

## FY22 HRH Inventory Local Partner Training

September 8, 2022

PEPFAR

## Agenda Overview

<b>HRH Inventory</b> 8:30 - 8:35 am	Introduction & Recap
8:35 - 9:10 am elements	Overview of updated HRH inventory template data
9:10 - 9:45 am	HRH Inventory Template Demo w/ Staffing Examples
9:45 - 10:10 am account	Overview of Data Reporting / How to obtain a DATIM

10:10 - 10:30 am Next steps

## Introduction

Presenter: Jason Roffenbender, Health Workforce Branch





## Recap and new changes for FY22 HRH Inventory Tool

#### Recap

Background and rationale for HRH inventory reporting

Review of HRH inventory reporting process

Recap of existing data elements from last year

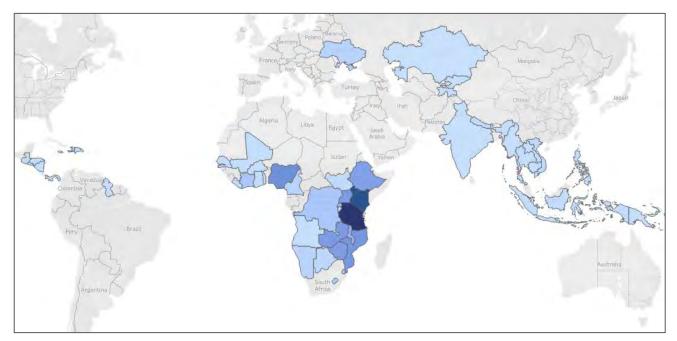
#### New changes

Updated timeline for HRH inventory reporting

Introduction of new data elements

Updated walkthrough of staffing scenarios

## Last year, USAID partners reported support of 210,000 staff, representing 58% of PEPFAR-supported health workers



**\$600** million

USAID HRH expenditures FY21

40%

USAID average HRH expenditures of total OU expenditures

## The HRH Inventory reporting requirement captures PEPFAR-supported staffing and related expenditures

- As PEPFAR looks forward to the next 5 years, understanding and optimizing HRH is critical to reaching and sustaining epidemic control.
- More robust data enables **further optimization** and **increases accountability** of HRH investment by providing insight in:
  - staffing function
  - location
  - compensation
- HRH Inventory data informs sustainability planning

## Alignment of the HRH inventory to expenditure reporting (ER)

- **HRH** Employment Titles are mapped to **ER** Cost Categories
- **HRH** Inventory collects Mode of Hiring (Salary, Contract, Nonmonetary only) aligned to **ER** Cost Categories
- **HRH** Primary Program Areas are the same as **ER** Program Areas
- **HRH** Inventory collects Expenditure, which is the same as **ER**

Keep an eye out for this note on later slides **HRH** Inventory separates Salary/Contract Expenditure from Fringe Expenditure, which is the same as **ER** 

## Format and reporting structure of the new HRH inventory





#### HRH Inventory Excel Template

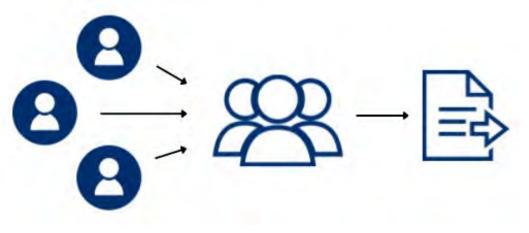
#### **Template Submitted to DATIM**

- The final version of the template will be available to download October 3 within the HRH DATIM App
- 1 template per mechanism
- 1 entry (row) in template per individual
- Do not modify the HRH template (e.g. do not add or delete columns)

- All those submitting or reviewing HRH Inventory templates will need to request an HRH DATIM account
- All data validation checks will be shown upon upload into DATIM and will need to be corrected before the template is accepted.

## Applicable mechanisms for HRH inventory reporting

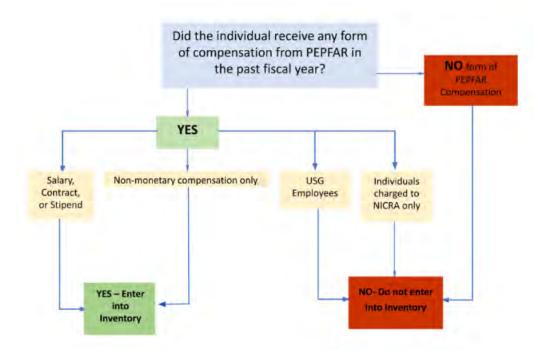
## All mechanisms that report to ER (Expenditure Reporting) should report to the HRH Inventory\*



Subrecipient partners submit completed templates to prime Prime partner consolidates prime and subrecipient staffing and submits **one template per IM** 

\*all mechanisms with expenditures associated with COP approvals

## Applicable individuals/ staff to be reported in the HRH inventory



Every individual that has received any form of compensation from PEPFAR over the past fiscal year:

- ALL types of staff: Health workers, program management, TA, HQ-based staff charged directly to the IM
- Salary, stipend, contract, fringe including nonmonetary support
- Prime and subrecipient IPs

Not included in the Inventory: • Staff charged to NICRA only • USG

### Non-monetary compensation, what is included and what is not

Non-monetary compensation **includes** anything purchased for the purpose of incentivizing work. Non-monetary **DOES NOT include** supplies or other resources required for fulfilling job duties

INCLUDED in non-monetary compensation	<b>Do NOT include</b> in non-monetary compensation		
Purchase of household goods, clothing, or other items for <b>personal use</b>	Gumboots, bicycles, or other supplies intended to be used to perform work		
Air time given to the individual exclusively for <b>personal use</b>	Air time for individuals that require air time to perform their work		
Purchase of travel for <b>personal use</b>	Reimbursement or purchase of travel for the purpose of traveling to a work site		

## FY22 HRH Reporting Timeline

Jason Roffenbender, Health Workforce Branch

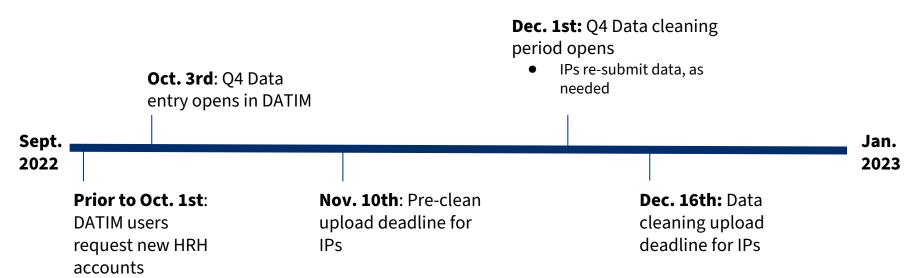




## FY22 HRH Inventory Reporting Timeline

#### **Current Reporting Timeline** (matches other PEPFAR data streams and is

included in the published <u>PEPFAR Data Calendar</u>):



# What is needed in order to complete the HRH inventory requirement?

#### 1. A copy of the OU specific FY22 HRH Inventory Template

- a. A final version of the template will be available within the HRH DATIM app starting October 3
- b. All versions of the template will be accepted in the DATIM app

#### 2. The HRH Inventory Guidance Materials

a. See DATIM Zendesk materials <u>here</u> (updated FY22 Guidance early next week)

#### 3. Internal Records

- a. HR/ Payroll
- b. Program Records that capture staff work and location

#### 4. An HRH DATIM Account

a. Register.datim.org (see later slides)



• What mechanisms need to complete and submit the HRH Inventory excel tool?

Response: All mechanisms that report in ER and that have expenditures associated with COP approvals.

- What types of staff should be included?
- a) Prime Partner
- b) Sub-Recipients
- c) Program Management
- d) Clinical and Ancillary Staff who Deliver Services
- e) Other Staff who provide technical assistance and support non-service delivery activities
- f) ALL of the above

Response: f) **All staff** that receive some form of support should be reported: health workers, program management, TA, and HQ-based staff charged directly to the IM. This applies to prime partner and subrecipient staffing. Staff receiving all types of compensation should be included (salary, stipend/contract, non-monetary support).

- Should staff working for subrecipient partners be reported in the HRH inventory?
- a) Yes
- b) No

Response: **a** ) **Yes** All PEPFAR-supported subrecipient staff working for a mechanism should be reported. There should be one template submission per IM, which should include staffing information for the prime partner as well as any subrecipients.

• When can partners begin to submit completed FY22 HRH Inventory templates into DATIM?

