

FACILITY ASSESSMENT TOOL

PURPOSE

The facility assessment tool serves to collect information on access to and availability of Standard Days Method® (SDM) system-wide in order to assess the status of SDM integration and service quality. It allowed IRH and the scale-up resource team to track the pace of scale-up and identify areas where specific interventions were needed or strategies needed to be adjusted.

HOW IT WAS DEVELOPED AND USED

The facility assessment tool was born out of the need to properly measure the multiple, complex dimensions of integration of an innovation into a health system, including service quality, commodities and supply chain, provider knowledge and performance, raising awareness of the innovation, and overall health systems strengthening and advocacy into a comprehensive yet simple tool. The tool was developed by combining principles from EngenderHealth's Supply-Enabling Environment-Demand (SEED) Assessment Guide for Family Planning Programming along with questions and formats from various Service Provision Assessments.

The tool was applied at the beginning and towards the end of the scale-up period in a random sample of service delivery points in intervention areas to allow for generalization of findings. Data were collected by a research organization contracted to undertake the assessment on behalf of IRH.

The tool has three components: 1) a brief interview with facility managers to gauge whether SDM services are offered and to verify

that SDM is included in record keeping and information systems; 2) knowledge questions and observation (using a checklist) of the provider explaining to the interviewer how to use SDM/CycleBeads®¹ (not discussed here; see Provider Interview Tool for details); and 3) an audit to assess availability of CycleBeads and IEC materials which include SDM.

Results from the facility assessment were used along with other information, such as stock-out reports, to triangulate service delivery and supervision data related to facility capacity to offer quality SDM services. The baseline/midline findings revealed whether SDM services were affected by systemic issues such as stock outs or poor service quality, and allowed resource organizations to follow up with corrective actions as needed. At endline, the results provided a system-wide assessment of the extent of quality SDM service-provision within a family planning program.

The tool contained eight modules with specific scale-up indicators as listed below:

Section 1: Training and service provision (See Provider Interview Tool)

- Extent of method integration into provider service delivery (offering method at facility)
- Number of providers with capacity to offer method

Section 2: Community health workers (CHW)

- Extent of method integration into CHW service delivery
- Number of CHWs with capacity to offer method

¹ Because the Provider Interview Tool was applied by the same interviewer conducting the facility assessment, it is mentioned here. The compendium treats it as a separate tool, however, to allow more flexibility by organizations or program managers who may choose to use it independently of the provider interview tool.

Section 3: Management and supervision

- Extent of method integration into supervision system

Section 4: Information, Education & Communication (IEC)

- Degree of inclusion of method in IEC materials at facility
- Degree of inclusion of method in IEC activities at facility and/or community level

Section 5: Norms and protocols

- Degree of inclusion of method in facility protocols

Section 6: Logistics and supplies

- Availability of the commodity in facility stock
- Inclusion of the commodity in the facility tracking system

Section 7: Health monitoring information systems (HMIS)

- Level of inclusion of method in HMIS daily register
- Level of inclusion of method's clients in aggregate monthly form
- Level of inclusion of method in user data displayed at facility

Section 8: Costs

- Price at which clients are willing to purchase CycleBeads

IRH defined what constituted SDM services capacity and selected the indicators above to measure different aspects of capacity. Each innovation would need to develop definitions of service capacity and develop indicators accordingly. The tool can easily be adapted to assess integration and service quality for any family planning method.

VALUES

The facility assessment tool helped to monitor the extent to which values inherent in the SDM innovation, such as quality of services and informed choice, were maintained during

scale-up. The tool assessed availability and quality of counseling and services for all methods, rather than SDM only, in order to provide a comparison (e.g. is SDM as available as oral contraceptives?) and to monitor fidelity to the value of expanded choice to a range of FP options.

