

SCREEN 1:Start

Start Q.1 healthInterviewer	HealthFacility	<i>Responsible interviewer</i>
Start Q.2 healthStartTime	HealthFacility	<i>Start Time</i>
Start Q.3 vlgLocation	HealthFacility	<i>Location of health facility (village)</i>
Start Q.4 vlgLocationName	HealthFacility	<i>Retype village name</i>
Start Q.5 healthGPS	HealthFacility	<i>GPS coordinates of facility (if not possible, ask villages in which located, & villages served) Record in decimal degrees, e.g. S01.73672E39.34743</i>

START ROSTER 1.1:List all respondents for the health questions

List all respondents for the health questions Q.1 RHname	RespondentHealth	<i>Name</i>
List all respondents for the health questions Q.2 RHgender	RespondentHealth	<i>Gender</i> (1)Male,(2)Female
List all respondents for the health questions Q.3 RHposition	RespondentHealth	<i>Role/Position</i> (1)VEO/MEO or other local authority / official elected / appointed by the Government,(2)Village/Mtaa chairman or other local authority / official elected / appointed by the community,(3)Former authority / official (elected / appointed by Government or the community),(4)Influential citizen (for historic, economic, or other reasons),(5)Head of medical facility,(6)Medical doctor,(7)Community health worker,(8)Head teacher,(9)Teacher,(10)Social worker or similar,(11)Head of police or military authority,(12)Religious leader,(99)Other Specify
List all respondents for the health questions Q.4 RHresidence	RespondentHealth	<i>Residence in community in years</i>

END ROSTER 1.1:List all respondents for the health questions

END SCREEN 1:Start

SCREEN 2:Health

START ROSTER 2.1:List all the villages that are served by this facility

List all the villages that are served by this facility Q.1 vlgName	HealthVill	<i>Village name</i>
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List all the villages that are served by this facility *Other specify*
Q.2

vlgName_other **HealthVill**

Enable if :current.vlgName=99

END ROSTER 2.1:List all the villages that are served by this facility

Health Q.1 *When did this facility start providing services? YEAR*
yearOpened **HealthFacility**

Health Q.2 *Is this a health center or a dispensary?*
centreDispensary **HealthFacility**
(1)Dispensary,(2)Health Centre,(3)Other (specify)

Health Q.3 *How many rooms does the facility have to treat patients?*
roomNoTreat **HealthFacility**

Health Q.4 *How many other rooms (not used to treat patients) does this facility have? (including separate waiting rooms, reception rooms, delivery room, rooms for overnight patients)*
roomNoOther **HealthFacility**

Health Q.5 *How many inpatient beds (excluding examination beds and delivery beds) does the facility have?*
bedsNo **HealthFacility**

Health Label **Patients**

Health Q.6 *How many patients did this health facility see in the past 30 days?*
patientNo **HealthFacility**

Health Q.7 *Of the [patientNo] patients you saw, how many did you refer to another facility for further treatment?*
patientReferred **HealthFacility**

Health Q.8 *Of the [patientNo] patients you saw, how many were you not able to treat as much as you would have liked because of lack of medicine?*
patientNotTreated **HealthFacility**

Health Label **Health Staff**

START ROSTER 2.2:Number of health staff

RosterContents :(1)Now,(2)August 2011,(3)August 2010,(4)August 2009

Number of health staff Q.1 *How many doctors does/did this facility have?*
doctorsNo **Years**

Number of health staff Q.2 *How many nurses does/did this facility have?*
nursesNo **Years**

Number of health staff Q.3

otherMedStaffNo**Years***How many other medical assistants and health staff does/did this facility have?*

END ROSTER 2.2: Number of health staff

Health Q.9

doctorHrsPresent**HealthFacility***For how many hours last week was a doctor present and attending patients?*

Health Label

Community Health Fund

Health Q.10

CHFYN**HealthFacility***Is there a Community Health Fund operating in this village?*

(1)Yes,(2)No

SCREEN 2.3: Community Health Fund

Community Health Fund Label

When did the Community Health Fund begin operation in this village?

Community Health Fund Q.1

CHFstartMonth**HealthFacility****MONTH**

(1)January,(2)February,(3)March,(4)April,(5)May,(6)June,(7)July,(8)August,(9)September,(10)October,(11)November,(12)December

Community Health Fund Q.2

CHFstartYear**HealthFacility****YEAR**

Community Health Fund Label

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Community Health Fund Q.3

CHFcontrib2012**HealthFacility***What is the contribution per household to participate? in TSH per year*

Community Health Fund Q.4

CHFcontrib2011**HealthFacility***What was it in 2011?*

Community Health Fund Q.5

CHFcontrib2010**HealthFacility***What was it in 2010?*

Community Health Fund Q.6

CHFcontrib2009**HealthFacility***What was it in 2009?*

END SCREEN 2.3: Community Health Fund

Health Label

Facility Instruments

Health Q.11

deliveryBedYN**HealthFacility***A bed for maternal deliveries*

(1)Yes,(2)No

Health Q.12 operatingRoomYN	HealthFacility	<i>An operating room (minor and major)</i> (1)Yes,(2)No
Health Q.13 H_electricityYN	HealthFacility	<i>Electricity</i> (1)Yes,(2)No
Health Q.14 H_pipedWaterYN	HealthFacility	<i>Piped water</i> (1)Yes,(2)No
Health Q.15 vehicleYN	HealthFacility	<i>A motorised vehicle</i> (1)Yes,(2)No
Health Q.16 laboratoryYN	HealthFacility	<i>A laboratory</i> (1)Yes,(2)No
Health Q.17 refrigeratorYN	HealthFacility	<i>A refrigerator</i> (1)Yes,(2)No
Health Q.18 incineratorYN	HealthFacility	<i>An incinerator</i> (1)Yes,(2)No
Health Label		Services available at the facility
Health Q.19 HIVCounselling	HealthFacility	<i>HIV counselling/other HIV services (beyond testing)</i> (1)Yes,(2)No
Health Q.20 vaccinationProgYN	HealthFacility	<i>Compulsory vaccination program</i> (1)Yes,(2)No
Health Q.21 MCHYN	HealthFacility	<i>A childhood nutrition program (MCH)</i> (1)Yes,(2)No
Health Q.22 familyPlanningYN	HealthFacility	<i>Family planning services</i> (1)Yes,(2)No
Health Label		Can you test for the following in your facility?
Health Q.23 malariaTest	HealthFacility	<i>Malaria</i> (1)Yes, RDT test,(2)Yes, Microscope test,(3)Yes, both,(4)No
Health Q.24 HIVtestYN	HealthFacility	<i>HIV</i> (1)Yes,(2)No

Health Q.25
bloodSugarTestYN **HealthFacility** *Blood sugar*
(1)Yes,(2)No

Health Q.26
bloodPressureYN **HealthFacility** *Blood pressure*
(1)Yes,(2)No

Health Q.27
wormTestYN **HealthFacility** *Worms*
(1)Yes,(2)No

Health Q.28
anaemiaTestYN **HealthFacility** *Anemia*
(1)Yes,(2)No

Health Q.29
typhoidTestYN **HealthFacility** *Typhoid*
(1)Yes,(2)No

END SCREEN 2:Health

SCREEN 3:Finish

Finish Q.1
healthIntEnd **HealthFacility** *Interview End Time*

Finish Q.2
healthIntervStatus **HealthFacility** *Interview Status*
(1)Completed in one meeting,(2)Completed with individuals,(3)Could not get all information

Finish Q.3
healthComment **HealthFacility** *Comment*

END SCREEN 3:Finish