





Purpose of the quality assessment

This is a tool for assessing the quality of a Country's National Strategic Framework for the response to HIV and STIs. It was developed by Burnet Institute for use by National Planning Teams. When going through this quality assessment tool, it will be useful to have an external facilitator. You should allow two days to go through this, because the discussion of each item is an important part of preparing for the next stage of the Navigation Cycle.

A National Strategic Framework includes all components of 'The Three Ones', outlined by UNAIDS in 2001:

- One National Coordinating Authority
- One National HIV and STI Strategy
- One Monitoring and Evaluation System
- And, in many cases, one funding stream.

This tool has been adapted by Burnet Institute from a similar tool prepared by the AIDS Strategy and Action Plan, a service of UNAIDS provided by the World Bank. The Pacific Regional Planning, Monitoring and Evaluation Group adapted this tool in 2010 to make it more relevant for Pacific Island countries.

How to undertake the quality assessment

This tool has describes 10 Quality Criteria for a National Strategic Framework. Each of these includes a list of statements.

For each of the statements, the planning group should:

- 1. Discuss this statement and think about your country's experience.
- 2. Decide together whether your experience so far is "Not Strong", "OK", or "Very Strong". Then tick the relevant box. It is important to talk about this before ticking the box. Make sure that everyone agrees, not just the group leaders.
- 3. Decide together what comments you want to make about this statement, if any.

At the end of this process, the planning group will have a shared understanding of the current quality of your country's National Strategic Framework.

You will also have a good understanding of what you might now like to improve.

The table can be revisited at any time. Maybe at the end of the next planning process? Maybe in three years from now?

		Our	experienc	e is	
	Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
1	National Coordinating Authority	558		0.0.0.0	doctorment, trial count we change.
	There is one National Coordinating Authority. Please note its title in the comments column.				
	The National Strategic Plan says who is represented on it, who it reports to, how often it meets.				
	The Government leads this national coordinating authority and this has been approved by the relevant Government leader.				
	Civil society has representation on this authority.				
	There are Working Groups that report to this national authority about specific issues.				
	It is clear who people can go to if they want to suggest improvements to the national response, or if they want help to resolve a dispute about what should happen.				
	It is clear who coordinates technical assistance from organisations outside the country, so that this can be provided in line with the country's needs.				
	The activities of development partners, including the SPC and UN partners, are known by and approved by the National Coordinating Authority.				

It is clear who makes the final decisions about the national response.				
It is clear who provides the secretariat or other forms of support for this national coordinating authority.				
What else do we want to say about the national coordinating author	ity?			

		Our	experienc	e is	
	Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
2	National Strategic Plan (the existing plan or draft new plan)	Julia		Strong	ussessment: What could we change:
	There is a National Strategic Plan to guide the country's response to STIs and HIV.				
	This is genuinely national. It includes summaries of all programs that together make up a national response.				
	It outlines priorities for government, civil society, health sector and other sectors.				

The strategic plan includes plans for STIs as well as HIV.	
The strategic plan indicates how there will be access to Prevention for all those who are at risk.	
The strategic plan indicates how there will be access to Counselling and Testing for the people at highest risk.	
The strategic plan indicates how there will be access to HIV Treatment for all those who need this.	
The strategic plan indicates how there will be access to STI Treatment for all those who need this.	
The strategic plan indicates how human rights will be improved.	
The strategic plan indicates how gender issues will be addressed.	
The national strategic plan has a logical order. For example, it	
clearly states the situation, response review, overall goal, objectives and major groups of activities or interventions.	
The strategic plan identifies intended results for each program area.	
The intended results are based on the analysis of the information collected in the situation assessment and response review.	
The targets set by the indicators are SMART: Specific, Measurable, Achievable, Realistic and Time bound.	
The National Strategic Plan complements other plans, such as the regional plan (PRSIP2), National Health Plan or the National	

	Development Plan. It works to the same cycles (e.g. 2013-2017).				
	What else do we want to say about the National Strategic Plan?				
		Our	experienc	e is	
	Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
3	Preparing for a new National Strategic Plan: the Situation Assessment and the Response Review.				
3.1	The Situation Assessment				
	There is a national, up to date summary of the current HIV situation that is readily accessible to stakeholders.				
	There is a national, up to date summary of the current STI situation that is readily accessible to stakeholders.				
	These summaries include accurate and up to date information about prevalence and incidence of HIV and STIs in the country. It is clear how many infections occurred last year.				
	We have accurate and up to date information about sexual and other behaviours that are associated with HIV and STIs.				
	The HIV situation summary identifies which groups of people are infected with HIV and which groups may now be vulnerable.				