Response: HRH Inventory follows the standard <u>PEPFAR Reporting Calendar</u> for Q4**. DATIM will open October 3rd 2022.** 

### Overview of Key HRH Inventory Template Data Elements Presenters: Kyle Borces & Caroline Kasman, Health Workforce Branch

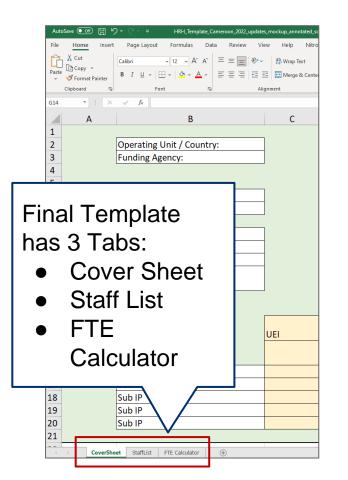




## What has changed in the HRH Inventory Template for FY22?

- **1. NEW** field to designate the subrecipient name if employed through sub-IPs
- 2. NEW field to identify national-level staff or if based outside of OU
- **3. NEW** field to designate primary beneficiaries for each worker
- **4. NEW** field to designate staff primarily working at community level
- **5. NEW** field to designate staff primarily providing technical assistance
- 6. NEW field that asks for total non-monetary compensation for each worker
- 7. **EXPANDED** Program Area list to provide more details on C&T, HTS, and PREV
- 8. **EXPANDED** Gender list to include 'nonbinary', 'transgender', and 'other' options
- **9. REFINED** the list of Employment Titles

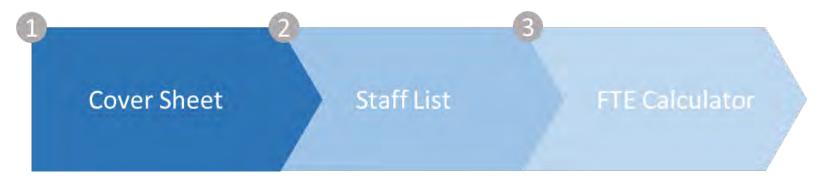
## **HRH Inventory Template**



- There are designated HRH Inventory Templates (Excel based) for each OU
- Each Mechanism must download, complete, and submit **one** template to DATIM
- This section will review key elements of the template

## **HRH Inventory Template**

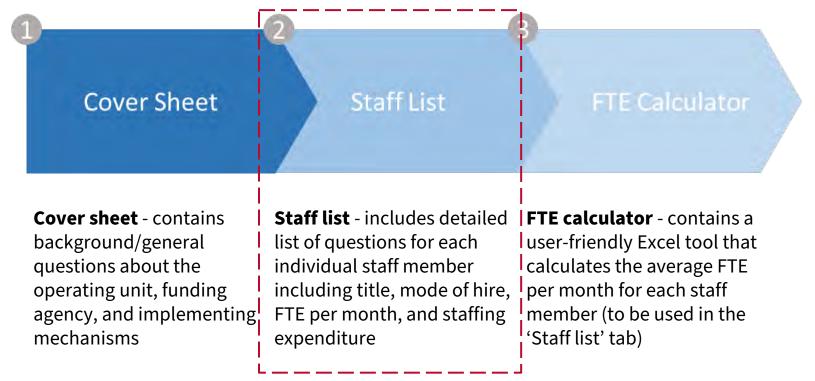
The template contains three main sections:



**Cover sheet** - contains background/general questions about the operating unit, funding agency, and implementing mechanisms **Staff list** - includes detailed list of questions for each individual staff member including title, mode of hire, FTE per month, and staffing expenditure **FTE calculator** - contains a user-friendly Excel tool that calculates the average FTE per month for each staff member (to be used in the 'Staff list' tab)

## **HRH Inventory Template**

Note: we will mainly focus on describing the data elements within the Staff List tab in this deck



## **Overview of template: Cover sheet tab**

Operating Unit / Country:		Cameroon
Funding Agency:		
Completion Date		
Completed By		
Mechanism ID	-	
Mechanism Name		
PRIME IP Point of Contact		
PRIME IP Contact Info		
	UEI	Name
Sub IP		
Sub IP		
Sub IP		
5 1 1 m		
Sub IP		

The first tab contains data fields asking for:

- Unique information about the IM, such as name and mechanism ID
- Name of the prime partner organization
- Name of the person at the prime IP who can be contacted for follow-up questions regarding the data submitted
- Complete list of sub IPs that were contracted by the prime partner organization

These elements must be completed by the Prime for the final template submission to the DATIM app. Sub recipients may choose to complete this tab, but only the consolidated template with Prime information will be submitted into DATIM

## **Overview of template: Staff list tab**

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Record Number (optional)		ne If Sub, Select IP Name	Gender	Employment Title	Mode of Hire	MOH Staff OR Seconded to MOH?		Average FIE per Month	Primarily support work in the community?	facility sites	Provide Technical Assistance?	Position based outside of OU?	PSNU	SNU2	Commun	Facility		Primary Program	Primary Beneficiary?	Deliver services DIRECTLY to beneficiaries?	In past year provided suppo for the COVID response?	Sum of Annual PEPFA t Expenditure, excludio Fringe and Non- Monetary		Annual PEPFAR re, Non-Monetary Expenditure, excluding Fringe	Comment
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The second tab is where data on individual staff is entered:

- One row entry per staff member
- Must complete all fields (with the possible exception of DATIM hierarchy (blue), record number, and comments see later slides)
- Only choose from drop downs, do not write in text
- Do not modify the template

# Order of questions and corresponding data elements on the *staff list* tab

- 1. Record Number optional
- 2. Employed through Prime or Sub IP
- 3. If Sub, Select IP Name
- 4. Gender
- 5. Employment Title
- 6. Mode of Hire
- 7. MOH Staff or seconded to MOH
- 8. Month of work in the past year
- 9. Average FTE per Month
- 10. Does this staff primarily support work in the community?
- 11. Does this staff member work in/support multiple sites (Roving Staff)?
- 12. Does this staff primarily provide technical assistance?
- 13. Is this staff member based outside of the OU?
- 14. DATIM Hierarchy (Geography)
- 15. What PEPFAR Program Area does the staff member PRIMARILY support?
- 16. Who is the primary beneficiary that is being supported by this staff member?
- 17. Does this staff member deliver services DIRECTLY to beneficiaries?
- 18. In the past year, has this Staff Member provided support for the COVID response?
- 19. Sum of Annual PEPFAR Expenditure for Staff Member: Salary, Contract, Stipend (USD)?
- 20. Expenditure on Annual Fringe from PEPFAR, if any (USD)?
- 21. Expenditure on Non-Monetary Costs, excluding fringe?

Legend

NEW EXPANDED UNCHANGED

## Gender

Question	Description	Notes
Record number (Optional)	This is an optional, alphanumeric field that can be assigned to staff entered in the reporting template	USAID does not recommend completing this field
Employed through Prime or Sub IP	Indicate whether the Prime or Subrecipient IP hired the PEPFAR- supported worker	If the individual is working for both the Prime and a Subrecipient IP, select their PRIMARY employer
If Sub, Select IP Name	If employed through a subrecipient, then please select the IP name from the dropdown	
Gender	Select the recognized gender of the PEPFAR-supported worker	Options: Male, Female, Transgender, Non-binary, Other, Don't Know

#### Legend

NEW EXPANDED

## Template data element: *Employment Titles*

D	E	F	G
Gender	Employment title	Mode of Hire	MOH Staff OR Seconded to MOH?
	Case Manager Case Manager for Social Services Case Worker Child/Youth Development Worker Community Health Worker (Any other CHW not alre Cough Monitor Expert Client HIV Diagnostic Assistant	Pac v	

#### Legend

REFINED

- Select the employment title that primarily captures the role of each individual
- Please note: The job titles may not exactly match the official job title of the individual. Select the employment title that *best* describes the official job title of the individual
- Each staff member should be represented in one row only
- Dropdown list of alphabetical titles
- All titles are defined in the HRH inventory handbook

## Template data element: How to determine Employment Title

Employment title should reflect the work being done, **NOT** training or qualifications



Example: A nurse who provides primarily provides facility management / administration and not nursing services should be reported in the template as a **Facility Administrator**, **not** as a nurse

## **Organization of Employment Titles**

	Full List	t of Employment Titles	Under Each ER Cost C	ategory
Employment	HCW: Clinical	HCW: Ancillary	Other Staff	
Categories (ER Cost Category)	-Doctor -Clinical Officer -Medical Assistant -Nurse -Auxiliary Nurse -Nursing Assistant -Midwife Auxiliary Midwife	-Peer Educator -Peer Navigator -Expert Client -DREAMS mentor -Economic Strengthening Facilitator -Prevention of HIV and Sexual Abuse Facilitator	Program Management Accounting     Program Management Administrat     Program Management Finance Wo     Program Management Legal Staff     Procurement / Grants Management     Other Program Management Staff     Facility Administrator     Laboratory	tive Staff /orkers f nt Staff
Employment Titles 🗕 🗕	-Auxiliary Midwife -Clinical Social Worker -Clinical/Retention Case Manager -Testing and Counseling Provider -Laboratory Technologist/Technician	-Community Mobilizer / Facilitator -Lay Counselor -Linkage Navigator -HIV Diagnostic Assistant -Lay worker providing adherence	-Laboratory Manager -Pharmacy Manager -Human Resource Manager -Cleaner / Janitor -Maintenance -Security Guard	Note: Program Management Staff limited to this set of employment titles
This is the only	-Laboratory Assistant/Phlebotomist -Pharmacy Assistant	support -CHW -Mother Mentor	-Transportation staff for personnel     -Transportation staff for commoditie     -Central / regional warehouse work	
element you will	-Pharmacy Technician -Pharmacist	-Community based TB worker -Social Worker	-Other supportive staff not listed (ex -Biostatistician	
select in the	-Psychologist	-Social Welfare Assistant	-Information Systems Worker	
template	-Psychiatrist -Psychology Assistant -Other clinical provider not listed	-Case Manager or case worker -Child/Youth Development Worker -Other community-based cadre	-M&E Officer / Advisor -Data Officer -Data Clerk -Data Managers -Trainer	
	For full list of de employment tit	efinitions of tles, please refer	- I rainer -Technical Advisor -Logistics Manager -Supply Chain Advisor -Epidemiologist	
		entory handbook	-Other Professional Staff	Important Note:
	<u>here</u>		1	Connecting HRH to ER <sup>30</sup>

- You have a medical doctor by training, but is working for your program as a Technical Advisor for HIV care and treatment. Should you select "Doctor" or "Technical Advisor" as the employment title?
- a) Doctor
- b) Technical Advisor

*Response: Technical Advisor.* You should select an employment title based on the job the person is hired to do - not based on their education level or qualifications.

