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Draft: 4 May 2005

## Cambodia Public Expenditure Tracking Survey

### Operational District Questionnaire

Province name	Write province name in the space provided ( <i>coder will enter province code later</i> )		Code <input type="text"/> <input type="text"/>
OD name	Write OD name in the space provided ( <i>coder will enter OD code later</i> )		Code <input type="text"/> <input type="text"/>
Date of visit	Enter day, month, year (dd.mm.yyyy)	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Name of interviewer	Write name of interviewer in the space provided		

## Section 1. General information

The information in this section should be provided by the OD Director or Acting Director.

I would like to ask you some questions about this Operational District (OD) and its health facilities.

Q#	Question	Category/unit	Skips	Value
1.	What is your current position in this OD?	1=Director 2=Acting Director 3=Other		<input type="checkbox"/>
2.	For how long have you had your current position?	Years and months		Years <input type="checkbox"/> <input type="checkbox"/>
				Months <input type="checkbox"/> <input type="checkbox"/>
3.	What is the land area of this OD? (OK to estimate if unsure)	Square kilometers 99,999=does not know		<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4.	What is the current population of this OD? (OK to estimate if unsure)	Number 999,999=does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5.	Did this OD have an approved Chapter 11/13 budget for <b>2003</b> ?	1=yes 2=no	=>Q.7	<input type="checkbox"/>
Definition: An "approved budget" is a budget that was approved by the Province Health Department (PHD).				
6.	How much was the OD's total Chapter 11/13 budget for <b>2003</b> ?	Riel 999,999,999= does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
7.	Did this OD have an approved Chapter 11/13 budget for <b>2004</b> ?	1=yes 2=no	=>Q.9	<input type="checkbox"/>
8.	How much was the OD's total Chapter 11/13 budget for <b>2004</b> ?	Riel 999,999,999= does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
9.	Has this OD or any of its health facilities been supported by one or more NGOs at any time during the past 3 years?	1=yes 2=no  9=does not know	=>next section =>next section	<input type="checkbox"/>
10.	What is the name of the NGO that has provided the main support to this OD during the past three years?	Write clearly the name of the NGO in the space provided ( <i>coder will enter NGO code later</i> )		<input type="text"/> <input type="text"/>
11.	When did this NGO begin working in this OD?	Month and year (mm.yyyy) 99.9999=does not know		<input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
12.	Is this NGO still supporting this OD?	1=yes 2=no	=>Q.14	<input type="checkbox"/>
13.	When did this NGO stop supporting this OD?	Month and year (mm.yyyy) 99.9999=does not know		<input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
14.	Did another NGO also provide support to this OD during the past three years?	1=yes 2=no  9=does not know	=>next section =>next section	<input type="checkbox"/>
15.	What is the name of this second NGO?	Write clearly the name of the NGO in the space provided ( <i>coder will enter NGO code later</i> )		<input type="text"/> <input type="text"/>
16.	When did this NGO begin working in this OD?	Month and year (mm.yyyy) 99.9999=does not know		<input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
17.	Is this NGO still supporting this OD?	1=yes  2=no	=>next section	<input type="checkbox"/>



## Section 2. Drugs, Medical Supplies and Vaccines

The information in this section should be provided by the OD Pharmacist.

I would like to ask you about drugs, medical supplies or vaccines (not including non-medical supplies such as bed nets and insecticide) that the OD received during calendar years 2003 and 2004.

