# **CHAMPS Site Assessment Survey**

**CHAMPS Site Assessment Survey Submission Deadline: Friday September 10 at 5pm EDT.**

**CHAMPS Introduction**

Child Health and Mortality Prevention Surveillance (CHAMPS) is a global surveillance network that works to save children’s lives by generating, collecting, analyzing and sharing accurate, timely data about the causes of child mortality in regions where it is highest. Our open-access data sharing, and diverse, multi- sectoral partnerships drive evidence-based interventions to reduce child mortality. The CHAMPS global health network currently has sites in Bangladesh, Ethiopia, Kenya, Mali, Mozambique, Sierra Leone and South Africa. An eighth site in India is in the start-up phase. This network, funded by the Bill and Melinda Gates Foundation, is managed by the CHAMPS ‘Program Office’ (PO), based in the Emory Global Health Institute. To learn more about CHAMPS and use our data, visit CHAMPShealth.org. A short introduction to the CHAMPS Network came be found at: <https://www.youtube.com/watch?v=L7Cx6v9U3FQ>

CHAMPS is working to create a world where all children are able to thrive. Using minimally invasive tissue sampling (MITS), histopathology, molecular and microbiologic diagnostics, clinical data abstraction, and verbal autopsies, CHAMPS’ global network identiﬁes and analyzes the speciﬁc causes of stillbirth and death in children under ﬁve, and shares that data with scientists, policy makers and public health institutions working to reduce child mortality. A short introduction to MITS in global health can be found at: <https://www.youtube.com/watch?v=Sqw_O2dfy-o>

**Application Process**

The CHAMPS PO is conducting a multi-phase application process to select a site 9. The first phase of this process consists of completing the CHAMPS Site Assessment Survey. A select group of applicants will then be invited to respond to another set of “deep-dive” questions. Select applicants may also be asked to participate in virtual interviews and video tours. If possible, in-person visits may be conducted with top-ranked applicants. We anticipate selecting 1 or more sites for the initial phase of the grant in late 2021. Depending on the capacity of finalists, there may be a site readiness period with a grant awarded to support capacity building before final site selection occurs. In this situation, final site selection will occur upon completion of the site readiness phase by early/mid 2022.

Applicants will be assessed on multiple components throughout the site selection process. The design of this network requires applicants to be closely associated with a hospital or inpatient facility to conduct surveillance of severely ill children and identify hospitalized deaths. Applicants must demonstrate surveillance feasibility and capacity, as deaths are captured through both community-based and hospital/clinic-based surveillance. Applicants must also consider community acceptability of minimally invasive tissue sampling (MITS), a major component of CHAMPS work and data collection. MITS involves collection small samples of tissue and fluid from major organs, within 24 hours of a child’s death, in order to determine a more accurate and specific cause of death. Applicants’ organizational capacity, site suitability, and willingness to share data and specimens will also be evaluated.

This survey is the first step in our site selection process. Information collected from this survey will help the CHAMPS PO identify potential sites for follow-up discussions and consideration. ***Continuation of this survey indicates to the PO that the site can meet all of the following screening criteria:***

1. Site is located in Nigeria, Democratic Republic of the Congo, or Pakistan
2. Site provides the name, title, phone number, email address, and CV for the proposed Principal Investigator (PI)
3. Site provides the name, title, phone number, email address, and CV for the current site Director/ Main Person of Contact/Co-PI, if different from the proposed PI
4. Site demonstrates surveillance feasibility and capacity, including mortality and pregnancy surveillance
5. The selected catchment area has an under-five mortality rate greater than 50 per 1,000 live births
6. Site will provide mortality rates in the proposed catchment area for the following:
	1. Under-five mortality rate (per 1,000 live births)
	2. Infant mortality rate (per 1,000 live births)
	3. Neonatal mortality rate (per 1,000 live births)
	4. Maternal mortality rate (per 1,000 live births)
	5. Stillbirth rate (per 1,000 third trimester pregnancies, if known)
7. Site has a catchment population of at least 100,000 people, including a birth cohort of at least 3,000 and at least 12,000 children under 5 years of age
8. Site shows the potential for the population to accept post-mortem tissue sampling (i.e., do not have an absolute legal or cultural prohibition against such procedures)
9. Site is willing and able to share data with Network Investigators and outside stakeholders
10. Site is willing and able to share specimens outside the country
11. Site is willing to use a common protocol requiring standardized case definitions and pooled data

**Important Definitions & Abbreviations**

Please review the following terms prior to completing the survey. Definitions are provided to ensure that all applicants and the CHAMPS PO are working with a shared understanding of the use of certain terms.