LESSONS LEARNED

- It is essential to share assessment results with user organizations, such as the Ministry of Health, in a timely manner in order to facilitate collective efforts to address identified weaknesses in service provision.
- Careful definition of indicators is critical. For example, one indicator of availability was simply asking the head of the service facility if the method was available. We found the answer to that question not always valid as s/he may say SDM was available while there were no CycleBeads in stock or no providers were trained to offer the method.
- Often, identified areas of weakness were FP-program related, such as overall commodity stock outs, rather than SDM-specific issues. Effective sharing of SDM integration results often resulted in actions to strengthen FP programs more generally.
- The timing of the facility assessments determines their usefulness. While baseline and midline results provided actionable data for program improvement, the endline data served primarily to assess the success of the scale-up effort.
- The sampling strategy in most countries (representative at the national level, but not by supervision area) limited the usefulness of the data for program improvement. Periodic data collection with smaller samples pegged to supervision areas might yield more useful data.

KEY REFERENCES & RESOURCES

EngenderHealth | 2011. *The SEED assessment guide for family planning programming*: <http://www.engenderhealth.org/files/pubs/family-planning/seed-model/seed-assessment-guide-for-family-planning-programming-english.pdf>

MEASURE DHS | Service Provision Assessment Surveys: <http://www.measuredhs.com/What-We-Do/Survey-Types/SPA.cfm>

Population Council | 1989. *Situation Analysis: Pinpointing problems in family planning service delivery*: <http://www.popcouncil.org/what/technicalservices/SA.asp>

FACILITY ASSESSMENT TOOL

FAM PROJECT SITE ASSESSMENT ENDLINE

INTERVIEWER: WHEN YOU ASK THE CONSENT OF THE HEALTH FACILITY SUPERVISOR, ASK THE SUPERVISOR TO HELP YOU IDENTIFY WHICH PERSONS WOULD BE APPROPRIATE/HAVE THE EXPERIENCE OR KNOWLEDGE TO ANSWER EACH OF THE SECTIONS

SECTION	NAME	ROLE/TITLE
1. TRAINING AND SERVICE PROVISION	_____	_____
2. COMMUNITY HEALTH WORKERS	_____	_____
3. MANAGEMENT AND SUPERVISION	_____	_____
4. INFORMATION, EDUCATION AND COMMUNICATION	_____	_____
5. NORMS AND PROTOCOLS	_____	_____
6. LOGISTICS/SUPPLIES	_____	_____
7. HEALTH MONITORING INFORMATION SYSTEMS	_____	_____
8. COST	_____	_____

