

Questionnaire identification number: <D_____>

**SERVICE AVAILABILITY MAPPING (SAM)
DISTRICT QUESTIONNAIRE**

FOR USE WITH KEY INFORMANTS.

Please fill the information below before beginning the interview.

Please write clearly, in ink:

001.	Date (dd/mm/yyyy):	/ /
002.	District name:	_____
003.	District population, in thousands (based on latest census, or projections based on census data):	
004.	Interviewer name (last, first):	_____
005.	Respondent name (last, first):	_____
006.	Respondent job title:	_____
007.	Respondent contact information (including local telephone codes):	Telephone: _____ Fax: _____ Email: _____ Other: _____

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**SERVICE AVAILABILITY MAPPING (SAM)
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Questionnaire overview:

Section 1: Availability of services and service providers, by district

Section 2: Estimated coverage of specific interventions, by district

Section 3: Availability of services, by facility

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Part 1. Availability of services and service providers. This section of the questionnaire explores the availability of specific human and material resources at the district level.

Note to interviewers: Please indicate respondent's answers in the grey, rightmost column.

No.	Question	Answer
<p>We would like to begin the questionnaire by asking about specific human and material resources available in the entire district. You are asked to estimate, to the best of your knowledge, the number of existing specific resources. We will also ask about the availability of specific health services in the district.</p>		
101	Number of public health care facilities	
102	Number of private, non-profit and NGO health care facilities	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
103	Number of private, for-profit health care facilities	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
104	Medical doctors/physicians in public, private non-profit and NGO facilities	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>

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No.	Question	Answer
105	Medical doctors/physicians in private, for-profit facilities	ENTER "0" if none . ENTER "999" if don't know .
106	Certified/registered midwives (including nurse midwives)	ENTER "0" if none . ENTER "999" if don't know .
107	Certified/registered nurses	ENTER "0" if none . ENTER "999" if don't know .
108	Clinical officers/assistant medical officers (COUNTRY SPECIFIC)	ENTER "0" if none . ENTER "999" if don't know .
109	Nursing assistants/nursing aides (COUNTRY SPECIFIC)	ENTER "0" if none . ENTER "999" if don't know .
110	Laboratory technicians/technologists	ENTER "0" if none . ENTER "999" if don't know .

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No.	Question	Answer
111	Pharmacists and dispensers	ENTER "0" if none . ENTER "999" if don't know .
112	Health Management Information Systems (HMIS) personnel/records assistants (COUNTRY SPECIFIC)	ENTER "0" if none . ENTER "999" if don't know .
113	Full time or dedicated health service managers (COUNTRY SPECIFIC)	ENTER "0" if none . ENTER "999" if don't know .
114	Certified/registered HIV counselors	ENTER "0" if none . ENTER "999" if don't know .
115	Community health workers	ENTER "0" if none . ENTER "999" if don't know .

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116	Social workers	ENTER "0" if none . ENTER "999" if don't know .
We would now like to ask about specific material resources available in the entire district.		
117	<p>In-patient beds (excluding baby cots and maternity beds) in public facilities</p> <p>By in-patient beds we mean physical beds with mattresses in good condition (i.e., no springs breaking through) that can be used by patients for overnight stays in the facility.</p>	ENTER "0" if none . ENTER "999" if don't know .
118	<p>In-patient beds (excluding baby cots and maternity beds) in private and NGO facilities</p> <p>By in-patient beds we mean physical beds with mattresses in good condition (i.e., no springs breaking through) that can be used by patients for overnight stays in the facility.</p>	ENTER "0" if none . ENTER "999" if don't know .
119	Delivery beds in all facilities	ENTER "0" if none . ENTER "999" if don't know .

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120	Maternity beds in all facilities	ENTER "0" if none . ENTER "999" if don't know .
Blood transfusion services: We would now like to ask about the availability of blood transfusion and other testing services in the district. We would also like to explore how districts receive the blood supply required for blood transfusions. These are all <u>yes/no</u> questions and should only be answered if they are relevant.		
121	Are blood transfusion services available in the district?	Yes.....1 No.....2 SKIP TO 128
122	Were there any interruptions in blood availability in the district over the previous 3 months?	Yes.....1 No.....2
123	Is donor blood tested/screened for major transfusable infections, including HIV?	Yes.....1 No.....2
124	Is blood collected from donors in the district?	Yes.....1 No.....2 SKIP TO 128
For this district, please indicate whether or not each of the following is a major type of donor:		
125	Voluntary	Yes.....1 No.....2
126	Paid	Yes.....1 No.....2