## Template data elements: *Mode of Hiring*

E	F	G
Employment title	Mode of Hire	MOH Staff OR Seconded to MOH?
	Salary Contract Non-Monetary ONLY	

#### Legend

UNCHANGED

Indicate **the mode** *or how* the individual is hired. Select the option that best reflects the primary mode of hire for each staff.

- <u>Salary</u> is defined as PEPFAR-funded compensation for workers who are employed by an IP and receive a salary or wage. *Salaried staff must enter both salary and fringe amounts (see later slides)*
- <u>Contract</u> is defined as PEPFAR-funded compensation through contract(s) for a worker who is not directly employed by an IP, but contracted to perform services. *Note:* This includes PEPFARsupported workers that receive stipends.
- <u>Non-Monetary ONLY</u>
  - Defined as PEPFAR-funded compensation for workers that is provided in the form of non-monetary compensation
  - This can include purchased goods (e.g. household goods, clothing, etc.), air time (e.g. phone cards), or travel (e.g. travel reimbursement) for **personal use**.
  - Non-monetary DOES NOT include supplies or other resources required for fulfilling job duties

Please note that these are mutually-exclusive fields. For example, if an individual receives both a salary and non-monetary compensation, select Salary as the mode of hire.

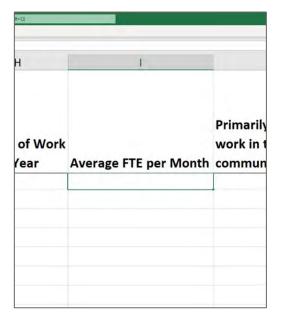
## Template data elements: *MOH staff*, and *Months of work*

Question	Description	Notes
MOH Staff or seconded to MOH	Indicate if the individual supported by the IM is officially designated as a government MOH staff or seconded by PEPFAR to serve in that capacity	
Month of work in the past year	Indicate the total number of months the PEPFAR-supported worker worked during the last USG fiscal year (October 1 – September 30) in this role	<ul> <li>If the worker worked for part of a month, count the number of weeks worked in the partial month (no need to count the number of days), and include as a decimal</li> <li>For example, if a doctor worked 3 weeks in one month, that would be counted as 0.75. It is not necessary to subtract regular leave days when calculating (count paid leave days as work)</li> </ul>

#### Legend

UNCHANGED

## Template data element: *Average Full Time Equivalence (FTE) per Month*



Legend

UNCHANGED

**Full-Time Equivalent (FTE)**: A way to understand and measure staffing size when the number of hours worked vary by worker

Enter the average percent of full-time equivalent (FTE) worked by the individual staff per month.

- Enter free text, value 0 1.0
- Reported as a decimal, where 0 = no work on average per month, and 1 = full time work per month.
- Only enter the FTE supported by PEPFAR on the IM being reported. Do not report FTE supported by MOH or other entities.

### FTE Calculator Examples

• For staff that work less than full-time, please utilize the FTE Calculator to assist in entering average FTE field.

FTE Calculator Option	Example	Average Monthly FTE
1. The PEPFAR worker's hours generally remain constant per week	A nurse works 20 hours per week each week all year	0.5
2. The PEPFAR worker's hours generally remain constant per month	A case manager works 50 hours every month all year	0.289
3. PEPFAR worker's hours differ per week in a month	A data clerk works 40 hours for three weeks and 20 hours the last week of each month	0.875
4. PEPFAR worker's hours vary month to month	A community health care worker works 40 hours per month from Jan-Mar, but does not work the rest of the year	0.059
*These examples assume a full time wo	ork week is 40 hours, this can be adjusted using line	4 in the FTE calculator

## **Overview of the FTE Calculator**

5	C	6
Average FTE per Month Calculator Tool for Column H in HRH Inventor	v Template	
	,,	
To use this calculator: 1 Enter the # of hours in a standard full time work week, line 4, blue box		
<ol> <li>Choose which of the 4 options best represents your PEPFAR supported w</li> </ol>	unches	
3. Enter values in yellow box(es) of the corresponding option to generate Ave	rage Monthly FTE (green bax).	Sec. 2.2
4. If your worker has no hours worked for a given week/month, enter 0 in the	corresponding bax, DO NOT leave	the box blank.
S. Enter Average Montbly FTE into the HRH swentory Template		
Enter # of hours in a standard full time work week	1	
Standard full time work weeks are typically 40 or 36 hours		
Option 1: The PEPFAR worker's hours generally remain constant per	week	
Ex. Nurse works 20 hours per week each week all year, enter 20 in the yellow	w bex	
Enter number of hours the PEPFAR supported worker worked per week	٥	
Average Batthly FTE	ENO	
Option 2: The PEPFAR worker's hours generally remain constant per	month	
Ex. Case manager works 50 hours every month, enter 50 in the yellow box		
Enter number of hours the PEPFAR supported worker worked per month-	۵	
	ENO	
Average Monthly FTE	epvp	
Option 3. PEPFAR worker's hours differ per week in a month		
Ex. Data clerk works 40 hours for three weeks and 20 hours the last week of	each month, enter 40 for weeks 1	3 and 20 for week 4
	and the second s	and a state of the
Enter number of hours for week 1	•	
Enter number of hours for week 2	0	
Enter number of hours for week 3	a.	
Enter number of hours for week 4	0	
Average Monthly FTE	#DV/P	
Note if the PEPFAR supported worker does not have hours for one or more a	f the weeks, enter 0	
Option 4. PEPFAR worker's hours vary month to month	a service and a	1
Ex. Community health worker works 40 hours per month from Jan-Mar, but do- enter zero for other months	es not work the rest of the year, er	tter 40 for Jan. Feb, and Mar.
	# Hours Worked # Vion	ing Hours in that month
Enter number of hours for month 1 (Oct '20)	0	0
Enter number of hours for month 2 (Nov '20)	0	0
Enter number of hours for month 3 (Dec '20)		

#### Average FTE per Month Calculator Tool for Column H in HRH Inventory Template

#### To use this calculator:

- 1. Enter the # of hours in a standard full time work week, line 4, blue box
- 2. Choose which of the 4 options best represents your PEPFAR supported worker.
- 3. Enter values in yellow box(es) of the corresponding option to generate Average Monthly FTE (green box).
- If your worker has no hours worked for a given week/month, enter 0 in the corresponding box, DO NOT leave the box blank.
   Enter Average Monthly FTE into the HRH Inventory Template

Enter # of hours in a standard full time work week	0
*Standard full time work weeks are typically 40 or 36 hours	
Option 1: The PEPFAR worker's hours generally remain constant per week	
Ex. Nurse works 20 hours per week each week all year, enter 20 in the yellow box	
Enter number of hours the PEPFAR supported worker worked per week:	0
Average Monthly FTE	#DIV/0!

## Template data element: *Primarily support in the community*

	1	К
verage FTE per Month	Primarily support work in the community?	Work in or support multiple facility sites (Roving Staff)?
Yes		1
No	[	

#### Legend



- This refers to staff primarily delivering or supporting the delivery of non-facility based activities at the community level (e.g. social mobilization, health education, etc.)
- Some examples of community-level staff can include:
  - Community health worker
  - Peer educator
  - Peer navigator
  - DREAMS mentor
  - Community mobilizer / facilitator
  - Prevention of HIV and sexual abuse facilitator

## Template data element: Work in Multiple Sites (Roving Staff)

К	L
Work in or support multiple facility sites (Roving Staff)?	Technical Assistance staff?
	*
	Work in or support multiple facility sites

#### Legend

UNCHANGED

- **Roving Staff Definition:** PEPFAR-supported worker who provides services at multiple *facility* sites on a regular basis
- Enter yes/ no for each individual staff:
  - **NO:** Individual staff **do not** provide work at multiple facility sites. This includes workers that occasionally or rarely provide services to more than one site as the worker does not provide services to more than one site on a regular basis
  - **YES:** Individual staff **does** work at multiple facility sites.
- Roving Staff are only associated w/ site level program areas and should be reported to the community level (see later slides)
- Roving Staff are only associated with facilities, a staff member working across communities or above-site entities should answer NO.

