

REPUBLIC OF LIBERIA
MINISTRY OF HEALTH & SOCIAL WELFARE

NATIONAL MALARIA CONTROL PROGRAMME

**TRAINING MANUAL FOR HEALTH FACILITY SURVEY AFTER
MALARIA CASE MANAGEMENT TRAININGS**

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I OVERVIEW OF DATA COLLECTION PROCEDURES¹

1. INTRODUCTION

The objective of the Health Facility Survey (HFS) is to collect information on the delivery of health services in selected health facilities in Liberia. The HFS examines the supply side of the health care, providing an assessment of the readiness of facilities to provide good quality health services. The focus of this HFS is on malaria-related services, but other related services, such as IMCI and EPI, are also considered to certain extent.

Information from this HFS will help the National Malaria Control Program (NMCP) in improving the quality of malaria-related services in general, but particularly in case management aspects.

A. Survey Organization

The HFS is conducted by the NMCP with technical and financial assistance from WHO. Other partners that provided technical assistance include, MENTOR.

B. Survey Objectives

The main objectives of HFS are:

- ▶ To describe how the public health facilities are prepared to provide quality health care services, particularly anti-malarial services.
- ▶ To identify the gaps in the support services, resources, or the process used in providing quality services;
- ▶ To describe the extent to which patients understand what they must do to prevent and treat malaria.

C. HFS Sample

The facilities included in the survey are a sample of facilities that offer outpatient care in the 15 counties of Liberia. These facilities may also provide child, maternal, or reproductive health services. This sample has been carefully selected to ensure that the survey results can be analyzed separately for each county. Approximately 37% of functioning health facilities will be randomly selected from the list of all health facilities in the each county, to make a total of 120 health facilities for the HFS. To ensure that the sample adequately represents the true picture of all health facilities in the 15 counties, it is very important that you find and visit all of the facilities that have been selected for your team.

D. HFS Data Collection Instruments

The HFS involves a number of data collection instruments designed to provide comprehensive information on the delivery of outpatient. These data collection instruments include the following:

- ▶ *Facility Inventory:* The facility inventory is designed to obtain information on the readiness to provide outpatient care. The inventory collects information on the availability of specific services, components of support systems (e.g., logistics, maintenance, management), and facility infrastructure.
- ▶ *Health Worker Interview:* Health service providers are interviewed for information on their training, experience, and in-service training. They will be also interviewed about any supportive supervision they may have received.
- ▶ *Observation of Outpatient Consultations:* This tool is designed to systematically collect information during the interaction of patients/caretakers and clinicians. During these observations, the health worker is assessed whether he/she follows the nationally recommended malaria case management guidelines. The process used when conducting specific procedures, physical examinations, and the content of counseling or health education messages.
- ▶ *Exit Interviews:* The exit interviews are conducted with patients/care givers who's consultations you have observed. They have been designed to assess the patient's/caretaker's understanding of the messages given. Recall of key messages increases the likelihood that patients/caretakers will be able to successfully follow treatment or health messages that reduce disease burden.

E. HFS Field Staff Training

A total of 4 teams will conduct the HFS. Typically, each team will consist of 3 interviewer-observers. In addition, there will be 1 Field Supervisor that will give field support to each team. This training is intended to provide you with skills on interview-observation techniques and how to administer the questionnaires. You are all expected to master these techniques.

At the end of the training, you should be able to:

- Identify the appropriate patients to observe/interview at each facility
- Fill in questionnaires correctly.
- Observe outpatient consultations
- Practice interviews with other trainees, MOH staff, and other health service providers.