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127	Relatives or friends	Yes.....1 No.....2
<p>Laboratory services: Please consider whether each of the following is available in the district. These are all yes/no questions.</p>		
128	Blood count	Yes.....1 No.....2
129	Blood sugar levels	Yes.....1 No.....2
130	Haemoglobin (Hb)	Yes.....1 No.....2
131	Liver enzymes	Yes.....1 No.....2
132	CD4+ cell count	Yes.....1 No.....2
<p>Other available resources: These are all yes/no questions.</p>		
133	Are there facilities in the district where oxygen can be given to a patient?	Yes.....1 No.....2
134	Are there facilities in the district where X-rays can be taken?	Yes.....1 No.....2
135	Are there teams in the district that carry out indoor residual spraying for malaria control?	Yes.....1 No.....2 SKIP TO 137
136	Did these teams carry out any indoor residual spraying in the previous month?	Yes.....1 No.....2

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<p>Communication and technology resources: We would like to ask you now about the availability of specific communication and technological tools. Again, these are all yes/no questions.</p>		
137	Are computers available for the district health team?	Yes.....1 No.....2 SKIP TO 139
138	Are internet connections available for the district health team?	Yes.....1 No.....2
139	Are there basic telephone (land) connections available in the district?	Yes.....1 No.....2
140	Are there cellular phone services (networks) available in the district?	Yes.....1 No.....2 SKIP TO 142
141	Are there functioning cellular telephones (either private or supported by the district) for the district health team?	Yes.....1 No.....2
142	Are there short-wave radios for radio calls in the district?	Yes.....1 No.....2
<p>Injection practices: We would now like to ask about the use of injections in district medical facilities.</p>		
143	Please indicate which of the following is the most commonly used type of needles and syringes for general health services (apart from immunization activities) in the district:	Disposable.....1 Re-usable.....2 Auto-destruct.....3

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<p>Sterilization equipment: The following question explores the most commonly used type of sterilization equipment for general health services.</p>		
144	<p>Please indicate which of the following is the most commonly used method of sterilisation for general health services:</p>	<p>Autoclave.....1</p> <p>Sterilizers.....2</p> <p>Pressure pots.....3</p> <p>Boiling pot.....4</p> <p>Other5 (please specify): _____ _____</p>
<p>Donor assistance to the district: We would now like to ask you about the presence of specific donors in this district. Their presence can be purely financial, or may be direct involvement (i.e., providing technical assistance) in activities being carried out in the public and private sectors. These are all yes/no questions.</p>		
145	<p>Is the Global Fund to fight AIDS, TB and malaria providing any financial support to activities in this district?</p>	<p>Yes.....1</p> <p>No.....2</p>
146	<p>Are any bilateral donors providing support, either financial or technical in this district?</p> <p>Bilateral donors include, for example USAID, DfiD, and JICA.</p>	<p>Yes.....1</p> <p>No.....2</p>
147	<p>Are any multilateral donors providing support, either financial or technical in this district?</p> <p>Multilateral donors include, for example, UN organizations such as UNICEF, WHO and the World Bank.</p>	<p>Yes.....1</p> <p>No.....2</p>

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148	Are any NGOs providing financial or technical support to health interventions in this district?	Yes.....1 No.....2
149	Are any NGOs in this district working with specific populations on HIV/AIDS prevention, care, and/or treatment?	Yes.....1 No.....2
Payment for district public health services or drugs: We would like to ask you if the following services are sometimes paid for by patients because of problems related to the availability of supplies within the public sector. These are all yes/no questions.		
150	TB treatment	Yes.....1 No.....2
151	Pain relief drugs for HIV/AIDS patients	Yes.....1 No.....2
152	Drugs for the treatment of opportunistic infections among HIV positive patients	Yes.....1 No.....2
153	ARVs that are provided by the public sector	Yes.....1 No.....2
154	Antibiotics to treat pneumonia among children under five years of age	Yes.....1 No.....2
155	Oral Rehydration Salt (ORS) packets for diarrhoea among children under five years of age	Yes.....1 No.....2
156	Delivery kits (gloves, cotton, etc.)	Yes.....1 No.....2
157	Oral contraceptive pills	Yes.....1 No.....2

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Part 2. Estimated coverage of specific interventions. This section of the questionnaire attempts to estimate the coverage of 10 specific resources or interventions within the district facilities. This estimation should take into account both public and private facilities; it should also be based on actual provision or availability, not on policies or guidelines.