### First Quarter 2003

Q#	Question	Category/unit	Skips	Value
1.	Did the OD receive any drugs, medical supplies or vaccines from Central Medical Stores during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q.3 =>Q.3 =>Q.3	<input type="checkbox"/>
2.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from Central Medical Stores during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>
3.	Did the OD receive any drugs, medical supplies or vaccines from any other National Program* during the <b>first quarter of 2003</b> ?  * CMS is considered a National Program	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q.5 =>Q.5 =>Q.5	<input type="checkbox"/>
4.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from other National Programs during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>
5.	Did the OD receive any drugs, medical supplies or vaccines from the PHD (Provincial Pharmacy) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q.7 =>Q.7 =>Q.7	<input type="checkbox"/>
6.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from the PHD during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>
7.	Did the OD receive any drugs, medical supplies or vaccines from the Central MOH during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q.9 =>Q.9 =>Q.9	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
8.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from the Central MOH during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>
9.	Did the OD receive any drugs, medical supplies or vaccines from NGOs during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q11 =>Q.11  =>Q.11	<input type="checkbox"/>
10.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from NGOs during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>
11.	Did the OD receive any drugs, medical supplies or vaccines from the community during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 9=does not know	=>Q.13 =>Q.13  =>Q.13	<input type="checkbox"/>
12.	Does the OD have records of the quantities of drugs, medical supplies and vaccines received from the community during the <b>first quarter of 2003</b> ?	1=yes 2=no		<input type="checkbox"/>

Questions for clarification during pilot:

- 1) We need to have a list of the CMS codes as soon as possible.
- 2) Does the CMS also use a unit code that identifies the form (packaging) in which drugs and medical supplies are delivered to PHDs and ODs (for example, kits, vials or cartons)? If so, we may want to use those codes as well.

Based on OD records, please provide the information requested below for each item received during the **first quarter of 2003**.

Q#	Item	CMS Code	Unit	Quantity	Source
	11. Which drug, medical supply or vaccine was received during the <b>first quarter of 2003</b> ? <i>(Describe each different item, using a separate line for each different item or for each different form of packaging or for each different organization providing the item)</i>	12. (The CMS codes of items normally sent to the OD should be entered ahead of time on separate rows of this table)	13. How was the item packaged? <i>(Use the following unit codes)</i> 1=kit 2=box or carton 3=bottle 4=individual items  etc.  99=does not know	14. How many of these units were received during the <b>first quarter of 2003</b> ? <i>(Enter the number of units received)</i>  Number  9,999,999=does not know	15. Which organization provided these items? <i>(Use the following source codes)</i> 1=Central Medical Stores (CMS) 2=Other National Program 3=PHD (Provincial Pharmacy) 4=Central MOH 5=NGO 6=Community 7=other (specify) 9=does not know
a.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
b.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
c.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
d.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
e.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>

Q#	Item	CMS Code	Unit	Quantity	Source
	11. Which drug, medical supply or vaccine was received during the <b>first quarter of 2003</b> ? <i>(Describe each different item, using a separate line for each different item or for each different form of packaging or for each different organization providing the item)</i>	12. (The CMS codes of items normally sent to the OD should be entered ahead of time on separate rows of this table)	13. How was the item packaged? <i>(Use the following unit codes)</i> 1=kit 2=box or carton 3=bottle 4=individual items  etc.  99=does not know	14. How many of these units were received during the <b>first quarter of 2003</b> ? <i>(Enter the number of units received)</i>  Number  9,999,999=does not know	15. Which organization provided these items? <i>(Use the following source codes)</i> 1=Central Medical Stores (CMS) 2=Other National Program 3=PHD (Provincial Pharmacy) 4=Central MOH 5=NGO 6=Community 7=other (specify) 9=does not know
f.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
g.			<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<p>This table will be longer than its present form. It should have as many rows as there are CMS codes for drugs and medical supplies normally sent to ODs. Those CMS codes would be pre-printed in the rows of column 3. In addition, the table should include several rows with blanks in column 3 to accommodate other drugs and medical supplies, duplicate drugs or medical supplies from non-CMS sources, or the same drugs or medical supplies packaged in another way. The column total in the bottom row is used as a check on numbers entered in column 5. This checksum will be especially useful during data entry when errors in entering large numbers are extremely common.</p>					
	<b>COLUMN TOTAL</b>			<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	

(Similar questions to Q.1-Q.15, i.e., Q.16-Q.120, would be asked for quarters 2-4 in 2003 and quarters 1-4 in 2004.)

Now I would like to ask you some questions about any drugs, medical supplies or vaccines (not including non-medical supplies such as bed nets and insecticide) that the OD may have provided to individual health facilities during calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
121.	According to your records, did the OD send any drugs, medical supplies or vaccines to health facilities during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.128 =>Q.128 =>Q.128 =>Q.128	<input type="checkbox"/>
122.	Does the OD have information on the quantities of various types of drugs, medical supplies and vaccines sent to each facility during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.128 =>Q.128 =>Q.128 =>Q.128	<input type="checkbox"/>

Based on the OD's records, please provide the information requested below for each item sent to individual health facilities during the **first quarter of 2003**.

