration level (HQ, not field)? YES NO
5. (I/E) PARTNER DONOR Are supplies expiration dates being monitored/recorded? YES NO

# Target Populations/Beneficiaries

1. (E) What target population is this unit using as a basis for their program?