## Template data element: *Technical assistance staff*

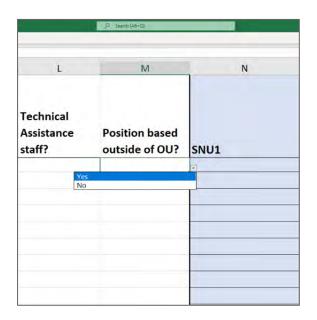
К	L	M
Work in or support multiple facility sites (Roving Staff)?	Technical Assistance staff?	Position based outside of OU?
Yes		

#### Legend

NEW

- **Definition:** Technical Assistance (TA) staff primarily support/improve the delivery of services, but do not directly interact with patients or beneficiaries in response to their health care needs
- Examples of TA activities can include:
  - Conducting training workshops to improve technical capacity of staff
  - Provide expert guidance on specific topics (e.g. monitoring and evaluation, supply chain management, health financing, etc.)
- All above-site individuals that primarily facilitate or strengthen service delivery providers should select "Yes" in answer to this question

# Template data element: *Is this position based outside of the OU?*



#### Legend

NEW

- Please indicate whether this position is primarily based in a location outside of the operating unit (OU)
- These INTERNATIONAL WORKERS, such as U.S. based staff that spend a portion of their time supporting the IM, should leave all geographic hierarchy columns blank, unless supporting an IM in a specific PEPFAR Region, in which case they should select the country in SNU1 (Column N).
  - Staff that work in a position based outside of the OU should select Above Site or Program Management program areas

# Template data element: DATIM Geographic Hierarchy

PSNU/Community	Facility	Valid OU
		vanu oo
Cite Verte	Asssavie	Valid

#### Legend

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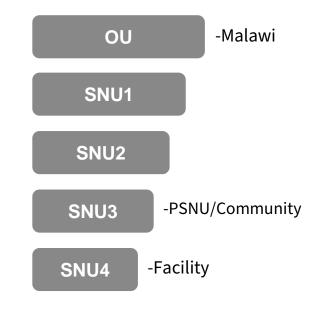
- Select the DATIM Geographic Hierarchy component that corresponds to the primary location where work was performed.
- In instances where individuals work in multiple locations, indicate where the majority of work was performed. If work is split evenly, choose one.
- Note: You must fill out the template from largest geographic area (left most column) to smallest (see next slides to determine how to report each type of staff)
- Hierarchy components on all templates (there are three types templates (see later slides))
  - OU (Regional Only)
  - SNU1
  - PSNU
  - Community (Select templates only)
  - Facility

# Template data element: DATIM Hierarchy Example - Malawi

**Key Definitions** 

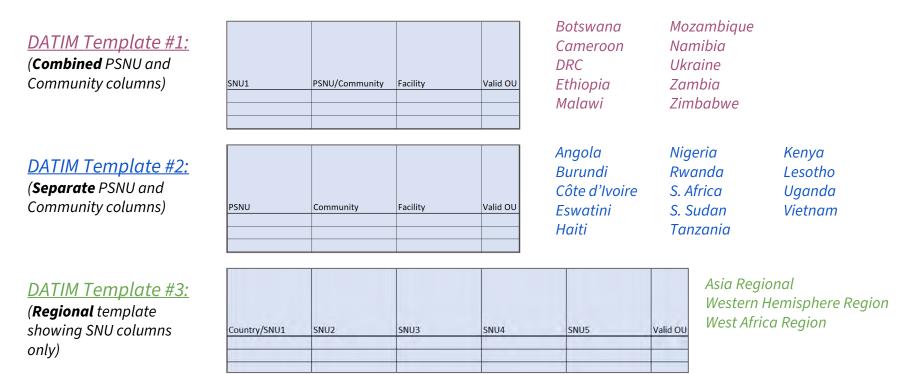
- **OU** Operating Unit. Either a Country or Region.
- **SNU** Sub-National unit. A smaller geographic area than the OU. (SNU1 is larger than SNU2, etc.)
  - **PSNU** Priority SNU. The geographic unit/level at which PEPFAR program targets are set
  - **Community** A geographic area/unit higher than the facility level, sometimes equivalent to the PSNU
  - Facility lowest SNU in the DATIM hierarchy





# Template data element: DATIM Hierarchy

Three are three different types of HRH data collection templates:



# Examples of locations of workers

- Each entry must complete the DATIM Hierarchy down to the *appropriate level*
- The appropriate level is based on the location of the worker
- The location of work is defined as **where** the individual performs their work

# DATIM Hierarchy option 1: OUs with PSNU/Community Level

	OUs with cor	mbined PSNU/Commu	nity Columns		
Location of Work	Work in or support multiple sites (Roving Staff)?	SNU1	PSNU/Community	Facility	Botswana Cameroon DRC Ethiopia Malawi Mozambique
Outside of OU	No	No	No	No	Namibia Ukraine
National and Military	No	Yes	No	No	Zambia Zimbabwe
Above Site Workers	No	-	n of Geographical Selections <b>ve Facility</b>	No	
Community	No	Yes	Yes	No	
Roving Across Facilities	Yes	Yes	Yes	No	1
Facility/ TA at one facility	No	Yes	Yes	Yes	

# *DATIM Hierarchy option 2:* OUs with separate PSNU and Community Levels

	OUs with separate PSNU and Community Columns						
Location of Work	Work in or support multiple sites (Roving Staff)?	SNU1	PSNU	Community	Facility	Angola Burundi Côte d'Ivoire	
National and Military	No	Yes	No	No	No	Eswatini Haiti Nigeria	
Above Site Workers	No	Any valid combination of Geographical Selections <b>Above</b> <b>Facility</b>			No	Rwanda S. Africa S. Sudan	
Community	No	Yes	Yes	Yes	No	— Tanzania Kenya	
Roving Across Facilities	Yes	Yes	Yes	Yes	No	Lesotho Uganda Vietnam	
Facility / TA at one facility	No	Yes	Yes	Yes*	Yes		

\*If community is not known, choose the same value as the PSNU

# DATIM Hierarchy option 3: OUs using Regional Level Templates

	Regional Hierarchy Columns						
Location of Work	Work in or support multiple sites (Roving Staff)?	Country/SNU1	Any valid combination of Geographical selections <b>above</b> <b>Facility Level</b>	Any valid combination of Geographical Selections <b>Stopping at and</b> <b>including PSNU</b>	Any valid combination of Geographical Selections down to the <b>Facility Level</b>	Western Hemisphere Region	
International	No	Yes				West Africa Region	
National, Military	No	Yes	Yes				
Above Site Workers	No	Yes	Yes				
Community	No	Yes		Yes			
Roving Across Facilities	Yes	Yes		Yes			
Facility / TA at one facility	No	Yes			Yes		

# **Knowledge Check**

- For community workers not attached to specific facilities, how would you answer the question "does staff work in or support multiple sites"?
- a) Yes
- b) No

Response: **b**) **No** Staff that are working only at the community and are not attached to any facilities should answer no. This question is intended to capture facility-based workers that move across multiple facility sites.

# Template data elements: Primary Program Area

T		U	V
Valid OU		Primary Program Area?	Primary Beneficiary?
Vanu	Above Above Above Above Above	Site: Blood supply safety Site: HMIS, surveillance, & research Site: Human resources for health Site: Injection safety Site: Laboratory systems strengthening Site: Laws, requilations & policy environment Site: Policy, planning, coordination & manage Site: Procurement & supply chain managem	

#### Legend

EXPANDED

*Important: Connecting HRH to ER* 

Select the primary PEPFAR program area that the individual staff supports.

- If the individual supports multiple program areas, please select the one that occupies the majority of their time.
  - If the individual supports two areas equally, please select one to report. The other may be listed in the comments section, if desired
- Only workers who support work at a community or facility (including rovers) can select a Site Level program area, as per the Financial Classification definition of Site Level. All others must select an Above Site program area.

# **Overview of UPDATED** *Program Area Options*

	Site Level			At	pove Site
Prevention (PREV)	Socioeconomic (SE)	Testing (HTS)	Care and Treatment (C&T)		
Comm. mobilization, behavior & norms change	Case Management	Community-based testing	HIV Clinical Services	Blood supply safety	Policy, planning, coordination & management of disease control programs
Condom & Lubricant Programming	Economic Strengthening	Facility-based testing	HIV Drugs	HMIS, surveillance, and research	Procurement & supply chain management
Medication assisted treatment	Education Assistance	General HTS	HIV Laboratory Services	Human resources for health	Public financial management strengthening
PrEP	Food and nutrition		General C&T	Injection safety	Laws, regulation, and policy environment
Primary prevention of HIV and sexual violence	Legal, human rights & protection			Laboratory systems strengthening	General above site
VMMC	Psychosocial support				
	General socioeconomic				
			Program Managem	ent	

# Summary of Locations of Work and Program Area

Reminder!	Location of Work	Primary Program Area
You have already determined location of	Above Site	Above Site (ASP) or Program Management
work in the DATIM Hierarchy	Community	
section	Roving Staff	Site Level (C&T, HTS, SE, or
	Facility	Prev.)