Q#	Item	CMS Code	Destination facility	Unit	Quantity	
	123. Which drug, medical supply or vaccine was sent during the <b>first quarter of 2003</b> ? (Describe each different item, using a separate line for each different item or for each different form of packaging or for each different facility to which the item was sent)	124. What is the CMS code for this item? (Enter CMS code clearly in the space below; if no CMS code, enter "NC"; if CMS code not known, enter "NK")	125. To which facility was this item sent during the <b>first quarter of 2003</b> ? (Write the name clearly of the health facility to which item was sent. Coder will enter facility codes later.)	126. How was the item packaged? (Use the following unit codes) 1=kit 2=box or carton 3=bottle 4=individual items  etc.  99=does not know	127. How many of these units were sent during the <b>first quarter of 2003</b> ? (Enter the number of units sent)  999,999=does not know	
a.				Code  □ □	□ □	□ □ □ , □ □ □
b.				Code  □ □	□ □	□ □ □ , □ □ □
c.				Code  □ □	□ □	□ □ □ , □ □ □

Q#	Item	CMS Code	Destination facility	Unit	Quantity
	123. Which drug, medical supply or vaccine was sent during the <b>first quarter of 2003</b> ? (Describe each different item, using a separate line for each different item or for each different form of packaging or for each different facility to which the item was sent)	124. What is the CMS code for this item? (Enter CMS code clearly in the space below; if no CMS code, enter "NC"; if CMS code not known, enter "NK")	125. To which facility was this item sent during the <b>first quarter of 2003</b> ? (Write the name clearly of the health facility to which item was sent. Coder will enter facility codes later.)	126. How was the item packaged? (Use the following unit codes) 1=kit 2=box or carton 3=bottle 4=individual items  etc.  99=does not know	127. How many of these units were sent during the <b>first quarter of 2003</b> ? (Enter the number of units sent)  999,999=does not know
d.				Code  □ □	□ □ □ □, □ □ □ □
e.				Code  □ □	□ □ □ □, □ □ □ □
This table will be much longer than its present form. It is not possible to enter CMS codes ahead of time in this form because each row may refer to a different health facility. The column total in the bottom row is used as a check on numbers entered in column 6. This checksum will be especially useful during data entry when errors in entering large numbers are extremely common.					
	<b>COLUMN TOTAL</b>				□, □ □ □ □, □ □ □ □

(Similar questions to Q.121-Q.127, i.e., Q.128-Q.176, would be asked for quarters 2-4 in 2003 and quarters 1-4 in 2004.)

**Section 3. Financial resources, equipment and non-medical supplies**

*The information in this section should be provided by the OD Accountant.*

**Section 3a. National Budget resources provided directly to Operational Districts**

I would like to ask you some questions about National Budget funding in the form of cash that the OD received during calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
1.	According to OD records, did the OD receive any Chapter 10, 11 or 13 funding in the form of cash during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.6 =>Q.6 =>Q.6 =>Q.6	<input type="checkbox"/>
2.	Does the OD have records of the funding (cash) received by main budget chapter during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.6 =>Q.6 =>Q.6 =>Q.6	<input type="checkbox"/>
3.	How much Chapter 10 funding (cash) was received during the <b>first quarter of 2003</b> ?	Riel 9,999,999,999= does not know	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4.	How much Chapter 11 funding (cash) was received during the <b>first quarter of 2003</b> ?	Riel 9,999,999,999= does not know	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
5.	How much Chapter 13 funding was received during the <b>first quarter of 2003</b> ?	Riel 9,999,999,999= does not know	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

(Similar questions to Q.1-Q.5, i.e., Q.6-Q.40, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you some questions about National Budget funding that the OD may have provided in the form of cash to health facilities in the OD during calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
41.	According to OD records, did the OD provide any cash from Chapter 10, 11 or 13 funds to health facilities during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.46 =>Q.46 =>Q.46 =>Q.46	<input type="checkbox"/>
42.	Does the OD have records of the cash provided to facilities during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.46 =>Q.46 =>Q.46 =>Q.46	<input type="checkbox"/>

Based on the OD's records, please provide the information requested below for the Chapter 10, 11 or 13 funding provided in the form of cash to facilities during the **first quarter of 2003**.

