

# Report 1

Facility Name: —

Activity Name: DQA Q1, 2025

Submission Date: 2026-01-06T11:05:13.416Z

Reported By: —

Status: Pending

Overall Score: —

## Reviewer's Report

No review yet

## Regular Questions & Answers

Name of Organization Implementing the DQA	Hurst Frazier Trading
Reporting Period Verified & Date of Review:	12-Mar-1990
Name of Reviewer1 and Designation:	Phillip Roth
Name of Reviewer1 and Designation:	Hyatt Bennett
Name of Co-Reviewer1 and Designation:	Iris Barron
Name of Co-Reviewer2 and Designation:	Vielka Craig
Other Reviewers:	Necessitatibus anim
Name of facility M&E	Elvis Barnes
Name of facility ESM Lead	Walter Malone
Name of facility IHVN SI backstop	Basia Lowe
Name of person responsible for collating & submitting facility report	Ora Rodgers
Name of person responsible for entering data into IHVN IR & DHIS2	Clarke Sosa
Name of person responsible for generating NMRS line list	Violet Benson
What is the facility's TX_CURR	36
Last NDR upload (DD/MM/YYYY)	1997-03-16

<b>Name and designation of person responsible for NDR upload</b>	Neville Vang
<b>Number of dedicated facility M&amp;E staff</b>	786
<b>Number of Data Assistant(s)</b>	717
<b>If yes, specify/most recent training(s) received</b>	Ut corporis est cons
<b>Service Provision, Facility Support:</b>	ART Comprehensive Site
<b>Has site ever had a Comprehensive DQA before now?</b>	Yes
<b>Do you report to the GON?</b>	Yes
<b>At what level do you upload from?</b>	State Office
<b>How often is report uploaded on NDR?</b>	Anytime
<b>[object Object]</b>	Yes
<b>Are previous reports archived in the M&amp;E unit</b>	Yes
<b>Are there functional computers in the M&amp;E unit?</b>	Yes
<b>Have personnel working in data management processes been trained? If yes, fill 6.1. If No, go to 7</b>	No
<b>Can the facility DA demonstrate how to extract data or run queries required by service providers?</b>	No
<b>Can the facility DA demonstrate how to verify, validate and correct data extracted from the NMRS?</b>	No
<b>Can the facility DA use data extracted from the NMRS for reporting? If yes, request to sight evidence</b>	Yes
<b>Do you have a data validation protocol ?</b>	Yes
<b>[object Object]</b>	Yes
<b>PrEP Register</b>	Yes
<b>General ANC Register</b>	No
<b>PMTCT HTS Register</b>	Yes

<b>PMTCT Maternal Cohort Register</b>	Yes
<b>Child Follow up Register</b>	Yes
<b>PMTCT Delivery Register</b>	No
<b>PMTCT MSF</b>	Yes
<b>Referral Register</b>	No
<b>HIVST Register</b>	Yes
<b>HTS Register</b>	No
<b>HTS MSF</b>	No
<b>Care Card</b>	No
<b>ART Register</b>	Yes
<b>ART MSF</b>	No
<b>HIV Care Enrolment Register</b>	Yes
<b>Client Tracking Register</b>	No
<b>TB Preventive Therapy (TPT) Cohort Register</b>	No
<b>VL Monitoring Register</b>	Yes
<b>Facility DSD Register</b>	Yes
<b>HIV Patient Tracking Register</b>	No
<b>EAC Monitoring Register</b>	Yes
<b>This site's M&amp;E Unit backstop has (or has received) written guidelines or SOPs on ...</b>	Id mollit minima eu
<b>There is a documented organizational structure/chart that clearly identifies positions that have data management responsibilities</b>	Partly
<b>There is a training plan which includes staff involved in data-collection and reporting at all levels in the reporting process.</b>	Partly
<b>All relevant staff have received training on the data management processes and tools in the last 12 months.</b>	Yes Completely

<b>A senior staff member is responsible for reviewing the aggregated numbers quality of data (i.e., accuracy, completeness and timeliness) prior to the submission/release of reports</b>	No - Not At All
<b>A senior staff member is responsible for reviewing the quality of date (i.e. accuracy, completeness, integrity etc) of NMRS line list prior to the submission/release of reports</b>	Yes Completely
<b>The M&amp;E Unit has documented and shared the definition of the indicator(s) with all relevant levels of the reporting system (e.g. state, facility and service delivery points).</b>	Yes Completely
<b>[object Object]</b>	Partly
<b>,,, what they are supposed to report on.</b>	Partly
<b>... how (e.g., in what specific format) reports are to be submitted.</b>	No - Not At All
<b>... to whom the reports should be submitted.</b>	N/A
<b>... when the reports are due.</b>	N/A
<b>The M&amp;E Unit has identified a standard source document (e.g., medical record, client intake form, register, etc.) to be used by all service delivery points to record service delivery.</b>	N/A
<b>The M&amp;E Unit has identified standard reporting forms/tools to be used by all reporting levels.</b>	No - Not At All
<b>Clear instructions have been provided by the M&amp;E Unit on how to complete the data collection and reporting forms/tools including DHIS and forms on NMRS</b>	Yes Completely