F. General Survey Regulations

In order to ensure the success of the HFS, the following general regulations for any type of fieldwork must be observed:

- Every member of the survey team is vital to the success of the survey. Therefore, your presence is required for each day of the training and fieldwork. Except for illnesses, tardiness or absenteeism during any part of the training or any part of the fieldwork (whether it is a whole day or part of a day) is not acceptable.
- Since you are all health professionals, throughout the training and the fieldwork period, you are representing the Ministry of Health & Social Welfare. Your conduct must be professional and your behavior must be congenial when dealing with the community. You must always be aware of the fact that we are only able to do our work with the good will and cooperation of the people we interview. Therefore, no team member should be overly aggressive, abrupt, or disrespectful to patients or other health professionals that he/she is interviewing or observing.
- For the survey to succeed, each team must work closely together.
- It is critical that the data gathered during the fieldwork be both consistent and accurate. Check for **inconsistencies** or **blank responses** before you hand in your completed questionnaires to your supervisor.
- Survey vehicles and fuel are for official use only – unless there is an emergency. In case of emergency, the survey supervisors will approve the use of survey vehicles.
- Remember that HFS data are **confidential**. Under no circumstances should confidential information be passed on to third parties.

2. PLANNING THE HFS FIELDWORK

The following describes in detail the activities that are involved in planning the HFS fieldwork. In most cases, the Supervisors will have the primary responsibility for planning field activities.

A. Fieldwork Schedule

The Field Supervisor(s) will assign each team a list of facilities to be visited for data collection. The list will include the name and location of the facility as well as the facility identification information (facility code) required in the HFS questionnaires.

The Field Supervisor(s) will work with other members of the team including the driver to prepare a schedule for the visits to the facilities assigned to each team. Since there will be a limited number of vehicles, the schedule will be designed to the use of one vehicle per team.

In developing the schedule, the Field Supervisor(s) must take into account the location of each of the facilities as well as the localities where the team will likely be staying overnight. The team generally will need to arrive at a facility on or before the official opening hours, therefore, the lodgings that the team will use each night must be within a reasonable distance of the facility that is to be visited on the next day.

The Field Supervisor(s) must inform the survey team of the schedule of their visit prior to beginning fieldwork. It is likely that there will be changes in the visit schedule during the course of the fieldwork, and it is the Field Supervisor's responsibility to keep the survey staff updated on the team's schedule.

B. Early Notification to Facility In-Charges

The Field Supervisor(s), in order to avoid confusions, must notify appropriate authorities the nature and purpose of the HFS in advance of the fieldwork. It is best if an official letter, probably from the National Malaria Control Program (NMCP) Manager, was sent to each facility before the start of the fieldwork. Each team should also have a copy of such letter to show at site if necessary.

C. Final Arrangements

Prior to departure for fieldwork, the supervisor must ensure that the team has all of the questionnaires and other materials (pens, clipboards, and other supplies) necessary to complete its assignment. The supervisor must also have introductory letters from the Ministry of Health (NMCP) as well as other organizations whose facilities will be visited during the survey. In particular, the supervisor must make sure that the team has a sufficient number of each of the HFS questionnaires at all times.

The Field Supervisor will be responsible for all transport arrangements, this will include confirming that any maintenance activities are complete and that coupons (or cash) are available for fuel purchases and maintenance. The Field Supervisor also may be required to make/confirm accommodation reservations for the team during the fieldwork. Throughout the fieldwork, the Field Supervisor is responsible for ensuring that the teams have adequate equipment and supplies and, with the assistance of the drivers, for ensuring that the maintenance schedule for the vehicle is followed and for dealing with unexpected problems with the vehicle.

3. ORGANIZATION OF ACTIVITIES DURING FACILITY VISIT

There are a number of general procedures to be followed by a HFS team during a visit to a survey facility. These procedures are outlined in the following sections, along with general tips for interviewing respondents, instructions for recording responses in the questionnaires, and ensuring quality in the data collection process. Subsequent sections of the manual provide detailed instructions for completing each of the HFS instruments.

A. Verifying Facility Identification

The hospitals, health centres, clinics and other health facilities included in this survey have been specifically selected to meet special sample criteria. Every attempt should be made to conduct the HFS data collection at the selected facilities.