Q#	Destination OD	Chapter	Value
	43. What is the name of the health facility to which Chapter 10, 11 or 13 funds were sent in the form of cash during the <b>first quarter of 2003</b> ? <i>(Write clearly the name of the health facility to which cash was sent during the first quarter of 2003 in the space provided below. Coder will enter facility codes later. Use a separate line for each different facility and for each separate budget chapter.)</i>	44. From which budget chapter? 1=Chapter 10 2=Chapter 11 3=Chapter 13 9=does not know	45. How much cash from this National Budget chapter was sent to this facility during the <b>first quarter of 2003</b> ?  Riel  999,999,999=does not know
a.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
b.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
c.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
d.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
e.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
f.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
g.		Code  □ □	<input type="checkbox"/>
			□ □ □ , □ □ □ , □ □ □
	<b>COLUMN TOTAL</b>		
			□ □ □ , □ □ □ , □ □ □

(Similar questions to Q.41-Q.45, i.e., Q.46-Q.80, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about salaries or Chapter 10 allowances paid to facility staff (including those of the referral hospital **but not including OD Office staff**) by the OD or by a district-level agency (for example, the District Treasury) during calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
81.	According to OD records, did the OD or a district-level agency pay any salaries or Chapter 10 allowances of facility staff during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.85 =>Q.85 =>Q.85 =>Q.85	<input type="checkbox"/>
82.	Does the OD have records of the total salaries and Chapter 10 allowances paid to facility staff during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.85 =>Q.85 =>Q.85 =>Q.85	<input type="checkbox"/>

Based on the OD's records, please provide the information requested below about the salaries and Chapter 10 allowances paid by the OD to facility staff during the **first quarter of 2003**.

Q#	Health facility	Value
	83. What is the name of the health facility for which salaries and Chapter 10 allowances were paid by the OD during the <b>first quarter of 2003</b> ? <i>(Write clearly the name of the health facility in the space below. Coder will enter facility codes later. Use a separate line for each health facility, beginning with the referral hospital.)</i>	84. How much in salaries and Chapter 10 allowances was paid by the OD or by a district-level agency to staff of this facility during the <b>first quarter of 2003</b> ?  Riel  999,999,999=does not know
a.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
b.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
c.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
d.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
e.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
f.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
g.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
h.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.81-Q84, i.e., Q.85-Q.112 would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about any purchases (procurements) or payments (for example, for utilities) that the OD or a district-level agency (for example, the District Finance Office or District Treasury) may have made using Chapter 11 or Chapter 13 funds on behalf of individual health facilities in this OD during calendar years 2003 and 2004. Include all items that the OD may have purchased for distribution to facilities in the OD.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
113.	According to OD records, did the OD or a district-level agency make any purchases or pay any bills for health facilities using Chapter 11 or Chapter 13 funds during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.119 =>Q.119 =>Q.119 =>Q.119	<input type="checkbox"/>
114.	Does the OD have records of the amount spent or payments made on behalf of individual health facilities with Chapter 11 or Chapter 13 funds during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.119 =>Q.119 =>Q.119 =>Q.119	<input type="checkbox"/>



Q#	Item	Health facility	Budget chapter	Value	
	115. For which purpose was the payment made or which item was purchased during the <b>first quarter of 2003</b> ? <i>(Use a separate line for each different payment purpose or item purchased and for each different health facility)</i>	116. For which health facility was the payment or purchase made? <i>(Write clearly the name of the health facility for which purchases or payments were made during the first quarter of 2003. Coder will enter facility codes later.)</i>	117. From which budget chapter?  1=Chapter 11 2=Chapter 13 9=does not know	118. How much was spent on this item during the <b>first quarter of 2003</b> ?  Riel  999,999,999=does not know	
e.			Code  <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
f.			Code  <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
g.			Code  <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>				<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.113-Q.118, i.e., Q.119-Q.160, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about the Chapter 11/13 budgets of the health facilities in this OD for 2003 and 2004.