# **IMPORTANT Note about Primary Program Area**

If the PEPFAR-supported worker works on more than one program area you must:

- 1. Choose a *primary* program area
- 2. Report FTE and Expenditure (\$\$) for the **entire** worker, not just for the primary program area

Example: You are reporting a full-time nurse who spends <sup>3</sup>/<sub>4</sub> of her time on Care and Treatment and <sup>1</sup>/<sub>4</sub> of her time on Testing. Total annual expenditure is \$2,500.

## You would report this worker on one line in the template:

Primary Program Area = Care and Treatment FTE = 1 Expenditure = \$2,500

## Template data element: *Primary beneficiary*

U	V	W
Primary Program Area?	Primary Beneficiary?	Deliver services DIRECTLY to beneficiaries?
		v

Legend

NEW

Please indicate the primary beneficiary of services provided/supported by this staff member:

- 1. Females
- 2. Females: Young Women & Adolescent females
- 3. Males
- 4. Males: Young Men & Adolescent Males
- 5. Non-Targeted Pop
- 6. Non-Targeted Pop: Children
- 7. Non-Targeted Pop: Young People & Adolescents
- 8. OVC
- 9. Pregnant & Breastfeeding Women
- 10. Key Populations
- 11. Priority Pops

See detailed guidance on each primary beneficiary in the PEPFAR <u>Handbook</u>

### Template data element: *Service and Non service Delivery (SD/NSD)*

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U		v	W	
Primary Program Area?	Primary B	eneficiary?	Deliver servi DIRECTLY to beneficiaries	for
			-	•

#### Legend

UNCHANGED

- Select whether the individual directly provides services to beneficiaries or supports non-service delivery activities:
  - Direct **Service Delivery (SD):** Program activities involving direct interaction with the beneficiary are defined as **service** *delivery*.
    - Interactions may be in person, or through other mediums, such as telehealth.
    - Only employment titles of clinical and ancillary staff
    - **Non-Service Delivery (NSD):** Program activities that support, facilitate, or strengthen the facility, site, service providers, or subnational unit or national system are defined as **non-service** *delivery*.
      - Applicable to program management staff and other staff
      - All above-site programs areas are, by definition, nonservice delivery.
- There may be instances where staff provide both service-delivery and non-service delivery. For reporting, please select the type of interaction that the worker provides **most often**.

## Template data elements: COVID-19 support

	Sum of Annual
In past year provided support for the COVID response?	PEPFAR Expenditure, excluding Fringe and Non-Monetary Expenses
	provided support for the COVID

#### Legend

UNCHANGED

- Indicate whether the individual supported delivery of COVID-19 specific services at any point during the reporting period
- Supporting the COVID response may include service delivery, such as COVID testing or administering vaccines, and can also include administrative support, such as funds disbursement for the COVID-19 response

## Template data elements: *Expenditure*

The HRH Inventory collects **Expenditure**, which is the same as ER

Expenditure is how much was spent in the last fiscal year on the PEPFARsupported worker

The HRH Inventory **does not** collect annual salary

The HRH Inventory collects Expenditure in three columns

- 1. Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses
- 2. Annual PEPFAR Fringe Expenditure
- 3. Annual Non-Monetary Expenditure, excluding Fringe

# Template data elements: *Sum of Annual PEPFAR Expenditure, excluding Fringe*

Y	
Sum of Annual PEPFAR Expenditure, excluding Fringe and Non-Monetary Expenses	Annual Fringe
	Sum of Annual PEPFAR Expenditure, excluding Fringe and Non-Monetary

#### Legend

UNCHANGED

Enter the total amount expended on the individual staff's compensation, excluding fringe and non-monetary expenditure, over the past fiscal year

- Free text, numeric
- All Salaries, wage, contract fees and other payments made to staff should be entered here
- All PEPFAR expenditure data must be reported in United States dollars (USD)
- Include expenditures from October 1, 2021 to September 30, 2022

## Template data elements: Annual PEPFAR Fringe Expenditure

Y	Z	1
nnual xpenditure, Fringe and etary	Annual PEPFAR Fringe Expenditure	Annual P Non-Mor Expendito excluding

#### Legend

UNCHANGED

Enter the total amount expended on individual staff's fringe benefits.

- Free text, numeric
- Fringe should include the cost of employer's share and should exclude any fringe benefits that are included as part of an approved indirect cost rate
- Include expenditures from October 1, 2021 to September 30, 2022

## **Overview of Annual PEPFAR Fringe Expenditure**

Included Costs	Excluded Costs
<ul> <li>Fringe benefits in the form of regular compensation paid to employees during periods of authorized absences from the job, such as vacation, sick leave, military leave.</li> <li>Fringe benefits in the form of employer contributions or expenses for social security, employee insurance, workmen's compensation</li> </ul>	<ul> <li>Stipends, cash awards, bonuses or performance- based pay should all be entered in the "Sum of annual PEPFAR Expenditure, excluding fringe."</li> <li>PEPFAR funding for the construction or renovation of housing for healthcare workers, even if in place of providing a housing allowance to obtain housing on the market, should not be included in the HRH</li> </ul>
insurance, pension plan costs, etc.	Inventory.
• Other allowable costs for fringe benefits (see OMB Circular A-122), such as housing assistance and rural	<ul> <li>Costs of fringe benefits that were classified as indirect</li> </ul>

Circular A-122), such as housing assistance and rural housing allowance.

59

# Template data elements: *Annual PEPFAR Non-Monetary Expenditure, excluding Fringe*

			Kyle Borces (8 🖉
Z	AA	AH	
Annual PEPFAR Fringe Expenditure	Annual PEPFAR Non-Monetary Expenditure, excluding Fringe	Comments	

#### Legend

NEW

- Enter the total amount expended on nonmonetary expenditure, excluding Fringe (in USD)
- This field aims to better capture individuals that PEPFAR is relying upon for implementing program activities, but are **not receiving monetary compensation** (i.e. salary or stipend)
- This may include unpaid staff such as volunteers that do not receive a salary/stipend, but instead receive household goods, phone cards, travel reimbursement, etc. for **personal use**
- This does **NOT** include supplies, equipment, or other resources required for fulfilling job duties

## Summary of Mode of Hiring and Expenditure (USD\$) for <u>Salaried Workers</u>

	Staffing Scenario Examples	Mode of Hiring (column F)	Sum of Annual PEPFAR Expenditure, excluding Fringe (column Y)	Annual PEPFAR Fringe Expenditure (column Z)	Annual PEPFAR Non-Monetary Expenditure (column AA)
1	Salaried Worker		Salary Expenditure	Fringe Expenditure	
2	Salaried Worker receiving an additional smaller stipend	Salary*	Salary Expenditure + additional stipend expenditure	Fringe Expenditure	
3	Salaried Worker receiving an additional non-monetary amount		Salary Expenditure	Fringe Expenditure	Non-monetary compensation estimate

\* All Salaried workers must enter an amount for fringe, if the worker does not receive fringe, enter zero

## Summary of Mode of Hiring and Expenditure (USD\$) for <u>Contract Workers</u>

	Staffing Scenario Examples	Mode of Hiring (column F)	Sum of Annual PEPFAR Expenditure, excluding Fringe (column Y)	Annual PEPFAR Fringe Expenditure (column Z)	Annual PEPFAR non-monetary expenditure (column AA)
1	Contract Worker		Contract Expenditure		
2	Stipend Worker	Contract	Stipend Expenditure		
3	Contract Worker receiving fringe benefits		Contract Expenditure	Fringe Expenditure	
4	Stipend Worker receiving non- monetary compensation		Stipend Expenditure		Non-monetary compensation estimate

## Summary of Mode of Hiring and Expenditure (USD\$) for <u>Non-monetary ONLY</u>

S	taffing Scenario Examples	Mode of Hiring (column F)	Sum of Annual PEPFAR Expenditure, excluding Fringe (column Y)	Annual PEPFAR Fringe Expenditure (column Z)	Annual PEPFAR non-monetary expenditure (column AA)
1	Non-monetary only worker	Non-monetary ONLY	•••		Non-monetary compensation estimate

## **Q&A** Moderator: Jerilyn Hoover, Health Workforce Branch





## HRH Inventory Template Demo w/ Staffing Examples Presenter: Kyle Borces, Health Workforce Branch





## Scenario A

• Direct Service Delivery at a single facility

## Scenario B

• Direct Service Delivery at multiple facilities

## Scenario C

• Direct Service Delivery within a community but not facility-based

## Scenario D

• Non Service Delivery at multiple facilities

## Scenario E

• Program Management - Above Site

## Scenario F

• HRH Advisor seconded to the Ministry of Health

## Scenario G

• Part-time volunteer that received non-monetary compensation

**Scenario A:** Direct Service Delivery at a single facility

A female nurse works full-time throughout the entire year at one, IP-supported facility. She was hired at the start of the year to provide general HIV care and treatment services and is paid her salary directly by the prime implementing partner. In the past year, she was asked to divert some of her time to focus on COVID-19 testing. Her total salary expenditure over the 12 months was \$11,000, and her annual fringe expenditure totaled \$1,820.