	HIV situation summary indicates how many people have been			
test	ed for HIV, and how many of these know their results.			
The	HIV situation summary indicates how many people are being			
trea	ted with antiretroviral drugs.			
The	HIV situation summary indicates how many people are likely to			
requ	uire treatment in the period of the next strategy.			
The	HIV situation summary indicates how many people with HIV			
are ı	receiving community based care and support.			
The	HIV situation summary indicates how many people with HIV			
may	require care and support in the period of the next strategy.			
	STI summary indicates how many people have been diagnosed			
	STIs and the type of evidence used to inform this figure (e.g.			
synd	dromic diagnosis, testing, epidemiological treatment).			
	STI summary indicates how many people have received			
trea	tment for each identified STI in the last year.			
The	HIV situation summary explains the extent of stigma and			
	rimination against people living with HIV and what types of			
disci	rimination are occurring.			
The	situation assessment describes how human rights affect			
peol	ple's vulnerability and access to treatment.			
The	situation assessment describes how gender influences the			
natio	onal HIV and STI situations.			

	What else do we want to say about the HIV and STI situations?			
3.2	The Response Review.			
	There is a summary of the most recent review of the national response to HIV and STIs.			
	This review included consultation with a wide representation of stakeholders.			
	The review describes the strategies and programs that are priorities for the country's response to HIV and STIs.			
	The review describes the range of national partners involved in the responses, including Government, Civil Society and the Private Sector.			
	The review describes how the HIV and STI programs link with broader sexual and reproductive health programs.			
	The review describes what is being done to reduce stigma and discrimination.			
	This review includes evidence for its findings on the strengths and weaknesses of the response.			
	The review includes recommendations for future directions.			

	Our	experienc	e is	
Key Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
Setting Priorities				
The National Strategic Plan has clearly stated priorities.				
Decisions about priorities and allocation of resources for the Strategic Plan are based on the evidence of where the epidemic is focused.				
For prevention activities, there is a balance between activities for most at risk populations and activities for awareness in the general community.				
For treatment activities, priority is given to services for the people most likely to be infected with STIs or HIV. Comment on what this means to your planning team.				
The plan notes how STI and HIV are integrated with other health issues, especially reproductive health and adolescent health.				
There is the right balance of prevention, treatment, and reduction of stigma and discrimination, reflective of the evidence. Comment on what this means to your planning team.				

The priorities are cost effective.			
Comment on what this means to your planning team.			
The activities in the plan are realistic to implement and can be further explained in annual activity plans.			
The plan indicates the resources required for each priority.			
The resources of the whole plan match the priorities (e.g. The top priorities attract most of the allocated resources).			
There are adequate resources allocated for Monitoring and			
Evaluation (e.g. 5% of the total budget).			
The plan says what will happen if there is not funding available for			
all interventions (e.g. that the top 5 priorities will be funded first, no matter what is the total resource pool)			
What else do we want to say about priorities?			

		Our experience is			
	Key Quality Criteria	Not	ОК	Very	Comments: How do we explain our
	Attributes that demonstrate the Criteria	Strong		Strong	assessment? What could we change?
5	One Monitoring and Evaluation system.				
	Results Based Monitoring and Evaluation.				

There is a Monitoring and Evaluation Framework, or a plan to	
produce one (this might be within the national strategic plan or	
might be a separate but linked document).	
All stakeholders agree to work with the one Monitoring and	
Evaluation Strategy, providing data and reviewing lessons learned.	
There is a small team to coordinate the routine and ongoing	
collection and analysis of data for Surveillance, Research,	
Monitoring and Evaluation.	
The Monitoring and Evaluation Strategy states what information	
will be collected and analysed, by whom and how often.	
Systems for Monitoring and Evaluation are in operation now.	
There is a system for surveillance of STI and HIV infections.	
Comment on what this means to your planning team. How accurate	
is our knowledge of the extent of STIs and HIV?	
The surveillance system is routine and ongoing, not just once every	
four years. Note: it might just be every four years because of the	
resources required. Please comment on what does occur.	
There is a system for collecting and analysing data on risk	
behaviours for HIV and STI.	
There is a system for collecting and analysis information about	
human rights and related behaviours and practices, e.g. stigma and	
discrimination and gender influences on vulnerability.	
•	

There is a system for reporting on activities and results so that the national coordinating authority can track exactly which components of the plan are working or not.	
There are records of how often the national coordinating authority meets and what it decides about the progress and effectiveness of the response.	
There is an annual review of the Monitoring and Evaluation results, to consider what should be changed in the national response as more information is available.	
The Monitoring and Evaluation Strategy states how information will be reported and disseminated to relevant people throughout the country, and who will distribute this information.	
Each program has an agreed way of reporting to the national Monitoring and Evaluation Team, including prevention programs and clinical service providers.	
The national coordinating authority and the Monitoring and Evaluation Team have a clearly defined relationship (e.g. they are the same people, or the M&E Team reports to others).	
There is a budget for Monitoring and Evaluation which makes clear the proportions allocated to priority data collection and to other M&E activities.	
What else do we want to say about Monitoring and Evaluation?	