INTERVIEW THE RELEVANT PERSONS THAT CAN ANSWER THE QUESTIONS TO THESE MODULES

CONSENT WILL BE REQUESTED OF EACH RESPONDENT

FAM PROJECT ENDLINE: SITE ASSESSMENT																								
[NAME OF COUNTRY]																								
IDENTIFICATION																								
NAME OF HEALTH FACILITY VISITED: _____ HEALTH FACILITY CODE REGION URBAN/RURAL (URBAN=1, RURAL=2 LARGE CITY/SMALL CITY/TOWN/COUNTRYSID (LARGE CITY=1, SMALL CITY=2, TOWN=3, COUNTRYSIDE=4)	<table border="1" style="margin: auto;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>																							
INTERVIEWER VISITS																								
	1	2	3	FINAL VISIT																				
DATE	_____	_____	_____	DAY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table> NAME _____ RESULT _____																				
INTERVIEWER'S NAME	_____	_____	_____	NAME _____																				
RESULT*	_____	_____	_____	RESULT _____																				
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TIME	_____	_____																						
*RESULT CODES: 1 COMPLETED 4 REFUSED 2 NOT AVAILABLE 5 PARTLY COMPLETED 3 POSTPONED 6 OTHER _____ <div style="text-align: right;">(SPECIFY)</div>																								
TYPE OF SECTOR 1 = GOVERNMENT/PUBLIC 4 = PRIVATE 2 = MISSION/FBO 6 = OTHER _____ 3 = NGO																								
TYPE OF HEALTH FACILITY 1 = REFERRAL HOSPITAL 5 = CLINIC 2 = DISTRICT HOSPITAL 7 = HEALTH POST 3 = SUB-DISTRICT HOSPITAL 6 = OTHER _____ 4 = RURAL HEALTH CENTER																								
LANGUAGE OF QUESTIONNAIRE 1 = ENGLISH 2 = FRENCH 3 = SPANISH 4 = HINDI	LANGUAGE OF INTERVIEW 1 = ENGLISH 2 = FRENCH 3 = SPANISH 4 = HINDI	NATIVE LANGUAGE OF RESPONDENT: 1 = ENGLISH 6 = OTHER 2 = FRENCH 3 = SPANISH (SPECIFY) 4 = HINDI		TRANSLATOR USED YES..... 1 NO..... 2																				
SUPERVISOR NAME _____ DATE _____ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>				FIELD EDITOR NAME _____ DATE _____ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>				OFFICE EDITOR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>																
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SECTION 1: TRAINING AND SERVICE PROVISION			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	_____ <input style="width: 30px; height: 20px;" type="text"/>	
100	Are family planning services available to clients at this facility?	YES 1 NO 2	→ END
101	What family planning methods does this facility offer? READ ALL AND CIRCLE THOSE MENTIONED	FEMALE STERILIZATION A MALE STERILIZATION B PILL C IUD D INJECTABLES E IMPLANTS F CONDOM G FEMALE CONDOM H DIAPHRAGM I FOAM/JELL J LAM K SDM (CYCLEBEADS) M OTHER _____ X (SPECIFY)	
102	Typically, how many days per week are family planning services offered?	DAYS PER WEEK <input style="width: 30px; height: 20px;" type="text"/>	
103	Is this the only unit where family planning is offered in this facility?	YES 1 NO 2	→ 105
104	If not, please tell us which other unit/section of the facility provides family planning?	_____ <input style="width: 30px; height: 20px;" type="text"/>	
PLEASE ASK THE FOLLOWING QUESTIONS ABOUT THE PAID STAFF IN THIS FACILITY IF YOU DON'T KNOW, WRITE 86 AS THE ANSWER.			
105	How many providers have been trained to offer family planning services?	NUMBER OF PROVIDERS <input style="width: 30px; height: 20px;" type="text"/>	
106	How many providers have been trained to offer SDM (CycleBeads)?	NUMBER OF PROVIDERS <input style="width: 30px; height: 20px;" type="text"/>	
107	Have providers received refresher training on the SDM (CycleBeads) in the last 1 year?	YES 1 NO 2 NO SDM (CYCLEBEADS) OFFERED 3	

108	CHECK 101: SDM NOT OFFERED <input type="checkbox"/> SDM OFFERED <input type="checkbox"/>	110
109	CHECK 106: AT LEAST ONE PROVIDER TRAINED ON SDM <input type="checkbox"/> NO PROVIDERS TRAINED ON SDM <input type="checkbox"/>	END
110	How long ago did this facility start offering the SDM (CycleBeads)? YEARS <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> MONTHS <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> DONT KNOW 8	
111	During those days you offer family planning, are there days when SDM (CycleBeads) is not offered? YES 1 NO 2	→ 113
112	Why is SDM (CycleBeads) not offered every other day family planning services are offered? NO TRAINED PROVIDER AVAILABLE 1 NO ELIGIBLE WOMEN VIS. 2 NOT OFFERED BY PROVIDERS 3 OTHER 6 (SPECIFY)	
113	Do you ever receive referrals for SDM (CycleBeads)? YES 1 NO 2 DONT KNOW 8	→ 115
114	From where does your facility receive referrals? Any other place? CIRCLE ALL MENTIONED	REFERRAL HOSPITAL A DISTRICT HOSPITAL B SUB-DISTRICT HOSPITAL C RURAL HEALTH CENTER D CLINIC E HEALTH POST F PHARMACY G CBD OR COMMUNITY OUTREACH H FAITH-BASED ORGANIZATION (FBO) I OTHER X (SPECIFY)
115	Do you refer clients for SDM (CycleBeads) services elsewhere? YES 1 NO 2	→ 118
116	Why? _____ _____	
117	Where do you refer clients for SDM (CycleBeads) services? Any other place? CIRCLE ALL MENTIONED	REFERRAL HOSPITAL A DISTRICT HOSPITAL B SUB-DISTRICT HOSPITAL C RURAL HEALTH CENTER D CLINIC E HEALTH POST F PHARMACY G CBD OR COMMUNITY OUTREACH H FAITH-BASED ORGANIZATION (FBO) I