HRH_Inventory Column Heading	Response
Employed through Prime or sub IP	Prime
Gender	Female
Employment Title	Clinical: Nurse
Mode of hire	Salary
MOH Staff/ Seconded to MOH	No
Months of Work in Past Year	12
Average FTE per month	1.0
Primarily support work in the community	No
Work in or support multiple sites (Roving Staff)	No
Technical assistance staff	No
Position based outside of OU	No
SNU Level to Report	All SNUs (down to, and including, FACILITY)

**Scenario A:** Direct Service Delivery at a single facility

A female nurse works full-time throughout the entire year at one, IP-supported facility. She was hired at the start of the year to provide general HIV care and treatment services and is paid her salary directly by the prime implementing partner. In the past year, she was asked to divert some of her time to focus on COVID-19 testing. Her total salary expenditure over the 12 months was \$11,000, and her annual fringe expenditure totaled \$1,820.

HRH_Inventory Column Heading	Response
Primary Program Area	Site Level: C&T: General C&T
Primary beneficiary	Non-targeted population
Deliver Services DIRECTLY to beneficiaries	Direct Service Delivery
In past year provided support for the COVID response	Yes
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$11,000
Annual PEPFAR Fringe Expenditure	\$1,820
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$0

**Scenario B:** Direct Service Delivery at a multiple facilities

A female nurse provides HIV clinical services primarily for pregnant & breastfeeding women, and works full-time supporting multiple facilities. She was hired halfway through the year. Her salary is paid directly by the prime implementing partner. In the past year, she helped screen and test clients for COVID with part of her time. Her total salary expenditure over the period she worked was \$5,500, and her fringe expenditure totaled \$935.

HRH_Inventory Column Heading	Response
Employed through Prime or sub IP	Prime
Gender	Female
Employment Title	Clinical: Nurse
Mode of hire	Salary
MOH Staff/ Seconded to MOH	No
Months of Work in Past Year	6
Average FTE per month	1.0
Primarily support work in the community	No
Work in or support multiple sites (Roving Staff)	Yes
Technical assistance staff	No
Position based outside of OU	No
SNU Level to Report	All SNUs down to 'Community' Column Label

**Scenario B:** Direct Service Delivery at a multiple facilities

A female nurse provides HIV clinical services primarily for pregnant & breastfeeding women, and works full-time supporting multiple facilities. She was hired halfway through the year. Her salary is paid directly by the prime implementing partner. In the past year, she helped screen and test clients for COVID with part of her time. Her total salary expenditure over the period she worked was \$5,500, and her fringe expenditure totaled \$935.

HRH_Inventory Column Heading	Response
Primary Program Area	Site Level: C&T: HIV clinical services
Primary beneficiary	Pregnant & breastfeeding women
Deliver Services DIRECTLY to beneficiaries	Direct Service Delivery
In past year provided support for the COVID response	Yes
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$5,500
Annual PEPFAR Fringe Expenditure	\$935
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$0

**Scenario C:** Direct Service Delivery within a community but not facility based

A sub IP (Jhpiego) provides pretest counseling, testing, and post-test counseling services for young women through mobile community-based testing

The sub IP hires 10 lay counselors composed of 5 men and 5 women. Each of the 10 staff are hired through contracts that pay them \$2,850 each for six months of full-time work. There is no fringe with this contract.

HRH_Inventory Column Heading	Response
Employed through Prime or sub IP	Sub IP
If sub, select IP name	Jhpiego
Gender	Male for male staff rows, Female for female staff rows
Employment Title	Ancillary: Lay Counselor
Mode of Hire	Contract
MOH Staff/ Seconded to MOH	No
Months of Work in Past Year	6
Average FTE per month	1.0
Primarily support work in the community	Yes
Work in or support multiple sites (Roving Staff)	No
Technical assistance staff	No
Position based outside of OU	No
SNU Level to Report	All SNUs down to 'Community' Column

**Scenario C:** Direct Service Delivery within a community but not facility based

A sub IP (Jhpiego) provides pretest counseling, testing, and post-test counseling services for young women through mobile community-based testing

The sub IP hires 10 testing and counseling providers, 5 men and 5 women. Each of the 10 staff are hired through contracts that pay them \$2,850 each for six months of full-time work. There is no fringe with this contract.

HRH_Inventory Column Heading	Response
Primary Program Area	Site Level: HTS: Community-based testing
Primary beneficiary	Females: young women and adolescent females
Deliver Services DIRECTLY to beneficiaries	Direct Service Delivery
In past year provided support for the COVID response	No
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$2,850
Annual PEPFAR Fringe Expenditure	\$0
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$0

**Scenario D:** Non-Service Delivery at multiple facilities

A female data entry clerk works full-time on PrEP data entry between three facilities. She was hired at the start of Q2 and receives a salary which is paid through the Prime IP. In the past year, she did not provide support for the COVID response. She has an annual salary of \$4,500. Since she was hired three months after the start of the year, she earned \$3,600 for the 9 months that she worked. Her annual PEPFAR fringe expenditure for those nine months is \$600.

HRH_Inventory Column Heading	Response
Employed through prime or sub-IP	Prime
If sub, select IP name	
Gender	Female
Employment Title	Other: Data Clerk
Employed through Prime or sub IP	Prime
Mode of Hire	Salary
MOH Staff/ Seconded to MOH	No
Months of Work in Past Year	9
Average FTE per month	1.0
Primarily support work in the community?	No
Work in or support multiple sites (Roving Staff)	Yes
Technical assistance staff?	Yes
Position based outside of OU?	No
SNU Level to Report	All SNUs down to 'Community' Column

**Scenario D:** Non-Service Delivery at multiple facilities

A female data entry clerk works full-time on PrEP data entry between three facilities. She was hired at the start of Q2 and receives a salary which is paid through the Prime IP. In the past year, she did not provide support for the COVID response. She has an annual salary of \$4,500. Since she was hired three months after the start of the year, she earned \$3,600 for the 9 months that she worked. Her annual PEPFAR fringe expenditure for those nine months is \$600.

HRH_Inventory Column Heading	Response
Primary Program Area	Site Level: PREV: PrEP
Primary beneficiary	Non-targeted population
Deliver Services DIRECTLY to beneficiaries	Non-Service Delivery
In past year provided support for the COVID response?	No
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$3,600
Annual PEPFAR Fringe Expenditure	\$600
Annual non-monetary expenditure, excluding Fringe	\$0

**Scenario E:** Program Management Above Site

A female Senior Finance Officer manages program funds, oversees project audits, as well as financial and administrative reporting requirements. She works at the IP office in the capital city, but the program is implemented across 15 sites across the country. She worked full-time for the entire year, and her salary expenditure was \$37,200. Her fringe expenditure totaled \$6,800.

HRH_Inventory Column Heading	Response
Employed through prime or sub-IP	Prime
If sub, select IP name	
Gender	Female
Employment Title	IP Prg Mgmt: Finance Staff
Mode of Hire	Salary
MOH Staff/ Seconded to MOH	No
Months of Work in Past Year	12
Average FTE per month	1.0
Primarily support work in the community	No
Work in or support multiple sites (Roving Staff)	No
Technical assistance staff	No
Position based outside of OU	No
SNU Level to Report	SNU 1

**Scenario E:** Program Management Above Site

A female Senior Finance Officer manages program funds, oversees project audits, as well as financial and administrative reporting requirements. She works at the IP office in the capital city, but the program is implemented across 15 sites across the country. She worked full-time for the entire year, and her salary expenditure was \$37,200. Her fringe expenditure totaled \$6,800.

HRH_Inventory Column Heading	Response
Primary Program Area	Program Management
Primary beneficiary	Non-targeted population
Deliver Services DIRECTLY to beneficiaries	Non-Service Delivery
In past year provided support for the COVID response?	No
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$37,200
Annual PEPFAR Fringe Expenditure	\$6,800
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$0

Scenario F: HRH Advisor seconded to MOH

A female HRH Advisor is employed through a prime partner, and seconded to the Ministry of Health to support the development of a new national HRH strategy. She works at the Ministry of Health office in the capital city. She worked full-time for the entire year, and her salary expenditure was \$31,400. Her fringe expenditure totaled \$5,430.