Q#	Question	Category/unit	Skips	Value
161.	Did any of the health facilities in this OD have approved Chapter 11/13 budgets for either 2003 or 2004	1=yes 2=no  9=does not know	=>next section  =>next section	<input type="checkbox"/>
Definition: An approved budget is one that was approved by the OD Office.				

Based on the OD's records, please provide the information requested below about the Chapter 11/13 budgets for 2003 and 2004 of health facilities in this OD.

**2003 OD Budgets**

Q#	OD Name	2003 Budget	Value of 2003 Budget
	162. Please enter the name of each health facility in this OD on a separate line. (coders will enter facility codes later)	163. Did this health facility have an approved Chapter 11/13 budget for <b>2003</b> ?  1=yes 2=no =>next facility 9=does not know=>next facility	164. What was the total amount of this facility's Chapter 11/13 budget for <b>2003</b> ?  Riel 9,999,999,999=does not know
a.	Code <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
b.	Code <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
c.	Code <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
d.	Code <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Q#	OD Name	2003 Budget	Value of 2003 Budget
	162. Please enter the name of each health facility in this OD on a separate line. (coders will enter facility codes later)	163. Did this health facility have an approved Chapter 11/13 budget for <b>2003</b> ?  1=yes 2=no =>next facility 9=does not know=>next facility	164. What was the total amount of this facility's Chapter 11/13 budget for <b>2003</b> ?  Riel 9,999,999,999=does not know
e.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
f.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
g.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>Column total</b>		<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

**2004 OD Budgets**

Q#	OD Name	2004 Budget	Value of 2004 Budget
	165. Please enter the name of each health facility in this OD on a separate line. <i>(coders will enter facility codes later)</i>	166. Did this health facility have an approved Chapter 11/13 budget for <b>2004</b> ?  1=yes 2=no =>next OD	167. What was the total amount of this facility's Chapter 11/13 budget for <b>2004</b> ?  Riel  9,999,999,999=does not know
a.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
b.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
c.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
d.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
e.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
f.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
g.	Code <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>Column total</b>		<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

### Section 3b. Other financial resources provided to Operational Districts

I would like to ask you some questions about funds in the form of cash that the OD may have received from the PHD or directly from National Programs or other sources (for example, donors, donor-funded projects such as HSSP, NGOs or the community) during calendar years 2003 and 2004 (for example, money for the payment of per diems or staff incentives).