*CHAMPS*: Child Health and Mortality Prevention Surveillance

*Community Deaths*: deaths in children under 5 that take place outside of a hospital or clinic setting

*DeCoDe*: Determination of Cause of Death

*DSS*: Demographic Surveillance System

*Facility Deaths*: deaths in children under 5 that occur at a hospital or clinic

*Hospital*: throughout this survey, the term 'hospital' refers to any facility with beds available for overnight medical care (i.e., inpatient facility)

*MITS*: Minimally Invasive Tissue Sampling

*MoH*: Ministry of Health

*NPHI*: National Public Health Institute

*PO*: Program Office

*Site*: Proposed site, organization, or group of organizational partners that will implement CHAMPS activities

**Survey Features**
This survey contains more than 100 questions. To determine which site(s) might be best equipped to meet CHAMPS’ objectives, we are requesting information on site (1) background, (2) ability to meet CHAMPS Network requirements, (3) demographics and geography, and (4) capabilities.

We understand that the organizational structure/consortium structure varies across applicants and that you may want to provide further details to accompany your responses. There is an opportunity to provide additional comments or details in an open-ended response at the end of each survey section. We also encourage you to reach out for clarity, as needed.

For any questions or technical issues with the survey, please email science@champshealth.org

**Survey responses are due on Friday September 10 at 5pm EDT.**

## 1. Site Background

### **General Information & Basic Criteria**

1. Proposed Site Location (city, district, country):
2. Proposed Site Director/Main POC name:
3. Proposed Site Name (e.g., Ifakara HDSS, Matlab HDSS, Community Empowerment Lab etc.):
4. Organization primarily responsible for the proposed site (e.g., Medical Research Council, Kenya Medical Research Institute, Wellcome Trust etc):
5. Phone number (with country code) of Site Director/Main POC:
6. Email address of Site Director/Main POC:
7. Please attach the Site Director’s/Main POC’s CV.
8. If the proposed Principal Investigator (PI) is not the current site Director / Main POC, please provide the following:
	1. Name of proposed PI:
	2. Phone number (with country code) of the proposed PI:
	3. Email address of the proposed PI:
	4. Please attach the proposed PI’s CV.
9. If there is both a Site Director and PI, what is the relationship between the two? How will work be allocated between the two?
10. Other organizational affiliations or collaborations with vested scientific interest in your research portfolio and their expected role in CHAMPS (i.e. other organizations providing funding/resources, expertise, oversight to the work at the site):
11. Will this be a new site (no field research at the site for >2 years)?
	1. Yes
	2. No
		1. Year the site was established:
12. Research priorities:
	1. What are the proposed site’s main research priorities? (< 250 words)
	2. Over the past 5 years, what have been the research priorities of funded research grants or papers published? (< 350 words)
13. List the hospital(s) that will be key enrollment sites.

*For the purposes of this survey, the term 'hospital' refers to any facility with beds available for overnight medical care (i.e., inpatient facility).* ***Please complete one CHAMPS Site Assessment Survey – Hospital Specific Packet for each hospital you have listed here; survey is located in the Appendix.***

1. Please describe how the proposed site’s staff and programs currently interact or work with the listed hospital(s) (e.g., ongoing studies, shared staff). (< 350 words)
2. What is the population of the proposed catchment area?
3. For the proposed catchment area, please list the:
	1. Under-five mortality rate (per 1,000 live births):
	2. Infant mortality rate (per 1,000 live births):
	3. Neonatal mortality rate (per 1,000 live births):
	4. Maternal mortality rate (per 100,000 live births):
	5. Stillbirth rate (per 1,000 third trimester pregnancies, if known):