<b>The data collected by the M&amp;E system has sufficient precision to measure the indicator(s) (i.e., relevant data are collected by sex, age, etc. if the indicator specifies disaggregation by these characteristics).</b>	Yes Completely
<b>All source documents and reporting forms relevant for measuring the indicator(s) are available for auditing purposes (including dated print-outs in case of computerized system).</b>	N/A
<b>The M&amp;E Unit has clearly documented data aggregation, analysis and/or manipulation steps performed at each level of the reporting system.</b>	Partly
<b>There is a written procedure to address late, incomplete, inaccurate and missing reports; including following-up with sub-reporting levels on data quality issues.</b>	N/A
<b>If data discrepancies have been uncovered in reports, the M&amp;E Unit or the Intermediate Aggregation Levels have documented how these inconsistencies have been resolved.</b>	Yes Completely
<b>Feedback is systematically provided to all sub-reporting levels on the quality of their reporting (i.e., accuracy, completeness and timeliness).</b>	N/A
<b>There are quality controls in place for when data from paper-based forms are entered into a computer (e.g., double entry, post-data entry verification, etc).</b>	N/A
<b>For automated (computerized) systems, there is a clearly documented and actively implemented database administration procedure in place. This includes backup/recovery procedures, security administration, and user administration.</b>	N/A

<b>There is a written back-up procedure for when data entry or data processing is computerized.</b>	Partly
<b>If yes, the latest date of back-up is appropriate given the frequency of update of the computerized system (e.g., back-ups are weekly or monthly).</b>	Yes Completely
<b>Relevant personal data are maintained according to national or international confidentiality guidelines.</b>	N/A
<b>... within each point of service/organization (e.g., a person receiving the same service twice in a reporting period, a person registered as receiving the same service in two different locations, etc).</b>	Yes Completely
<b>... across service points/organizations (e.g., a person registered as receiving the same service in two different service points/organizations, etc).</b>	Yes Completely
<b>The reporting system enables the identification and recording of a "drop out", a person "lost to follow-up" and a person who died.</b>	N/A
<b>The M&amp;E Unit can demonstrate that regular supervisory site visits have taken place and that data quality has been reviewed.</b>	No - Not At All
<b>Does the site M&amp;E officer generate routine gap analysis to show progress towards set targets?</b>	Partly
<b>If yes, is this shared with relevant thematic area leads and hospital management</b>	Yes Completely
<b>[object Object]</b>	No - Not At All
<b>Does facility upload at least once a week into NDR?</b>	No - Not At All
<b>Does the facility M&amp;E officer attend the monthly LGA/State M&amp;E meeting</b>	No - Not At All

....if yes, are reports submitted at the meeting?	No - Not At All
Laptops	14
Desktop	72
Phones	87
Samsung Tablets	63
Secugen scanners	8
NDR Upload	1996-03-05
CDR Upload	2016-09-08
NMRS backup	2000-07-04
Review the FP capture and recapture process. Verify why recaptured and replaced baseline clients are returning as “not matched”	Iste necessitatibus
Functional computers available for EMR use	No
Internet is available for clinic activities	No
Regular power supply or alternative (solar/inverter/Gen)	No
Facility is secured	No
Backup and restore procedures in place for the EMR	Partial
PIMS is operational at the facility	No
Deduplication protocol available and in use at the facility	Yes
Adequate FP capture points available? (>1 capture point for big sites)	Yes
Data integrity module in use at the facility	Partial
Timely and Daily uploads to the NDR, CDR and Backup repository (Verify)	No
Role-based access implemented	No
Password policy enforced	Partial

<b>Backup frequency (daily/weekly/monthly)</b>	No
<b>Data stored securely and encrypted</b>	Yes
<b>Staff understand data protection and confidentiality</b>	Yes
<b>Note the facility PBS numbers (Baseline, Recapture, Match, Invalid and Duplicate) on NDR</b>	Concurrent
<b>Verify that facility does not have backlog FP data on the EMR that needs to be uploaded to the NDR.</b>	Yes
<b>Check if facility has a list of assigned devices pasted on the wall.</b>	No
<b>State</b>	FCT
<b>LGA</b>	Aba North
<b>Facility Name:</b>	Rinze Primary Health Care Center

### Question Groups

#### quaterly agg data verification

Row	Value	Indicator Name	Source	Month
0	56	PMTCT_STAT_POS: Number of pregnant women tested HIV positive at first antenatal care visit (ANC1) [...	NDARS	January
1	89	PBS_CURR: Number of patients currently on treatment with PBS captured	Register	January

#### semiannual agg data verification

Row	Value	Indicator Name	Source	Month
0	42	POST_RESP : Number of people receiving post-gender-based violence (GBV) clinical care based on the m...	MSF	July
1	89	POST_RESP : Number of people receiving post-gender-based violence (GBV) clinical care based on the m...	Register	July

### modules

Row	Module Name	Latest Version Deployed
0	Aggregate-report	Yes
1	Aggregate-report	Yes

### Uploaded Files



No uploaded files