SECTION 2: COMMUNITY HEALTH WORKERS			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	<input style="width: 50px;" type="text"/>	
201	Are there any community health workers affiliated with this facility?	YES..... 1 NO..... 2	→ 301
202	What type of services do Community Health Workers (CHW) associated with your facility offer? CIRCLE ALL MENTIONED Any other service?	FAMILY PLANNING..... A IMMUNIZATION..... B WELL-BABY CARE..... C TB DOTS..... D HEALTH EDUCATION..... E OTHER..... X (SPECIFY)	
203	Is SDM (CycleBeads) part of the package of family planning services offered by CHWs?	YES..... 1 NO..... 2	→ 205
204	If not part of the package, why not?	CHWs HAVE NOT BEEN TRAINED.... 1 SDM HAS NOT BEEN INTRODUCED... 2 DO NOT HAVE CYCLEBEADS..... 3 OTHER..... 6 (SPECIFY)	
205	How many staff or CHWs have been trained to offer SDM (CycleBeads): all, most, some, or none?	ALL..... 1 MOST..... 2 SOME..... 3 NONE..... 4	→ 207 → 207
206	Please explain. _____ _____	<input style="width: 50px; height: 40px;" type="text"/>	
207	Is LAM part of the package of family planning services offered by CHWs?	YES..... 1 NO..... 2	
208	How many staff or CHWs have been trained to offer LAM all, most, some, or none?	ALL..... 1 MOST..... 2 SOME..... 3 NONE..... 4	→ 301 → 301
209	Please explain. _____ _____	<input style="width: 50px; height: 40px;" type="text"/>	