***Note****: From this point forward, the proposed site and proposed catchment area will be referred to as “the site” and “the catchment area.”*

### **Relationships**

1. Please describe your experience with collaborating on multisite studies or research coalitions. (<250 words)
2. Please describe how the site influences or engages with the Ministry of Health (MoH) and vice versa. (< 350 words)
3. How many times in the past year have data/research findings from the site been presented to the MoH?
	1. 0 times
	2. 1 – 2 times
	3. 3 – 5 times
	4. 5+ times
4. Do the site Director or senior staff meet regularly with the MoH?
	1. Yes
		1. How many times in the last year did site leaders meet with MoH staff? (If new site, mark “N/A”)
			1. 1 – 4 times per year
			2. 5 – 8 times per year
			3. 9 – 12 times per year
			4. More than once a month
			5. N/A (Not Applicable)
	2. No
5. Do any senior MoH officials serve on the site’s advisory board?
	1. Yes
	2. No
		1. Why not? (≤100 words)
6. Does the country have a National Public Health Institute (NPHI)?
	1. Yes
		1. Please describe how the site influences or engages with the NPHI and vice versa. (< 350 words)
		2. Do the site Director or senior staff meet regularly with NPHI?
			1. Yes
				1. How many times in the last year did site leaders meet with NPHI staff? (If new site, mark “N/A”)

1 – 4 times per year

5 – 8 times per year

9 – 12 times per year

More than once a month

N/A (Not Applicable)

* + - 1. No
		1. Do any senior NPHI officials serve on the site’s advisory board?
			1. Yes
			2. No
				1. Why not? (≤100 words)
	1. No
1. Please describe your organization’s relationship with the District level Health Office. (< 250 words)
2. Is there a National Association of Obstetrics and Gynecology in your country?
	1. Yes
	2. No
	3. Other group(s) which includes an obstetrics and gynecology focus:
3. Is there a National Association of Pathologists in your country?
	1. Yes
	2. No
	3. Other group(s) which includes a pathology focus:
4. Is there a National Association of Pediatricians and/or Neonatologists in your country?
	1. Yes
	2. No
	3. Other group which includes a pediatric focus: Please describe.
5. Please describe any other group with a particular set of expertise that serves as a resource for the site to guide research and review findings. (< 250 words)
6. Please describe 1-2 examples of community relationship building efforts led by the site and conducted at the site or elsewhere in the country within the past two years (e.g., sensitization for new intervention). (< 250 words)
7. Do you have other comments or additional information regarding the site’s relationships with public or private partners that you would like to share? (< 250 words)

### **Personnel and Resources**

***Note:*** *The CHAMPS Site Assessment Survey – Hospital Specific Packet asks questions about clinical personnel. Please use the facility specific packet to provide details about clinical faculty and/or staff.*

The positions listed below are typical positions employed at other CHAMPS sites. The following questions will help us gain a better understanding of your current site personnel capacity.

1. Please provide the number of affiliated personnel within the proposed site network:
	1. IT for lab software, electronic medical records, internet connection, general data management (Please specify):
	2. Support Staff, such as drivers, administrative officers, financial officers, community liaison officers (Please specify):
	3. Other technical experts, such as epidemiologists, counselors, demographers, compliance personnel, socio-behavioral scientists, etc. (Please specify):
2. If your proposed site is accepted into the CHAMPS Network, do you plan to reallocate current facility faculty or staff to work full time or part time for CHAMPS activities?
	1. Yes
	2. No
3. Do you have other comments or additional information regarding the site’s personnel and resources that you would like to share? (<250 words)

### **Business Capabilities**

Please answer this section **per proposed Institution receiving funds over $100,000 under this award.**