The Supervisor is responsible for making sure that the team visits all of the facilities that his/her team is assigned during the HFS. If after contacting local authorities, you cannot locate a facility or are not sure about whether a facility that you have found is actually in the HFS sample, contact the Field Supervisor. If a facility included in the team's assignment has closed, the Supervisor should also contact the Field Coordinator.

Finally, no facility not listed in the sample should be visited and interviewed unless specifically approved by a Field Supervisor.

B. Gaining Permission for the Survey

The HFS team will visit both government-operated and non-government facilities. It is important that in-charges of all selected facilities are aware of the survey prior to the arrival of the fieldwork staff.

The initial impression you give to the facility staff will be important to gaining their cooperation with the survey. At all times the staff at the facility must be treated with respect and politeness. Upon arrival at each facility, the Supervisor will ask to see the person in charge. If the "in-charge" is not present the day of the survey, they must ask to see the person acting "in-charge" for the day. The Supervisor will introduce the survey team and explain the purpose of the visit and various activities of the team during the day. At this time, the introductory letters from the relevant organization and the letters explaining the survey and its authorization will be given to the in-charge.

An example of an introduction upon arrival would be:

"Good day. My name is _____. My colleagues and I are representatives of the National Malaria Control Programme. We are conducting a survey of facilities that provide outpatient care. We are visiting 120 hospitals and clinics in all counties in Liberia and your facility was selected, to be included in the survey."

As a part of the survey, we are collecting information on the types of equipment and supplies that are available in facilities and the training of staff that provide services. We would like to observe some of the outpatient consultations as they are provided and to talk with patients/caretakers after they complete their visit to your facility.

All of the information that is collected from this facility will be strictly confidential. We will not be referring to individual facilities in our report, but rather are looking at the overall picture for all facilities of the same type.

The purpose of this survey is to provide information to National Malaria Control Programme management, for programme planning purposes.

Do you have any questions thus far?

May we proceed?

If you are refused to proceed and nothing you say can make the in-charge reconsider, contact the Field Supervisor, and provide the name of the facility and location. The Field Supervisor will make every attempt to contact appropriate persons who can help to convince the health facility staff to allow the survey.

C. Organizing Data Collection at a Facility

Firstly, the Supervisor will discuss with the in-charge of the service delivery system for the outpatient service of the facility. It is important to determine at the start of your visit what the normal flow of patients is, and where medications and other supplies are kept. It is also important to determine the times and locations where the outpatient consultations are held in order to plan the logistics for the observation and for exit interview components of the HFS.

The Supervisor is responsible for working out a plan for completing all components of the HFS of each selected facility. The Supervisor should discuss the plan with the in-charge. It may be helpful to meet with relevant Heads of various departments (at large facilities) and other staff who may be requested to allow interviews and observations during the team's visit. For a small facility this may be relatively easy since most services are provided in the same area. For larger facilities, this may involve different departments.

After this preliminary introduction, you must select the health worker(s) to be interviewed so that the in-charge can ensure that he/she is available at the end of the consultations. All health workers who provide outpatient consultations (including sic children) must be observed and interviewed. Health workers who have dual responsibility (managerial and consultation) should also be interviewed. Any health worker who does not have outpatient consultation duties (e.g. laboratory or pharmacy workers, full-time managers) should not be interviewed.

Priority should be given to the observation of outpatient consultation tool, since it is the most difficult one to complete. The Supervisor should arrange for the observer to go to the first room where observations will take place while the exit interviewer is placed near the exit of the facility. Depending on how frequently the eligible patients are observed and interviewed, the inventory and health worker interviews may be conducted in between consultations and exit interviews or towards the end of the outpatient consultations.

D. Selection of patients for observation

For each selected facility you need to observe a maximum of 10 patients (five children and five adults). If the outpatient services for children and adults are separate, use one observer for each consultation room. For combined services, select five children and five adults per facility.

Since you will arrive before the consultation service begins, prepare about 10 cards numbered from 1-10. Distribute these numbered cards to patients on first-come-first-selected basis. You should select patients with fever, cough or difficult breathing, diarrhea or other common illnesses. Do not select cases of accidents, snake bites, etc.