HRH_Inventory Column Heading	Response
Employed through prime or sub-IP	Prime
If sub, select IP name	
Gender	Female
Employment Title	Other: Technical Advisor
Mode of Hire	Salary
MOH Staff/ Seconded to MOH	Yes
Months of Work in Past Year	12
Average FTE per month	1.0
Primarily support work in the community	No
Work in or support multiple sites (Roving Staff)	No
Technical assistance staff	Yes
Position based outside of OU	No
SNU Level to Report	SNU 1

Scenario F: HRH Advisor seconded to MOH

A female HRH Advisor is employed through a prime partner, and seconded to the Ministry of Health to support the development of a new national HRH strategy. She works at the Ministry of Health office in the capital city. She worked full-time for the entire year with her salary expenditure being \$31,400, and her fringe expenditure totaling \$5,430

HRH_Inventory Column Heading	Response
Primary Program Area	Above Site: Human resources for health
Prime beneficiary	Non-targeted population
Deliver Services DIRECTLY to beneficiaries	Non-service Delivery
In past year provided support for the COVID response?	No
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$31,400
Annual PEPFAR Fringe Expenditure	\$5,430
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$0

**Scenario G:** Part-time volunteer that received non-monetary compensation

A female community health worker is recruited through a prime partner to educate and mobilize local community members (young women and adolescents) towards HIV testing and counseling services. She is a volunteer worker that does not receive any monetary compensation, but receives phone cards and other household goods valued at about \$500 for her participation in the program. She only worked for four months during the year at about two weeks per month

HRH_Inventory Column Heading	Response	
Employed through prime or sub-IP	Prime	
If sub, select IP name		
Gender Female		
Employment Title	Ancillary: Community Health Worker	
Mode of Hire	Non-monetary only	
MOH Staff/ Seconded to MOH	No	
Months of Work in Past Year	4	
Average FTE per month	0.5	
Primarily support work in the community	Yes	
Work in or support multiple sites (Roving Staff)	No	
Technical assistance staff	No	
Position based outside of OU	No	
SNU Level to Report	All SNUs down to 'Community' level	

**Scenario G:** Part-time volunteer that received non-monetary compensation

A female community health worker is recruited through a prime partner to educate and mobilize local community members (young women and adolescents) towards HIV testing and counseling services. She is a volunteer worker that does not receive any monetary compensation, but receives phone cards and other household goods valued at \$500 for her participation in the program. She only worked for four months during the year, and usually bout two weeks per month

HRH_Inventory Column Heading	Response Site Level: PREV: Comm. mobilization, behavior & norms change	
Primary Program Area		
Prime beneficiary	Females: young women and adolescent females	
Deliver Services DIRECTLY to beneficiaries	Service delivery	
In past year provided support for the COVID response?	No	
Sum of Annual PEPFAR Expenditure, excluding Fringe and non-monetary expenses	\$0	
Annual PEPFAR Fringe Expenditure	\$0	
Annual PEPFAR non-monetary expenditure, excluding Fringe	\$500	

- For **INTERNATIONAL WORKERS**, such as U.S. based staff that spend a portion of their time supporting the IM, **leave all geographic hierarchy columns blank.**
- For **REGIONS**, the SNU1 level is the country where the worker performs their work.
- For **MILITARY**, select the military SNU. Leave all other geographic hierarchy columns blank.

- **Roving staff** should select geographies to the community level.
- **Community workers** should select geographies to the community level.
- Above Site workers must leave the facility level blank (at minimum)
- Staff assigned to a facility that spend a portion of their time in the community should be entered at the facility to which they are assigned.

## **Knowledge Check**

- You employ a facility administrator who supervises staff and manages workflow but does not see clients directly. Would this person be reported as service delivery or non-service delivery?
- a) Service delivery
- b) Non-service delivery

Response: b) Non-service delivery This person is not directly providing services to clients.

### **Q&A** Moderator: Jerilyn Hoover, Health Workforce Branch





### **Overview of Reporting in DATIM**

Presenter: Jason Roffenbender, Health Workforce Branch





# HRH Reporting FY22 Timeline

Date	Owner	HRH Reporting
Prior to 10/1	Partner	DATIM users (prime partners only) request accounts or reactivate expired accounts for HRH
Oct 3	Partner	DATIM OPEN: The soonest IPs can upload FY22 HRH templates
Nov 10		FY22 Q4 DATIM Submission Deadline
Dec 1	Partner	DATIM open for IP cleaning and re-upload of FY22 HRH reporting
Dec 16		FY22 Q4 DATIM Data Cleaning/Resubmission Deadline

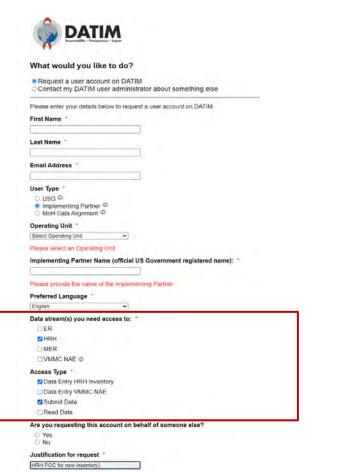
## **Steps to HRH inventory reporting for partners**

- 1. Request an HRH DATIM account at register.datim.org
- 2. Log into DATIM.org and download your OU-specific template (Available by October 3rd\*)
- 3. Complete the template
- 4. Navigate to the HRH app in DATIM and upload the template
- 5. Correct any errors as indicated upon upload
- 6. Navigate to the Data Approval app and click "Submit" to fully submit the template for DATIM and USAID approval
- 7. Await template approval, or make any revisions as requested

# **Requesting a HRH DATIM account**

- HRH Inventory Processor is an application and data stream within DATIM that was created and used last year (FY21)
- In order to submit, approve, or interact with the HRH Inventory application, existing DATIM user accounts will need to be updated or new accounts created
- Request an account between now and October 3rd
  - You can request an account after October 3rd if necessary
- See the following slides for how to:
  - Register for a new account, including HRH access
  - Update your current DATIM account to obtain HRH access

## **Requesting a NEW HRH DATIM account**



- Go to register.datim.org
- Select "Request a user account on DATIM"
- Enter your details (name, email, OU etc.)
- Choose "Implementing Partner"
- Choose access to "HRH"
- Choose access type "Data Entry HRH Inventory" and "Submit Data"
- Justify your request

## Updating an EXISTING DATIM account to access HRH



#### What would you like to do?

O Request a user account on DATIM Contact my DATIM user administrator about something else

Please enter your details below to contact your User Administrator

First Name \*

Last Name

Email Address

#### User Type



**Operating Unit** \*

Select Operating Unit

Please select an Operating Unit

Implementing Partner Name (official US Government registered name):

~

Please provide the name of the Implementing Partner

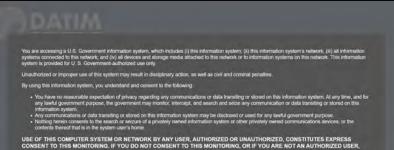
#### Message to User Administrator

Update my account to gain access to new HRH reporting app Submit

- Go to register.datim.org
- Select "Contact my DATIM user • administrator about something else"
- Enter your details (name, email, OU • etc.)
- Choose access to "Implementing Partner"
- Include a message to your • administrator
  - Ex: "Update my account to gain access to new HRH reporting ~~~"

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# Downloading and Uploading the HRH template STEP 1: Log in to DATIM-https://www.datim.org



VOUS SHOLD ENT THIS SEVENTIATION IN TO DO NOT CONSENT TO THIS MONTIONING, UNIT FOU AND NOT HA AUTHORALED USER, YOU SHOLD ENT THIS SYSTEM IF YOU ARE MAUTHORIZED USER AND CONSENT, SELECT "I AGREE" TO THE SYSTEM TERMS AND USAGE TO INDICATE YOU AGREE TO ALL THE CONDITIONS STATED HEREIN.

DATIM	
	Sign in
	Uşemame
	Password
	Sign in .
	Forgot password?
	DATIM now uses DUNS numbers to identify Implementing Partners to help with data quality and integrity. <u>Find out if this</u> <u>impacts you</u> .
	Analytics Runtime: Please note that analytics is currently running at approximately 60 minute intervals. The analytics refresh process is what allows neek-yentered of declapicated data to be viewed in the pivot tables. Please see the <u>Analytics Run Time job and</u> if you have questions.

# Downloading and Uploading the HRH template STEP 2: Navigate to HRH Processor App

On the top right hand corner of the screen, select the **apps** menu

ER ENVIRONMENT - Dashboard	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	РР	
Q         Search for a dashboard         COP19/FY20 1. Clinical Cascade Dashboard         COP19/FY20 2. Testing Dashboard           Show more         Sh	COP19/FY20 3. Treatment Dashboard		
thin the apps menu, select the HRH Proce	essor app		
ER ENVIRONMENT - Dashboard		P <sup>20</sup> 🖂 🗄	PP
+ Q Search for a dashboard COP19/FY20 1. Clinical Cascade Dashboard COP19/FY20 2. Te	esting [ Search apps	0 \$	
COP19/FY20 1. Clinical Cascade Dashboard 🕁 🙃 Add filter 👻	~ 🖉		-
	Data Interpretations Visualizer	s Maps	L
Welcome to the COP19/FY20 DATIM Dashboard Series! This dashboard displays an overview of PEPFAR's HIV Clinical Cascade results from October 2019 - September 2020. It contains data related to HIV testing, HIV treatment, and viral suppression.		*	
		Genie	1 1
NOTE: This dashboard displays data directly from the live DATIM system. This means that data	Menu Reports Management	Genie	ŧīv
		нвн	1IV n ing

# Downloading and Uploading the HRH Template STEP 3: HRH Processor

Operating Unit         South Africa         - COP Year         Please select a Funding Mechanism to submit templates	HRH Processor	<	INSERT PARTNER NAME Partner
- COP Year		*	
COP 21 (FY22)	COP Year COP 21 (FY22)	*	Please select a Funding Mechanism to submit templates
Mechanism -	Mechanism	*	

- Use the HRH Processor app to select:
  - o **OU**
  - o COP Year (COP21)
  - o Funding Mechanism
- Request HRH template
- Upload HRH template