1. Name and position of person(s) who would be point of contact for business operations:
2. Provide an overview of the total annual revenue for your organization, estimating the list of sources that contribute approximately 10% or more.
	1. For example, private contributions: 25%, fees for services: 25%, foundation grants (Gates or other similar foundations): 25%, government grants 25%
3. Is the organization registered as a not-for-profit organization?
	1. Yes
		1. With whom?
		2. Please attach a copy of registration.
	2. No
4. Is this organization being audited annually?
	1. Yes
		1. By whom?
		2. Please attach a copy of the most recent audit.
	2. No
5. Does the organization have an active Board of Trustees or Directors?
	1. Yes
		1. How often do they meet?
		2. Please attach a list of board member names and titles.
	2. No
6. Does the organization have a written constitution (or bylaws)?
	1. Yes
		1. When was it last revised?
		2. Please attach a copy of the most recent version.
	2. No
7. Is the organization facing any lawsuits?
	1. Yes
		1. Describe, and give status and expected outcome.
	2. No
8. Does the organization have a Negotiated Indirect Cost Rate Agreement (NICRA) with the U.S. government or other established Indirect rate?
	1. Yes
		1. What is your rate and does the organization have a written methodology for tracking and allocating indirect (shared) costs?
		2. Provide rate and description:
9. Please provide a copy of the current organizational chart.
10. How many employees work in-country for your organization?
	1. Of those, how many are expatriate staff?
11. Are there written policies controlling the following aspects of operations? If so, please attach:
	1. Travel
	2. Procurement
	3. Cash Management
	4. Human Resources
12. Do you have other comments or additional information regarding the site’s business operations capabilities that you would like to share? (< 250 words)

### **Site Security**

1. Please describe the most common security issues at the site and/or facilities (< 250 words)
2. What is the frequency of health care worker strikes? When was the last HCW strike?
3. What protocols do you have when foreign nationals visit your site? (e.g. security protocols, transportation protocols, COVID testing protocols)
4. Do you have lab security? (e.g. thumbprint for access)
	1. Yes (Please describe):
	2. No
5. Has the site had visitors from the US CDC, USAID or another US federal agency?
	1. Yes
		1. Did they require special protocols?
		2. Did your site or affiliated partners require operational changes when official US government visitors were present, or in preparation for these visitors?
	2. No
		1. Please clarify security related restrictions for foreign nationals at your site.
6. Do you have other comments or additional information regarding the site's security that you would like to share? (< 250 words)

## 2. CHAMPS Network Requirements

### **Socio-behavioral Science / Community Engagement**

1. Please describe the site’s technical experience with conducting focus groups, or any other qualitative research capabilities.
2. Does the site currently use at least one community advisory group?
	1. Yes
		1. How many times per **year** does the group meet?
	2. No
3. Has socio-behavioral research been conducted to assess attitudes towards death or improved understanding of burial practices among the catchment population?
	1. Yes
		1. Please describe research findings. (< 250 words)
	2. No
4. Do you have other comments or additional information regarding the site's socio-behavioral science or community engagement that you would like to share? (< 250 words)

### **Data Sharing**

The CHAMPS Network requires timely access to and use of data to effectively track preventable diseases in children. Researchers and other stakeholders will need to access data soon after collection and initial cleaning. In addition, because this project is funded by the Gates Foundation, all sites must be willing to adhere to the Foundation’s Global Health Data Access Principles (<https://docs.gatesfoundation.org/Documents/faq.pdf>).

#### **Data**

1. Does this site have experience sharing de-identified data with other PIs and stakeholders outside the country for prior or current research projects?
	1. Yes
		1. Please describe 1-2 relevant projects, including the stakeholders involved (<250 words)
		2. Please describe the timelines for sharing data (e.g., length of time between data collection and release of data to outside stakeholders). (<250 words)
	2. No
	3. Not sure
2. Are there any national or site policies that would restrict or delay the sharing of de-identified data with the CHAMPS Network or outside stakeholders?
	1. Yes
		1. What are the policies? (<250 words)
	2. No
	3. Not sure
3. Please indicate concerns and attitudes about participating in a project with an intrinsic requirement for open access to de-identified data.
4. Has this site been involved in any multisite studies using a common protocol requiring standardized case definitions (e.g., for pneumonia or enteric diseases)?
	1. Yes
		1. Please indicate the name of the most recent study, sponsor and study period and describe issues or concerns, if any, around requirements for standardized case definitions and pooled data. (<500 words)
	2. No
	3. Not sure
5. Is the site comfortable making data publicly available for decision making, after it has been cleaned and/or verified but before manuscript publication?
	1. Yes
	2. No