The following are a logical sequence of activities during the HFS:

- 1) Arrive at the facility prior to opening time
- 2) Supervisor meets with the “in-charge” and explains survey components and gain permission for conducting the survey.
- 3) Discuss outpatient flow, and staff work patterns.
- 4) Ask to be introduced to all service areas where outpatient consultations will occur and where the observer and exit interviewer will sit so they can begin their work.
- 5) Arrange with the “in-charge” a convenient time for asking the facility inventory questions and list of all eligible health workers for interviews.

After these activities are completed, the Supervisor must decide whether the work of the HFS will be best organized in this facility by

- A) Working in the morning with one observer and one exit interviewer. After completion of observation and exit interviews, these two will complete the inventory and health worker interviews.
- B) If you have a three-member team, working with one observer, one exit interviewer, and the Supervisor completing the inventory or health worker interview questionnaires. This is practical in facilities where patient-flow is not intense but continuous throughout most of the day.

In any case, it is recommended that the Supervisor involve the “In-Charge” or another person designated by him/her, in developing an effective plan of work

4. BEST APPROACHES FOR CONDUCTING INTERVIEWS/OBSERVATIONS

Listed below are some general rules in conducting interviews or observations at a health facility.

► *Politeness and Respectfulness*

The quality of the information you collect will depend largely on the attitude of both the health providers and clients. Therefore, the interaction between yourself and all respondents is very important. All respondents should be treated respectfully and politely. The respondents should know that you appreciate their cooperation and the time they are taking to help make the survey successful.

If the respondent feels that the information is important and that you are sympathetic to their situation, they will be more straightforward with responses and will be more likely to answer questions to the best of their ability. If they feel pressured to respond, or feel that the interview is a burden, they may give hasty and incorrect responses.

► *Clear and Accurate Questions*

Always ask questions using the exact wording found in the HFS instrument. Speak slowly and clearly so that the people/person you are interviewing will have no difficulty in hearing or understanding the question. At times, you may need to repeat the question in order to be sure the respondent(s) understand(s) it. In those cases, be careful not to use wording that may change the meaning of the question.

► *Be straightforward*

There are many questions in the survey where you are asking about the availability of items, and then asking to see them. Health Workers will be more cooperative if they know beforehand what to expect. If you ask questions and then later ask to see items, people may think you are trying to trick them, or “checking up” on their answer.

For better cooperation, always tell the respondent about your intentions. For example:

“This time I am going to ask you about the availability of certain equipment and supplies in your facility, if they are functioning, and with your permission I will need to see these items.”

► *Never ask leading questions*

If the respondents' answer is not relevant to a question, do not prompt them by saying something like "I suppose you mean that...Is that right?" In many cases, the respondents will agree with your lead, even when that is not what they think the answer is. Rather, in most cases, you should probe by asking, "*What else you think...?*" "*Can you explain a little more?*" "*There is no hurry. Take a moment to think about it*".

Ask the question the way it is worded. Never read out the list of coded responses in the coding categories column, even when they have trouble in providing any answers.

► *Be diplomatic*

Sometimes you may encounter respondents who are not cooperative, tired or provide contradicting or irrelevant answers. In these cases you should stimulate their interest in the interview. For example, if the respondents are giving irrelevant or elaborate answers or complaining about something, do not stop them put them off, but listen to what they have to say. Then gently lead them back to the question. Remember a good atmosphere must be maintained throughout the interview. The best atmosphere for an interview is one that is conducted in a friendly environment. The respondent should see you as someone who cares about his or her frustrations and concerns.

► *Do not interrupt service provision*

When observing a consultation, do not interrupt the health worker. If you want to clarify some observations, wait till the health worker is done with the patient. Furthermore, if the health worker you need to interview is providing a service, wait until that session is completed.