SECTION 3: MANAGEMENT AND SUPERVISION																																																																									
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																																						
	TITLE OF RESPONDANT FOR SECTION	_____ <input style="width: 20px; height: 15px;" type="text"/>																																																																							
301	How many times in the last 6 months has a supervisor come to the family planning unit for supervisory purposes?	NUMBER OF TIME: <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> NOT ONCE. 0 0	→ 401																																																																						
302	When visiting the facility, which of the following does the supervisor do: READ ACTIVITIES BELOW, CIRCLE 1 FOR YES, 2 FOR NO, 3 FOR SOMETIMES a. Observe delivery of family planning services? b. Is SDM (CycleBeads) observed? c. Is LAM observed? d. Asks about family planning counseling? e. Does he/she ask about SDM (CycleBeads) counseling? f. Does he/she ask about LAM counseling? g. Examines family planning registers/books? h. Examines family planning client charts? i. Uses tool to supervise providers? j. Is SDM (CycleBeads) included on the tool? k. Is LAM included on the tool? l. Provides feedback? m. Provides reinforcement training?	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> <th style="text-align: center;">SOME-DK</th> <th style="text-align: center;">TIMES</th> </tr> </thead> <tbody> <tr> <td>OBSERVES</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>SDM (CBs)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>LAM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>ASKS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>SDM (CBs)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>LAM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>REGISTERS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>CLIENT CHARTS ...</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>SUPERVISE TOOL</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>SDM (CBs)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>LAM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>FEEDBACK</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> <tr> <td>REINFORCEMENT</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">8</td> </tr> </tbody> </table>		YES	NO	SOME-DK	TIMES	OBSERVES	1	2	3	8	SDM (CBs)	1	2	3	8	LAM	1	2	3	8	ASKS	1	2	3	8	SDM (CBs)	1	2	3	8	LAM	1	2	3	8	REGISTERS	1	2	3	8	CLIENT CHARTS ...	1	2	3	8	SUPERVISE TOOL	1	2	3	8	SDM (CBs)	1	2	3	8	LAM	1	2	3	8	FEEDBACK	1	2	3	8	REINFORCEMENT	1	2	3	8	
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SECTION 4: INFORMATION, EDUCATION AND COMMUNICATION (IEC)																																													
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	TITLE OF RESPONDANT FOR SECTION	_____ <input style="width: 20px; height: 15px;" type="checkbox"/>																																											
401	<p>QUESTIONS 401-404 ARE BASED ON OBSERVATION</p> <p>CIRCLE ALL THAT APPLY</p> <p>SIGN/POSTER ANNOUNCING FP SERVICES: INSIDE THE BUILDING OUTSIDE THE BUILDING</p> <p>WALL MURALS/DISPLAYS (INCLUDING POSTERS)</p> <p>FAMILY PLANNING BROCHURES/HANDOUTS</p> <p>FLIP CHART TO SUPPORT FAMILY PLANNING COUNSELLING.</p> <p><small>*Clearly visible means that posters are logically placed, in a non-cluttered environment and not blocked by other print materials</small></p>	<p style="text-align: center;">Av ailabl Clearly Includes Includes Visible SDM (CBs) LAM</p> <p>SIGN INSIDE A B C D SIGN OUTSIDE A B C D</p> <p>DISPLAYS A B C D</p> <p>BROCHURES A B C D</p> <p>FLIP CHART A B C D</p>																																											
402	OBSERVE IF THERE IS A SIGN/POSTER STATING COST OF FAMILY PLANNING SERVICES.	YES 1 NO 2	→ 404																																										
403	IF COSTS OF EACH METHOD ARE INCLUDED ON THE SIGN/POSTER, PLEASE WRITE THEM HERE.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">UNIT</th> <th style="width: 10%; text-align: center;">COST</th> </tr> </thead> <tbody> <tr><td>FEMALE STERILIZATION . . .</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>MALE STERILIZATION</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>PILL</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>IUD</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>INJECTABLES</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>IMPANTS</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>CONDOM</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>FEMALE CONDOM</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>DIAPHRAGM</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>FOAM/JELLY</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>LAM</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>SDM (CYCLEBEADS)</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> <tr><td>OTHER _____</td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr> </tbody> </table>		UNIT	COST	FEMALE STERILIZATION . . .			MALE STERILIZATION			PILL			IUD			INJECTABLES			IMPANTS			CONDOM			FEMALE CONDOM			DIAPHRAGM			FOAM/JELLY			LAM			SDM (CYCLEBEADS)			OTHER _____			
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404	WHICH OF THE FOLLOWING SDM POSTERS ARE CLEARLY VISIBLE AT THIS FACILITY?	DEVELOP ACCORDING TO LOCAL CONTEXT COLLAPSE INTO ONE LIST , OBSERVATION																																											
ASK THE FOLLOWING (405-414):																																													
405	Are talks on family planning provided at this facility?	YES 1 NO 2 DON'T KNOW 8	→ 409																																										
406	How often are these talks held?	EVERY WEEK 1 EVERY MONTH 2 EVERY 3 MONTHS 3 ONCE A YEAR 4 OTHER _____ 6 SPECIFY																																											