#### First Quarter 2003

Q#	Question	Category/unit	Skips	Value
1.	Did the OD receive any money from the Province Health Department (PHD) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.4 =>Q.4 =>Q.4 =>Q.4	<input type="checkbox"/>
2.	Does the OD have records of how much money was received from the PHD during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.4	<input type="checkbox"/>
3.	How much money was received from the PHD during the <b>first quarter of 2003</b> ?	Riel 999,999,999=does not know	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4.	Did the OD receive any money directly from the National Malaria, Dengue and Schistosomiasis (CNM) Program during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.7 =>Q.7 =>Q.7 =>Q.7	<input type="checkbox"/>
5.	Does the OD have records of how much money was received directly from CNM during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.7	<input type="checkbox"/>
6.	How much money was received directly from the National Malaria, Dengue and Schistosomiasis (CNM) Program during the <b>first quarter of 2003</b> ?	Riel 999,999,999=does not know	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Q#	Question	Category/unit	Skips	Value
7.	Did the OD receive any money directly from the National Immunization Program (NIP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.10 =>Q.10 =>Q.10 =>Q.10	<input type="checkbox"/>
8.	Does the OD have records of how much money was received directly from NIP during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.10	<input type="checkbox"/>
9.	How much money was received directly from NIP during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
10.	Did the OD receive any money directly from the National Nutrition Program (NNP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.13 =>Q.13 =>Q.13 =>Q.13	<input type="checkbox"/>
11.	Does the OD have records of how much money was received directly from the NNP during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.13	<input type="checkbox"/>
12.	How much money was received directly from the NNP during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
13.	Did the OD receive any money directly from the National Reproductive Health Program (NRHP) in the Center for Maternal and Child Health during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.16 =>Q.16 =>Q.16 =>Q.16	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
14.	Does the OD have records of how much money was received directly from the NRHP during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.16	<input type="checkbox"/>
15.	How much money was received directly from the NRHP during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
16.	Did the OD receive any money directly from the National Center for HIV/AIDS, Dermatology and STDs (NCHADS) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.19 =>Q.19 =>Q.19  =>Q.19	<input type="checkbox"/>
17.	Does the OD have records of how much money was received directly from NCHADS during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.19	<input type="checkbox"/>
18.	How much money was received directly from NCHADS during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
19.	Did the OD receive any money directly from the National Tuberculosis and Leprosy Center (CENAT) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.22 =>Q.22 =>Q.22  =>Q.22	<input type="checkbox"/>
20.	Does the OD have records of how much money was received directly from CENAT during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.22	<input type="checkbox"/>
21.	How much money was received directly from CENAT during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
22.	Did the OD receive money directly from the National Center for Health Promotion (NCHP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.25 =>Q.25 =>Q.25 =>Q.25	<input type="checkbox"/>
23.	Does the OD have records of how much money was received directly from NCHP during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.25	<input type="checkbox"/>
24.	How much money was received directly from NCHP during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	
25.	Did the OD receive any money directly from any donors such as World Bank during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.28 =>Q.28 =>Q.28 =>Q.28	
26.	Does the OD have records of how much money was received directly from donors during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.28	
27.	How much money was received directly from donors during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	
28.	Did the OD receive any money directly from any projects such as HSSP during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.31 =>Q.31 =>Q.31 =>Q.31	

Q#	Question	Category/unit	Skips	Value
29.	Does the OD have records of how much money was received directly from projects during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.31	
30.	How much money was received directly from projects during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
31.	Did the OD receive any money directly from any NGOs during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.34 =>Q.34 =>Q.34  =>Q.34	
32.	Does the OD have records of how much money was received directly from NGOs during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.34	
33.	How much money was received directly from NGOs during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
34.	Did the OD receive any money directly from the community during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=does not know 4=no records are available for this period 9=does not know	=>Q.37 =>Q.37 =>Q.37  =>Q.37	
35.	Does the OD have records of how much money was received directly from the community during the <b>first quarter of 2003</b> ?	1=yes 2=no	=>Q.37	
36.	How much money was received directly from the community during the <b>first quarter of 2003</b> ?	Riel  999,999,999=does not know		<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.1-Q.36, i.e., Q.37-Q.288, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you some questions about cash payments that the OD may have made to facility staff during calendar years 2003 and 2004 using funds received from the PHD or directly from National Programs, donors, projects, NGOs or the community (for example, payment of per diems or incentives to facility staff **but not including payments to OD Office staff**).

### First Quarter 2003

Q#	Question	Category/unit	Skips	Value
289.	Did the OD make any cash payments during the <b>first quarter of 2003</b> to facility staff with funds provided by the PHD?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.291 =>Q.291 =>Q.291 =>Q.291	<input type="checkbox"/>
290.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by the PHD?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
291.	Did the OD make any cash payments during the <b>first quarter of 2003</b> to facility staff with funds provided by CNM?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.293 =>Q.293 =>Q.293 =>Q.293	<input type="checkbox"/>
292.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by CNM?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
293.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the National Immunization Program (NIP)?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.295 =>Q.295 =>Q.295 =>Q.295	<input type="checkbox"/>
294.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by NIP?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
295.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the National Nutrition Program (NNP)?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.297 =>Q.297  =>Q.297 =>Q.297	<input type="checkbox"/>
296.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by NNP?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
297.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the National Reproductive Health Program (NRHP)?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.299 =>Q.299  =>Q.299 =>Q.299	<input type="checkbox"/>
298.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by the NRHP?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
299.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by NCHADS?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.301 =>Q.301  =>Q.301 =>Q.301	<input type="checkbox"/>
300.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by NCHADS?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
301.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the National Center for Tuberculosis (CENAT)?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.303 =>Q.303  =>Q.303 =>Q.303	<input type="checkbox"/>
302.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by CENAT?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
303.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the National Center for Health Promotion (NCHP)?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.305 =>Q.305  =>Q.305 =>Q.305	<input type="checkbox"/>
304.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by the NCHP?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
305.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided directly by donors such as the World Bank?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.307 =>Q.307  =>Q.307 =>Q.307	<input type="checkbox"/>
306.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of different facilities using funds provided directly by donors?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
307.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by donor-supported projects such as HSSP?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.309 =>Q.309  =>Q.309 =>Q.309	<input type="checkbox"/>
308.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of different facilities using funds provided directly by donor-supported projects?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
309.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided directly by NGOs?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.311 =>Q.311  =>Q.311 =>Q.311	<input type="checkbox"/>
310.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided directly by NGOs?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
311.	Did the OD make any payment during the <b>first quarter of 2003</b> to facility staff with funds provided by the community?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.313 =>Q.313  =>Q.313 =>Q.313	<input type="checkbox"/>
312.	Does the OD have records of the payments made during the <b>first quarter of 2003</b> to staff of the different facilities using funds provided by the community?	1=yes 2=no 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>