#### **Specimens**

1. Does the site have experience sharing specimens with collaborators outside of the country (e.g., for quality assurance/quality control, testing with assays not available in country, or biobanking/biorepository)?
	1. Yes
		1. Please describe 1-2 relevant projects, including the specimen type shared, and stakeholders involved. (<250 words)
		2. Please describe the timelines for specimen sharing in the above. (<250 words)
		3. Please describe delays in specimen sharing, if any, experienced in the above (e.g. delays in import permits, extended timelines for paperwork or shipment, etc.). (<250 words)
	2. No
	3. Not sure
2. Are there any national or site policies that would restrict specimens being shared with the CHAMPS Network (e.g., national policy prohibiting the shipment of human specimens outside of the country)?
	1. Yes
		1. What are the policies?
	2. No
	3. Not sure
3. Do you have other comments or additional information regarding the site's data and specimen sharing policies & procedures that you would like to share? (< 250 words)

### **Policy Issues**

1. Does the site use an ethical review committee (ERC) or institutional review board (IRB) for research studies?
	1. Yes
		1. In-country?
			1. Yes
			2. No
		2. Outside the country?
			1. Yes
			2. No
		3. Does the site’s IRB have an FWA (Federal wide assurance) number?
			1. Yes
			2. No
		4. Is there a formal scientific review and approval process before the protocol is submitted to the ERC?
			1. Yes
			2. No
		5. Are there other approvals or review steps required prior to study implementation?
			1. Yes
				1. Please describe approvals or review needed prior to/in addition to ERC. (≤250 words)
			2. No
		6. How long does it typically take to achieve approval from ethical review committees/IRB for studies with an intervention (like a drug or vaccine trial)?
		7. How long does it typically take to gain approval from ethical review committees/IRB for studies that are non-interventional?
		8. How often does the ethical review committee meet?
	2. No
2. Do you have other comments or additional information regarding the site's protocol and study review processes that you would like to share? (< 250 words)

## 3. Demographics and Geography

### **DSS (Demographic surveillance systems) Capabilities**

1. Is there an active demographic surveillance system (DSS) in place?
2. Yes
	* 1. How often were households visited each year, on average, over the past 3 years?
			1. 1 time
			2. 2 times
			3. 3 times
			4. 4+ times
		2. What is the total population of the DSS area?
3. No
	* 1. How is population enumerated and births/deaths tracked? (< 250 words)
4. If DSS forms are used, how are data collected, entered, and managed (e.g., paper forms, scanned forms, electronic data management system, etc.)? (< 250 words)
5. Does the site conduct verbal autopsies?
6. Yes
	* 1. Are verbal autopsies conducted on children under 5?
			1. Yes
			2. No
		2. How are deaths identified?
		3. What form/instrument is used?
		4. How soon after death are verbal autopsies conducted?
		5. How is final cause of death determined? (< 250 words)
7. No

### **Catchment Area Characteristics**

1. What is the population of the catchment area?
2. If the population of the catchment area is less than 100,000, how would the site expand surveillance activities to reach a catchment area of at least 100,000?
3. How many live births were there in 2019 within the catchment area, both hospital and community births combined (or latest year for which data exists)?
4. How did you determine the number of live births?
5. Please describe population density (population per km2), and variation in population density across the catchment area.
6. What is the religious and ethnic composition of the catchment area?
7. How long does it take to drive from the main hospital(s) to the farthest edge of the catchment area? If there are seasonal differences please give the range (e.g., 2 hours during dry season, 3-6 hours during rainy season).
8. What percentage of the population in the catchment area has a cell phone?
	1. 0 % – 25%
	2. 26% - 50%
	3. 51% - 75%
	4. 76% - 100%
	5. Unknown
9. What percentage of the catchment area population lives in an area with reliable cell phone service?
10. 0 % – 25%
11. 26% - 50%
12. 51% - 75%
13. 76% - 100%
14. Unknown
15. Do you have other comments or additional information on the demographics and geography of the site that you would like to share? (< 250 words)

### **Pregnancy Care & Maternal Health**

Answer Questions 78-87 for births & deaths occurring at home and in facilities.