407	Is SDM included in the talks?	YES 1 NO 2 DON'T KNOW 8	
408	Is LAM included in the talks?	YES 1 NO 2 DON'T KNOW 8	
409	Does the facility provide family planning education through outreach activities such as community talks and home visits?	YES 1 NO 2 DON'T KNOW 8	→ 501
410	Is the SDM (CycleBeads) included?	YES 1 NO 2 DON'T KNOW 8	→ 413
411	What outreach activities include SDM (CycleBeads)? Any other activity? RECORD ALL MENTIONED.	COMMUNITY TALKS A HOME VISITS B LOUD SPEAKER C HEALTH FAIRS D RADIO SPOTS/TALKS E STREET THEATER F OTHER _____ X (SPECIFY)	
412	Who conducts these activities? RECORD ALL MENTIONED.	COMMUNITY HEALTH WORKER! A COMMUNITY VOLUNTEERS B FACILITY BASED PROVIDERS C CURRENT USERS D MIDWIVES E NGO EXTENSIONIST! F OTHER _____ X (SPECIFY)	
413	Is LAM included in outreach activities?	YES 1 NO 2 DON'T KNOW 8	→ 501
414	What outreach activities include LAM? Any other activity? RECORD ALL MENTIONED.	COMMUNITY TALKS A HOME VISITS B LOUD SPEAKER C HEALTH FAIRS D RADIO SPOTS/TALKS E STREET THEATER F OTHER _____ X (SPECIFY)	
415	Who conducts these activities? RECORD ALL MENTIONED.	COMMUNITY HEALTH WORKER! A COMMUNITY VOLUNTEERS B FACILITY BASED PROVIDERS C CURRENT USERS D MIDWIVES E NGO EXTENSIONIST! F OTHER _____ X (SPECIFY)	

SECTION 5: NORMS AND PROTOCOLS			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	_____ <input style="width: 20px; height: 20px;" type="checkbox"/>	
501	Does the facility have written norms and protocols?	YES 1 NO 2 → 601 DON'T KNOW 8 → 601	
502	Can I see a copy of FP protocol or norms CHECK YES OR NO IF PROTOCOLS OR NORMS ARE AVAILABLE	YES AVAILABLE 1 NOT AVAILABLE 2 CAN'T FIND A COPY 8	
503	Is SDM (CycleBeads) included in the family planning protocol of your facility?	YES 1 NO 2 → 505	
504	How do you know SDM (CycleBeads) is included in the protocol?	_____ <input style="width: 20px; height: 20px;" type="checkbox"/> _____	
505	Is LAM included in the family planning or other protocols of your facility?	YES 1 NO 2 → 601	
506	How do you know LAM is included in the protocol?	_____ <input style="width: 20px; height: 20px;" type="checkbox"/> _____	

SECTION 6. LOGISTICS AND SUPPLIES			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	<input type="checkbox"/>	
601	CHECK Q. 101 AND MARK METHODS THAT ARE PROVIDED IN THE FACILITY	PILL C CONDOM!..... G SDM (CYCLEBEADS) M	
602	IF THE METHOD IS PROVIDED, CHECK IF IT IS AVAILABLE IN INVENTORY	PILL C CONDOM!..... G SDM (CYCLEBEADS) M	
603	ASK TO SEE THEIR CYCLEBEADS INVENTORY AND OBSERVE THE FOLLOWING: a. CORRECT INSERT? (HAVE ONE AVAILABLE TO COMPARE) SPECIFY _____ (LITERACY, LANGUAGE, ETC) b. EXTRA RING IN PACKAGE? c. ARE THIS YEAR'S (2012) AND NEXT YEAR'S (2013) CALENDARS IN THE PACKAGE?	YES 1 NO 2 CYCLEBEADS NOT SEEN/ NO STOCK 3 YES 1 NO 2 CYCLEBEADS NOT SEEN/ NO STOCK 3 YES 1 NO 2 CYCLEBEADS NOT SEEN/ NO STOCK 3	
604	Has there been any stock outs in the last 3 months of any of CycleBeads, condoms, or pills?	PILL C CONDOM!..... G SDM (CYCLEBEADS) M	
605	Does your facility have a system for recording contraceptive supplies?	YES 1 NO 2	→ 609
606	How do you track supplies?	<input type="checkbox"/>	
607	Which methods are included in the tracking system: CycleBeads, condoms, pills, injectables, foam/jelly or any other?	PILL C INJECTABLES E CONDOM!..... G FOAM/JELLY J SDM (CYCLEBEADS) M OTHER _____ X (SPECIFY)	