► *Do not offer advice on patient care or overall health systems*

Remember that you are not there to provide advice on health care services. If a health worker asks you your opinion about a case, simply tell him or her that you are here to collect information that may help improve the provision of services in this facility. If you observe what you consider to be wrong practices, make a note on the questionnaire, but, again, make no comment or intervention.

II COMPLETING THE HFS QUESTIONNAIRES

The information that you collect in the field will be entered into a data file using a computer later in the evening. At that point, it is very difficult to correct for errors or omissions in the questionnaires. Therefore it is very important that you correctly record the answers. If you are not so sure, ask the Field Supervisor.

1. RECORDING THE RESPONSES

In the HFS, all questionnaires are to be completed using pens with blue ink. Blue ink is used because it can be distinguished from the black ink in which the questionnaires are printed. Never use red ink in recording responses since this color is reserved for Field Supervisors to use in correcting the questionnaires .

The procedures for recording responses will vary according to the type of question; there are three types of questions in the HFS questionnaires: (1) pre-coded questions, (2) questions requiring a numeric response, and (3) open-ended questions.

Never leave a response blank! A blank is recorded as “missing information” because it is not known if you asked the question or not. If a response is negative, the negative response must be circled.

A. Pre-coded Responses

The pre-coded responses to the questions are listed in the questionnaire. To record a respondent's answer, circle the number (code) that corresponds to the reply. Make sure that each circle surrounds only a single number.

Example where only one response is correct

205	Do you have a mosquito net at home?	YES	1	
		NO	2	→210
		DON'T KNOW	8	→210

Sometimes there can be more than one response. In this case, the codes will be letters (e.g. A) rather than numbers. Be sure to circle all the appropriate responses.

Example where more than one response may be correct

204	How does one prevent having malaria? IF YES, CIRCLE ALL METHODS FOR ELICITING CLIENT OPINIONS THAT ARE USED	USING ANY MOSQUITO NET A USING TREATED NET B SPRAY INSIDE HOME C OTHER W (SPECIFY) DON'T KNOW Z
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In some cases, a pre-coded response will include an “other” category. The “other” code should be circled when the answer is different from any of the pre-coded responses listed for the question. When you circle the code “other” for a particular question, write the specific answer in the space provided.

Example of response using OTHER

103	What is your current technical qualification?	PHYSICIAN 1 MEDICAL ASSTANT 2 OTHER <u>pharmacist</u> 6 (SPECIFY)
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Sometimes responses to particular questions must be entered in response matrix (table). When recording a response in one of these matrixes, be sure that you are entering the answer in the proper row and column.

Examples of response grid

202	Now I am going to ask you about some common problems clients have at health facilities.	LARGE	SMALL	NO PROB- LEM	DK
01	Time you waited	1	2	3	8
02	Ability to discuss problems or concerns	1	2	3	8
03	Amount of explanation you received	1	2	3	8

B. Numeric Questions

For many questions in the HFS, a numeric response is appropriate and should be entered in the available boxes.

Example of response needing numeric response

Example of responses needing numeric response				
110	How many times in the last 6 months has your work been supervised?	NUMBER OF TIMES <table border="1"><tr><td>0</td><td>2</td></tr></table>	0	2
0	2			

Whenever respondents do not know the answer to a numeric question, for a response that has two boxes record '98', for a response having more than two boxes record nines with the last digit being an '8'. For a response with only one number response box,

record an '8'. If there is a pre-coded response (e.g. DON'T KNOW998) you should simply circle the "998" pre-coded response.

Example of "DON'T KNOW" answer for question requiring a numeric response

201	How long did you wait between the time you arrived at this facility and the time you were able to see a provider for the consultation?	MINUTES <input type="text"/> <input type="text"/> <input type="text"/> SAW PROVIDER IMMEDIATELY 000 DON'T KNOW 998	
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C. Correcting Mistakes

If you make a mistake entering an answer or the respondent changes their reply, put two horizontal lines through the incorrect response. Do not try to erase or write over an answer.