There are four coverage options:

- None The resource is not available in **any** public **and** private facility in the district
- 1 - 49% This resource is available in under half of the public **and** private facilities in this district.
- 50 - 99% This resource is available in over half of the public **and** private facilities in this district.
- All This resource is available in all of the public **and** private facilities in this district.

Note to interviewers: Please indicate **one** coverage option for each question in the grey, rightmost column. Indicate the option by placing an "X" in the appropriate column.

No.	Indicator	Coverage estimate, as indicated by respondent			
		None	1-49%	50-99%	All
For each of the following, please estimate, to the best of your knowledge, the percent of public and private facilities in this district with at least one health worker has, within the last 2 years , received pre- of in-service training on:					
201	The integrated management of childhood illness (IMCI)				
202	Safe motherhood/life-saving skills				
203	Adolescent sexual and reproductive health (ASRH)				
204	HIV/AIDS opportunistic infection treatment and care				

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No.	Indicator	Coverage estimate, as indicated by respondent			
		None	1-49%	50-99%	All
	For each of the following, please estimate, to the best of your knowledge, the percent of public and private facilities in this district with at least one health worker has, within the last 2 years , received pre- of in-service training on:				
205	HIV/AIDS counselling only				
206	HIV/AIDS counselling and testing				
207	HIV antibody testing using HIV rapid testing				
208	Prevention of mother to child transmission (PMTCT) of HIV				
209	Infection control/ universal precautions for handling blood and other bodily fluids				
210	STI diagnosis and treatment				
211	Family planning				
212	Diagnosis and treatment of malaria				
213	Health services management				
214	HMIS training				
215	Drug and supplies management				
216	Please estimate the percentage of public and private facilities that had a "stock out" of any required drug during the last month.				
217	Please estimate the percentage of public and private facilities that provide presumptive intermittent preventive therapy (IPT) for malaria during pregnancy.				

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No.	Indicator	Coverage estimate, as indicated by respondent			
		None	1-49%	50-99%	All
	For each of the following, please estimate, to the best of your knowledge, the percent of public and private facilities in this district with at least one health worker has, within the last 2 years , received pre- of in-service training on:				
218	Please estimate the percentage of public and private facilities that provide antiretroviral therapy (ART)				
219	Please estimate the percentage of public and private facilities that provide HIV prevention education				
220	Please estimate the percentage of public and private facilities that offer HIV antibody testing				
221	Please estimate the percentage of public and private facilities in the district that have access to an improved water supply.* *"Improved" water supply technologies include piped water, public standpipe, borehole, protected dug well, protected spring, rainwater collection, tanker truck supply				
222	Please estimate the coverage of indoor residual spraying for malaria control in the district.				
223	Please estimate the coverage of immunization campaigns in the district.				

SERVICE AVAILABILITY MAPPING (SAM) DISTRICT QUESTIONNAIRE

Part 3. Checklist of health facilities. Unlike sections 1 and 2, section 3 asks about **each** facility in the district. We are interested in knowing **where** selected interventions are available.

Note to interviewers: The preliminary information for each facility should be filled-in, as much as possible, before meeting with the key informant. Preliminary information includes:

- Facility code
- Facility name
- Administrative unit
- Town name (for those facilities in villages, towns or cities)
- Facility type

There are 6 facility types, these are coded as follows:

- 1 Tertiary/third level hospital. These generally provide training as well as specialized care.
- 2 Second level referral hospital. This is generally the provincial level hospital.
- 3 First level hospital such as district level hospitals.
- 4 Hospital affiliated health center
- 5 Health center
- 6 Health post

Note: This is country specific; make sure these correspond to the types of facilities being used on the first page of the facility questionnaire

Confirming facility listing:

For this section you will need to sit with the respondent and review the list you have of existing facilities. For **each** facility, make sure all the information is correct- that is: its name, location (village, town, or city name). Then ask if the services of interest are available in **each**.

Explore whether additional facilities exist that are not listed. If there are some facilities that are not listed, write these in the additional rows provided. Collect the same information as you did for the facilities that were already listed.

Acronyms:

PMTCT: Prevention of Mother to Child Transmission

HIV: Human Immune-deficiency Virus

ARV: Anti-Retro Viral

TB: Tuberculosis

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