1. How many third trimester pregnancies were there in 2019 within the catchment area (or latest year for which data exists)?
2. How did you determine the number of third trimester pregnancies?
3. What percentage of pregnant women in the catchment area complete at least one antenatal care visit by the third trimester at the site?
4. What proportion of deliveries in the catchment area occur:
	1. In a health facility:
	2. At home:
	3. Other (Please describe):
5. How did you determine the above proportions?
6. List the proportion of births/deliveries in the catchment area that are attended by:
	1. Family only:
	2. Community health workers:
	3. Traditional birth attendants:
	4. Midwives:
	5. Physicians:
	6. Other:
7. How did you determine the above proportions?
8. What is the overall HIV prevalence among pregnant women?
9. Does the site have capacity to perform prenatal ultrasound to determine gestational age?
10. Yes
	* 1. What percentage of pregnant women receive a prenatal ultrasound?
11. No
12. How do you collect data on maternal and child deaths? (select all that apply)
	1. Routine hospital management information system (HMIS)
	2. Patient records
	3. Facility Death Register
	4. Vital registration
	5. Active surveillance
	6. Other surveillance (E.g. maternity, severe disease)
	7. Clinical trials
	8. Special studies (specify <250 words)

### **Child Care & Health**

1. List the top 5 causes of death for children under 5 years of age in the catchment area:
2. How did you determine the top 5 causes of death for children under 5? If citations or data sources are available, please share them.
3. What proportion of children have received the DPT/pentavalent vaccination – three doses by 12 months of age?
4. What is the HIV seroprevalence in infants under 2?
5. What is the prevalence of malaria parasitemia in children under 5?
6. On average, about how many patients under 5 are seen per month as out-patients at clinics or health centers that serve the catchment area?
7. What proportion of the under 5 patients live in the catchment area?
8. Do you have other comments or additional information regarding maternal and child care & health in the catchment area that you would like to share? (< 250 words)

## 4. Site Capabilities

### **Surveillance Activities**

1. Are the following conditions currently under surveillance at the site? (YES/NO)
2. Pregnancy:
	1. If yes, is it facility based, community based, or both?
	2. If yes, number of pregnancies tracked per year, on average
3. Birth outcomes:
4. Deaths in children <5:
5. Deaths in person 5 years or older:
6. Surveillance for bacterial infections:
7. Monitoring immunization coverage:
8. Pneumonia:
9. Diarrhea:
10. Meningitis:
11. Malaria:
12. Other:
13. If applicable, briefly describe methods for community-based active surveillance. (< 250 words)
14. What biological specimens are collected as part of the site’s active surveillance system and where are they collected (e.g., hospital, clinic, community)?
15. When was health utilization last measured for the main hospital(s) that will be used for CHAMPS Network?
16. If within 5 years, what proportion of children in the surrounding area seek care at the site hospital(s) for severe illnesses?

### **Mortality Surveillance**

1. Please describe any cultural considerations or beliefs that would impact the ability to collect specimens after death or to perform autopsies (< 250 words).
2. Do you think post-mortem specimen collection within 24 hours of death is possible for stillbirths or children under 5 in the catchment area who die outside of the hospital setting?
	1. Yes, it has been done before
	2. No
	3. Maybe, or under certain conditions
		1. What would need to be established to make this possible? Or, what factors need to be addressed to make this possible? (< 250 words)
3. Do you have other comments or additional information regarding the site’s surveillance activities that you would like to share? (< 250 words)