608	Which methods have been added to the tracking system in the last three months: CycleBeads, condoms, pills, or any other?	PILL C INJECTABLES E CONDOM! G FOAM/JELLY J SDM (CYCLEBEADS) M OTHER _____ X (SPECIFY)	
609	ASK TO SEE THE CARD/REGISTER AND RECORD THE NUMBER OF EACH SUPPLY IN STOCK.	PILLS <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> INJECTABLES <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> CONDOM! <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> CYCLEBEADS <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>	
610	When you need more CycleBeads, how do you order them? _____	<input style="width: 30px; height: 30px; border: 1px solid black;" type="checkbox"/>	
611	When you need more pills, how do you order them? _____	<input style="width: 30px; height: 30px; border: 1px solid black;" type="checkbox"/>	
612	Do you supply CycleBeads to CHWs or community-based organizations?	YES 1 NO 2	

SECTION 7 HEALTH MONITORING INFORMATION SYSTEMS			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	_____ <input type="checkbox"/>	
701	Are family planning clients recorded in the daily register?	YES 1 NO 2	→ 710
702	Are SDM (CycleBeads) clients recorded in the daily register?	YES 1 NO 2	→ 706
703	How are SDM (CycleBeads) clients recorded in the daily register?	SEPARATE COLUMN FOR SI . . . 1 CODED UNDER NATURAL 2 SEPARATE FORM 3 WRITTEN IN MARGIN 4 OTHER _____ 6 (SPECIFY)	
704	AFTER ASKING Q703, OBSERVE HOW IT IS DONE ASK TO SEE THE REGISTER/BOOK.	SEPARATE COLUMN FOR SDM . . 1 CODED UNDER NATURAL 2 SEPARATE FORM 3 WRITTEN IN MARG 4 OTHER _____ 6 (SPECIFY)	
705	Are SDM (CycleBeads) clients recorded in the aggregate (monthly) form that is used to report to the next level?	YES 1 NO 2	
706	Are LAM clients recorded in the daily register?	YES 1 NO 2	→ 710
707	How are LAM clients recorded in the daily register?	SEPARATE COLUMN FOR SDM . . 1 CODED UNDER NATURAL 2 SEPARATE FORM 3 WRITTEN IN MARG 4 OTHER _____ 6 (SPECIFY)	
708	AFTER ASKING Q707, OBSERVE HOW IT IS DONE ASK TO SEE THE REGISTER/BOOK.	SEPARATE COLUMN FOR SI . . . 1 CODED UNDER NATURAL 2 SEPARATE FORM 3 WRITTEN IN MARG 4 OTHER _____ 6 (SPECIFY)	
709	Are LAM clients recorded in the aggregate (monthly) form that is used to report to the next level?	YES 1 NO 2	
710	Does the facility display data on the number of FP users in the facility? a. Is it broken down by method? b. Are SDM (CYCLEBEADS) users displayed? c. Are LAM users displayed?	YES 1 NO 2 YES 1 NO 2 YES 1 NO 2 YES 1 NO 2	→ 801 → 801

SECTION 8: COST			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	TITLE OF RESPONDANT FOR SECTION	_____ <input style="width: 20px; height: 15px;" type="text"/>	
801	Does the facility charge for family planning v visits?	YES 1 NO 2	→ 803
802	If so, how much is each visit?	COST PER VISIT <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	
803	For which of the following methods does the facility charge for supplying: CycleBeads, condoms, pills, injectables, any other?	CYCLEBEADS A CONDOMS B PILLS C INJECTABLES D OTHER _____ X (SPECIFY)	
804	How much does the facility charge for CycleBeads?	CYCLEBEADS..... <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	
805	How much does the facility charge for Condoms?	CONDOMS..... <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	
806	How much does the facility charge for Pills?	PILLS..... <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	