At this point, you have completed half of the quality assessment. Please check for timing and adjust speed if you need to.

It's better to finish the whole assessment quickly than to finish only half of it with complete information.

	Our experience is				
	Key Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
6	Participation of national partners				<u> </u>
	All relevant government ministries are involved in the ongoing planning cycle. Note which ministries are involved and what they do about HIV and STIs.				
	All relevant civil society organisations are involved in the planning cycle, including faith based organisations, women's, youth and transgender groups.				
	Groups of most at risk populations, or their representatives, are involved in the ongoing planning cycle. Comment on how they are involved, and how this is meaningful.				
	People living with HIV are involved in the ongoing planning cycle. Comment on how they are involved, and how this is meaningful.				
	The National Planning Team, the National Coordinating Mechanism, and the National M&E Team all include women and men as members.				
	Partners together make sure that the national strategic framework is equitable, i.e. it considers all groups and individuals with the same respect and value. Comment on what this means to you.				

1
_

		Our experience is		e is	
	Key Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
7	Costing				
	The National Strategic Plan includes an outline of the resources and costs required to implement the priority programs.				
	There is an estimate of resources available, gaps, and possible sources of additional resources are identified. What costing tool or process is used to budget for implementation of the national plan and the M&E Framework?				

	There is a process for reporting on financial management to the national coordinating authority.				
	There are resources allocated for Management and Coordination.				
	What else do we want to say about costing?				
		Our	experienc	e is	
	Key Quality Criteria	Not	ОК	Very	Comments: How do we explain our
<u> </u>	Elements Attributes that demonstrate the Criteria Capacity development	Strong		Strong	assessment? What could we change?
	The National Strategic Plan describes which activities are to be implemented by government, by health sector services, by private health services, by civil society and by groups of people most at risk.				
	The strategic plan identifies the resources required to implement the priority programs, gaps in resources, and strategies to fill these gaps. People, training, equipment or other resources?				
	The strategic plan identifies how to ensure there will be good procurement and supply chains for diagnostic testing and for treatment drugs for STIs and HIV.				
	The National Strategic Plan states which civil society groups will work with "most at risk populations".				

The National Strategic Plan states how many health workers have the skills and resources to offer counselling and testing, where they are and what are the gaps.	
There is a national strategy for building skills of people and organisations working in prevention.	
There is a national strategy for building skills of people and organisations working in treatment.	
What else do we want to say about capacity development?	

			experienc	e is	
	Key Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
9	Policy Environment				
	The National Strategic Plan has been endorsed by the relevant Government Authority (e.g. the Minister of Health, Prime Minister, Minister of Finance, Minister of Planning).				
	The National Strategic Plan has been validated by relevant civil society stakeholders (e.g. at a National Validation Workshop).				
	The National Strategic Plan outlines how the legal and policy environment protects human rights, promotes gender equality, and promotes access of the most vulnerable people to prevention and treatment services.				

The National Coordinating Mechanism is aware of the strengths and shortcomings of the national policy environment, and has an annual discussion about what needs to be improved and how.	
The National Strategic Plan describes how the country will reduce Stigma and Discrimination.	
The Monitoring and Evaluation Strategy outlines what sort of information will be collected for ongoing measurement of stigma and discrimination, so that changes can be tracked over time.	
The National Strategic Plan is easy for many people to read and understand (e.g. It is a maximum of 30 pages long with annexes for more detailed M&E Plan and Annual Activity Plans).	
What else do we want to say about the policy environment?	

		Our experience is			
	Key Quality Criteria Attributes that demonstrate the Criteria	Not Strong	ОК	Very Strong	Comments: How do we explain our assessment? What could we change?
10	Action Plans				
	The National Strategic Plan covers a five year period. It allows for development of annual or biennial Action Plans or Operational Plans.				
	Annual or biennial Action Plans or Operational Plans have been developed to describe the activities - what will happen and when, by whom, for whom - to implement the agreed national response.				

Quality Assessment of National Strategic Framework 2013

The National Strategic Plan and the Annual Action Plans are clearly linked. For example, the Objectives and Outcomes in the national plan are linked to specific Activities in annual plans.	
The Annual Activity Plan clearly identifies the roles and responsibilities of those responsible for implementation.	
The Annual Activity Plan clearly identifies indicators for achievements of its activities and outputs.	
The Annual Activity Plan clearly identifies how the activities will be resourced.	
The Annual Activity Plan identifies gaps in resources and what will be done about finding resources to fill these gaps.	
What else do we want to say about Action Plans	

You have now reached the end of the Quality Assessment. Well done!