### **Lab Capabilities**

1. Does the site operate its own clinical or research laboratory?
2. Yes
3. No
	1. If not, what lab(s) does the site use when specialized specimen testing is needed?
4. Are lab tests performed at a central location for multiple sites?
	1. Yes
		1. Where is this central lab located?
	2. No
5. Does the lab used by the site have reliable electricity?
6. Yes
7. No
8. How many back-up generators are available for use by the lab?
9. Does the lab used by the site have an uninterrupted power supply (UPS) connected to its instruments?
10. Yes, most or all are connected
11. Yes, some are connected
12. No
13. Number of freezers in the lab used by the site:
14. -80°C:
15. -20°C:
16. 4°C:
17. Type and number of automated nucleic acid extractors:
18. Does the lab used by the site have biosafety cabinets (i.e., hoods)?
19. Yes
	* 1. How many?
20. No
21. Does the lab used by the site have polymerase chain reaction (PCR) set-up cabinets?
22. Yes
23. How many?
24. No
25. Are there autoclaves available?
26. Yes
27. How many?
28. No
29. Please mark if the lab used by the site is capable of the following procedures:
30. Standard bacterial culture and identification of pathogens
31. Of stool
32. Of respiratory secretions
33. Of blood
34. Of CSF
35. Anti-microbial susceptibility testing
36. ELISA
37. Real-time polymerase chain reaction
38. How many RT-PCR machines are on-site?
39. How many RT-PCR samples are processed per month?
40. How many procedure rooms are used during RT-PCR preparation and processing?
41. Malaria microscopy
42. Malaria rapid diagnostic test
43. How many per month?
44. Tuberculosis AFB testing
45. On average, how many AFB smear tests are performed monthly?
46. Hemoglobin or hematocrit testing
47. HIV antibody testing
48. HIV viral load testing
49. Does the lab used by the site have experience with biobanking?
50. Yes
51. Are specimens stored in-country, out-of-country, or both?
	* + 1. How are specimens shipped out of country? (< 250 words)
			2. How long can specimens be stored out of country?
52. How are specimens tracked? (< 250 words)
53. How many functional -80° freezers does your site have in total?
54. What percentage of those -80° freezers have capacity to store more specimens?
55. How is the temperature of the freezers monitored?
56. What back-up systems are employed to ensure consistent temperatures? (< 250 words)
57. No
58. Does the site have access to a BSL-3 Lab?
59. Yes
60. No
61. Does the site use (a) reference lab(s)?
62. Yes
63. List the reference lab(s) and their locations
64. What tests does the reference lab(s) run for you?
65. No
66. Are the lab(s) used by the site accredited? (CHAMPS sites may aim to achieve ISO15189 accreditation for site labs.)
	1. Yes
		1. What accreditations and years?
	2. No
67. Briefly describe the site’s processes for having lab equipment serviced and/or repaired. (< 250 words)
68. Do you have other comments or additional information regarding the site’s lab capabilities that you would like to share? (< 250 words)

### **IT Capabilities**

1. Where is the site’s IT office or personnel housed?
2. Does the site have uninterrupted electricity 24 hours per day?
3. Yes
4. No
5. How many backup generators does the site have for servers?
6. Does the site have internet access?
	1. Yes
		1. What is the internet speed for both uploads and downloads? (Note: You can check your internet speed at [www.speedtest.net](http://www.speedtest.net/))
		2. How often does the site experience connectivity interruptions?
	2. No
7. Does the site use computers and/or tablets for day-to-day work and/or to capture data? Please specify.
8. Does the site use electronic health records (EHRs) or other systems that enable longitudinal tracking of individuals’ clinical visits?
9. Yes
10. No
11. Do you house your information technology (IT) systems (e.g., servers) on-site?
12. Yes
13. Describe the room (e.g., hospital server room)
14. Is the room air-conditioned?
15. Yes
16. No
17. No
18. Who does the site contact for IT support?
19. Are they on-site?
20. Yes
21. No
22. How often do they solve the site’s problem? (Select the best option)
23. Some of the time
24. Most of the time
25. All of the time
26. Do you have other comments or additional information regarding the site’s IT capabilities that you would like to share? (< 250 words)

## 5. Attachments

### **Required Documents**

Please remember to attach the following with your survey submission:

* Proposed PI’s CV
* Site Director/Main POC/Po-PI CV
* CHAMPS Site Assessment Survey – Hospital Specific Packet, **one packet for each hospital/inpatient facility listed in Question #13.**

Please provide the following attachments for **each proposed Institution receiving funds over $100,000 under this award**:

1. Non-profit organization registration, if applicable
2. Most recent annual audit
3. Board member names and titles, if applicable
4. Written constitution (or bylaws), if applicable
5. Current organizational chart
6. Written policies controlling the following aspects of operations, if applicable:
	1. Travel
	2. Procurement
	3. Cash Management
	4. Human Resources

### **Supplemental Documents**

While not required, we invite you to attach supporting documentation that demonstrates the site’s processes, plans, organization, etc. for the following areas:

1. Data & specimen sharing & storage protocols
2. CVs of other key staff (beyond the PI)
3. Organizational/site structure

## APPENDIX

**CHAMPS Site Assessment Survey – Hospital Specific Packet**

Please complete one copy of this document for **each** hospital/inpatient facility you plan to have involved in the CHAMPS site (i.e. complete two Hospital Specific Packets if your site will have two inpatient facilities involved; complete three packets if three inpatient facilities will be involved).

### **Clinical Capabilities**

1. Name of facility:
2. Facility Type:
	1. Hospital
	2. Health Clinic
	3. Other
		1. Please specify:
3. List out how many births, and deaths occur:
	1. Per month, on average:
4. List the number of hospital beds available in the following units:
	1. Intensive care unit:
	2. Pediatric intensive care unit:
	3. Neonatal intensive care unit:
	4. Pediatric beds (not intensive care):
	5. Maternity ward beds:
	6. Beds in other area where women give birth, if applicable:
5. The positions listed below are typical positions employed at other CHAMPS sites. Your answers will help us gain a better understanding of your current site personnel capacity. Please provide the number of affiliated personnel for each of the following areas:
	1. Clinical staff at the main hospital(s)
		1. Pediatric Doctors:
		2. Pediatric Nurses:
		3. Other relevant specialists:
	2. Pathology
		1. At site:
		2. In country (if known):
	3. Lab staff trained in:
		1. Bacteriology:
		2. Virology:
		3. Real-time PCR:
6. How many patients under 5 years of age are admitted each year?
7. What proportion of patients seeking care at the hospital receive their care free of charge?
	1. 0 % – 25%
	2. 26% - 50%
	3. 51% - 75%
	4. 76% - 100%
8. Does the hospital measure fetal heart rate at admission for delivery?
	1. Yes
		1. Method of measurement:
	2. No
	3. Sometimes
		1. In what situations is fetal heart rate measured at admission for delivery?
9. Does the hospital perform cesarean sections?
	1. Yes
	2. No
10. How do patients typically travel from home to this hospital?
11. What is the longest time it takes for a patient living in the catchment area to get to this hospital?
12. Do you have other comments or additional information regarding the hospital’s clinical capabilities that you would like to share?

### **Pathology Capabilities**

1. Does the site hospital have a morgue or other facility for cold storage of human remains?
2. Does the site have access locally to pathology services?
	1. Yes
	2. No
		1. What is the distance to the closest pathology lab? (specify distance and travel time)
3. Are autopsies conducted for any purpose at the site hospital(s)?
	1. Yes
		1. How many autopsies were conducted in:
			1. 2019?
			2. 2020?
		2. What proportion of autopsies were:
			1. Complete diagnostic autopsies (CDAs)?
			2. Minimally invasive tissue sampling (MITS)?
		3. Are autopsies conducted on children under 5 at your site?
			1. Yes
				1. For what purposes (check all that apply):

If requested by a physician

For unexplained out of hospital deaths

Research study

Other:

* + - * 1. How many autopsies were conducted among children under 5 years at your site hospital(s) in 2019? 2020?
			1. No
		1. Has the site explored the use of autopsy for any purpose (routine clinical or research)?
			1. Yes; please provide a brief summary of exploration.
			2. No
	1. No
1. If the hospital does not do autopsies, are diagnostic biopsies routinely taken and evaluated?
	1. Yes
	2. No
2. Do you have other comments or additional information regarding the site’s pathology capabilities that you would like to share? (< 500 words)

## END OF HOSPITAL-SPECIFIC PACKET

## Thank you!

Thank you for completing the CHAMPS Site Assessment Survey. It is our aim to evaluate all response submissions within the month of September and develop a short list of sites for consideration to be involved in our next phase of the application process in early October 2021.