Example of corrected response

204	How does one prevent having malaria?	USING ANY MOSQUITO NET A USING TREATED NET B SPRAY INSIDE HOME C TAKE MALARIA MEDICINE <u>D</u> NOT DRINK DIRTY WATER E OTHER: _____ F (SPECIFY) DON'T KNOW X	
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Remember that if there are two responses for a particular question that requires only one response, it may be impossible later, when the data are being coded, to determine which is the correct answer. Also, if you write over an answer, the data input staff frequently cannot determine which of the two responses you meant as the correct response.

D. Following Instructions

The HFS questionnaires include a series of instructions for the interviewers. It is important that you follow the instructions included in the questionnaire consistently.

Skip instructions

The questionnaire is set up to avoid as much redundancy as possible and ask only appropriate questions given a situation. ARROWS are also used throughout the questionnaires to give directions about the next question to ask (e.g., 'skip to'). It is very important to follow these skips for they will make the questionnaire much shorter and thus increase the cooperation of the respondents. Skips enable the interviewer to collect the necessary information in as efficient manner as possible.

Example of response indicating a “skip”

207	Did you/child sleep under a mosquito net last?	YES..... (1) NO 2 DON'T KNOW 3	→210 →210
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Written instructions

Throughout the HFS questionnaires, there are written instructions to help you remember important directions for collecting and recording information. These instructions appear in CAPITAL LETTERS. Pay attention to the instructions since they are there to help you complete the questionnaire as accurately and completely as possible.

Example of written instructions

110	ASK TO SEE ALL MEDICATIONS THAT THE CARETAKER RECEIVED. CIRCLE THE RESPONSE DESCRIBING THE MEDICATIONS AND PRESCRIPTIONS YOU SEE.	HAS ALL MEDS..... 1 HAS SOME MEDS, SOME PRESCRIPTIONS..... 2 NO MEDICATIONS SEEN, HAS PRESCRIPTIONS ONLY 3	
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III ENSURING QUALITY

All members of the HFS team are responsible for ensuring that the data that is collected at each facility is as accurate and comprehensive as possible. Each interviewer-observers is responsible for:

- ▶ Checking that questionnaires you have filled are complete at the end of each questionnaire, ensuring that all answers are clear and reasonable, and that your handwriting is legible.
- ▶ Returning to the original respondent(s) if questions are omitted or there appears to be errors, in order to complete the questionnaire. Apologize, explain that you made an error, and then ask the question again.
- ▶ Taking particular care in recording information when you are observing consultations since it is not permissible (possible) to complete omitted items later in the day based on recall.
- ▶ Notifying the Supervisor whenever there are problems in completing the daily assignment, e.g., in observing the target number of consultations or completing interviews with health providers.

The Supervisor has the overall responsibility for the quality of the work of the team in the field. The Supervisor must:

- 1) Monitor the activities of the team during the course of each day's activities. In particular, the Supervisor must ensure that team members are conducting the

observation and exit interviews in an organized manner that will yield the appropriate number of completed instruments by the end of the day's activities.

- 2) If there is time, in smaller facilities, attend one or two client-provider consultations with each interviewer-observer during each week and independently complete a questionnaire for each consultation that is jointly observed. Immediately afterwards, compare the questionnaire that the interviewer-observer completed with the one that the Team Leader filled in. Discuss any differences with the interviewer-observer.
- 3) Check all questionnaires received at the end of the day to ensure that all items are completed and skip patterns are followed. In particular, check that the observation, health worker and exit interview questionnaires include all of the appropriate identification information that will be needed to link the data from these questionnaires.
- 4) Feedback information to the team members on any problems observed in the completed questionnaires, and discusses with the staff any problems they have encountered.
- 5) Maintain regular contact with the Field Coordinator. Provide feedback information on any problems with staff performance or aspects of the survey. .
- 6) Prepare a packet of questionnaires at the end of the visit to each facility for the Field Coordinator. Make sure that the correct totals of health providers, observation and exit interviews are shown on the cover of the facility inventory.