# Downloading and Uploading the HRH Template STEP 4: Partner Download Template

			O UPLOAD	TEMPLATE			
		DUNS #	Uploaded Template		Status	Del	
		Prime Partner					
Mechanism 18483 - NU2GGH00		Mechanism Name	Wits Health Consortium				
COP 20 (FY21)	Ŧ	Award #	NU2GGH001934	C REQU	C REQUEST TEMPLATE		
COP Year		Mech ID	18483	Approval Status:	Pendin	Pending	
South Africa	*	Mechanism		Status			
HRH Processor Operating Unit	<	Insert Partner Nam	le Paruten				

Name Date modified Type This PC 3D Objects Desktop Documents Downloads h Music **Pictures** Videos Undows (C:) Network File name: hrh template South Africa 20210830 Save as type: Microsoft Excel Worksheet ∧ Hide Folders Save Cancel

- Click the Request Template icon under the Status field
- Save template to your computer

# Downloading and Uploading the HRH Template STEP 5: Complete the template

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*)																			
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Record Number (optional)	Sex	Employment title	Employed through Prime or Sub IP?	Mode of Hire		Months of Work in Past Year		Work in or support multiple sites (Roving Staff)?	5NU1	PSNU/Community	Facility	Valid OL	Primary Program Area?	Deliver services DIRECTLY to beneficiaries?	In past year provided support for the COVID response?		Annual PEPFAR Fringe Expenditure	Comments	
									*										
CoverSheet StaffList	÷	_						-				_	1						
Coversneet. Stantist	10															Cilment	er Settings	E (F)	

- Remember! Complete the first two tabs (Cover Sheet and Staff List)
- To complete the template follow the instructions outlined earlier in this presentation and in the HRH Inventory <u>Handbook</u>
- Submit one template per mechanism
  - Consolidate Subrecipient staffing data and Prime staffing data together into the staff list tab

# **Downloading and Uploading the HRH Template STEP 6: Partner Upload Template**

	Mechanism		Status	Status				
COP Year	Mech ID	18483	Approval Status:	Pending	1			
COP 20 (FY21) -	Award #	NU2GGH001934	C RE	QUEST TEMPLATE				
Mechanism 18483 - NU2GGH00	Mechanism Name	Wits Health Consortium						
	Prime Partner							
	DUNS # Uplo	oaded Template		Status	Del			
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Cancel

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Videos Windows (C:)

This PC

File name: hrh template South Africa 20210830

- Select the template document and wait  $\bullet$ for file to upload
- Click Upload HRH template
- **Assess Upload Status**

# Assessing Template Upload Status

# If your template is successfully uploaded, you will see the following



#### If there is an error in your uploaded template, you will see the following error status:

rime Partner				
DUNS #	Uploaded Template	Status	Int	Del
639391218	COP20FY21_HRH_18483.xlsx	1 error	7	Í

# Navigating Upload Errors Data Validations in DATIM HRH App

- Data quality validations are processed upon upload to DATIM
- These checks are logical or value checks
- The template can be uploaded as many times as needed to correct errors
- We recommend uploading the template early and often to catch errors and to ensure they are corrected well before the November 5th deadline
- The template must fully pass all validations before the IP is able to successfully submit

#### Completing a Final Quality Check Before Submission and Avoiding Upload Errors

Prior to uploading the template into the DATIM HRH App, it is important to conduct a data quality check. The template has been designed to minimize data entry errors through the inclusion of drop-down lists. However, a number of issues will trigger data entry error messages. To minimize the number of identified errors, perform the following check on the template prior to upload:

#### ✓ Check for completeness: Incomplete fields will trigger an error message.

- Ensure that all required fields in the Cover Sheet and Staff List Tabs are complete, consistent with each other and valid entries.
- Ensure that all started rows are completed.
- ✓ Check for logic: Use the error messages checks listed in the Definitions table as your guide to ensure each entry makes sense.
  - Ensure all staff have been categorized and entered consistently (work location, roving, program area, employment title, etc.)

#### ✓ Check for duplicates:

- If you are using record numbers, ensure that each one is unique.
- Ensure that the same staff person is not entered more than once

#### ✓ Check for extreme values:

- Check the compensation ranges in Sum of Annual PEPFAR Expenditure, excluding Fringe; and in Annual PEPFAR Fringe Expenditure and flag those that seem to be extreme values.
- Ensure values are added in USD

#### $\checkmark$ Check the geography

• Check the "Valid OU" column in the template. This column will say "Valid" if a valid hierarchy of locations have been entered. For all that are not Valid, review selections to identify any overwriting of the dropdown fields.

# Downloading and Uploading the HRH Template STEP 7: Final Template Submission

	<	Insert Partner Nam	e Partner		Search apps		*
Operating Unit	-1					9	
	-	Mechanism		<u> </u>		-	
COP Year		Mech ID	18483			8	
COP 20 (FY21)	-	Award #	NU2GGH001934		Reports	Genie	
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18483 - NU2GGH00		in the second se		_	\$		
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					*	$\sim$	
					HRH Processor	Data Approval	
	1	2 mechanisms	UBBIIT BECALL RETURN DATIM Approvals				
		Mechanism A 17025 - AID674A1200029 - HIV Innovations for Patient Outcomes for Priority Populations (INR Innovations Research on HIV/AIDS)	HRH FYOot + October 2021 - September 2022 +	organization time South Africa			
			SUBMIT 1 selected mechanism(s)				
			VIEW D ACCEPT SUBMIT	PECALL	RITURM		
			1 mechanism(s) selected		Q. Search	×	
			Mechanism A	OU Agency	Partner St	latus	
			17025 - AID674A1200029 - HIV Innovations for Improved	South	WITS HEALTH	ding at	

- Use the **Data Approval** app to select:
- o Data Set
- o Period
- Use the "**View**" tab to see the successfully uploaded template
- Use the "**Submit**" tab to officially submit the data.

## **Knowledge Check**

- When will you see error messages if something in the HRH inventory template is incorrectly entered?
- a) Immediately as you enter the data in the template- errors will appear in red
- b) When you attempt to upload to DATIM app- you will see an error message
- c) You will only be notified of errors after the submission has been reviewed by agency staff

Response: **b) When you attempt to upload to DATIM app** You will see an error message if there are any corrections needed for the template to be accepted.

## Knowledge Check

- Will DATIM accept a template if there are outstanding error messages?
- a) Yes
- b) No

Response: **b)** No All error messages must be addressed by making changes to the data in the template before DATIM will accept the submission.

### **Q&A** Moderator: Jerilyn Hoover, Health Workforce Branch





### Next Steps

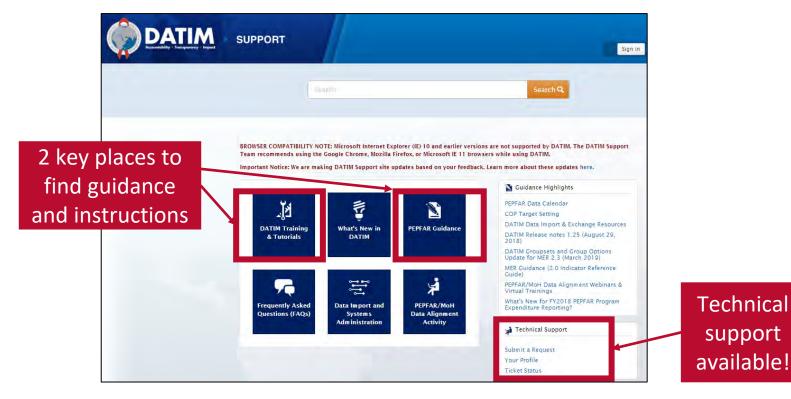
Presenter: Jason Roffenbender, Health Workforce Branch





### **Accessing OGAC Guidance and Instructions**

All guidance and instructions related to submitting HRH in DATIM can be found at <u>https://datim.zendesk.com</u>.



### Accessing Guidance and Instructions cont'd





- Intro to PEPFAR HRH Inventory
- HRH Definitions
- HRH Inventory Handbook
- HRH Inventory Template (within DATIM app)
- Checklists Before Submitting and Approving HRH Inventory Template
- FAQ
- Job Aids
- HRH FTE Calculator
- User Administration: Creating New HRH User Accounts
- DATIM Data Approval Level Statuses and Actions HRH

\*\*\*Please check back regularly on DATIM Zendesk as the above FY22 materials will be posted on a rolling basis.

### **Next Steps**

- 1. Prior to October 3rd, submit form at register.datim.org to obtain an HRH DATIM account and access to final HRH template
- 1. Review template and guidance materials (this presentation and recording will be sent out via email )
- 1. Direct questions about the training to: <u>hrh-reporting-helpdesk@usaid.gov</u>
- 1. Direct mechanism specific questions to A/CORs, Activity Managers and Mission HRH POCs
- 1. USAID will be circulating an FAQ we will update throughout the reporting period and distribute to Mission POCs. Questions you have will help others.
- Begin collating data needed to complete the inventory \*Recommend upload prior to November 10th submission deadline to give ample time to respond to any errors <sup>106</sup>

# Thank You! Questions?