Based on the OD's records, please provide the information requested below about cash payments made to facility staff with funds provided by the PHD or directly by National Programs, donors, projects, NGOs or the community during the **first quarter of 2003**.

Q#	Operational District	Source	Value
	313. What is the name of the health facility whose staff received a payment out of funds provided by the PHD or directly by a National Program, donor, project, NGO or the community during the <b>first quarter of 2003</b> ? <i>(Write clearly the name of the health facility in the space below. Coder will enter facility codes later. Use a separate line for each different health facility and for each different funding source.)</i>	314. Which National Program or other source provided these funds? 1=PHD 2=CNM 3=NIP (MCH) 4=NNP (MCH) 5=NRHP (MCH) 6=NCHADS 7=CENAT 8=NCHP 9=donor 10=donor project 11=NGO 12=community 13=other (specify) 99=does not know	315. How much money from this source was paid to staff of this facility during the <b>first quarter of 2003</b> ?  Riel  9,999,999=does not know
a.		Code <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
b.		Code <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
c.		Code <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
d.		Code <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
h.		Code <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.289-Q.315, i.e., Q.316-Q504, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

### Section 3c. Equipment and non-medical supplies provided to Operational Districts

Now I would like to ask you some questions about medical or other equipment and non-medical supplies (for example, bed nets and insecticide) that the OD may have received from any source during calendar years 2003 and 2004.

#### First Quarter 2003

Q#	Question	Category/unit	Skips	Value
1.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from Central Medical Stores during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.3 =>Q.3 =>Q.3 =>Q.3	<input type="checkbox"/>
2.	Does the OD have records of the equipment and non-medical supplies received from Central Medical Stores during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
3.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Malaria Center (CNM) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.5 =>Q.5 =>Q.5 =>Q.5	<input type="checkbox"/>
4.	Does the OD have records of the equipment and non-medical supplies received from CNM during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
5.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Immunization Program (NIP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.7 =>Q.7 =>Q.7 =>Q.7	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
6.	Does the OD have records of the equipment and non-medical supplies received from NIP during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
7.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Nutrition Program (NNP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.9 =>Q.9 =>Q.9 =>Q.9	<input type="checkbox"/>
8.	Does the OD have records of the equipment and non-medical supplies received from NNP during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
9.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Reproductive Health Program (NRHP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.11 =>Q.11 =>Q.11 =>Q.11	<input type="checkbox"/>
10.	Does the OD have records of the equipment and non-medical supplies received from NRHP during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
11.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from NCHADS during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.13 =>Q.13 =>Q.13 =>Q.13	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
12.	Does the OD have records of the equipment and non-medical supplies received from NCHADS during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
13.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Tuberculosis Center (CENAT) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.15 =>Q.15 =>Q.15 =>Q.15	<input type="checkbox"/>
14.	Does the OD have records of the equipment and non-medical supplies received from CENAT during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
15.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the National Center for Health Promotion (NCHP) during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.17 =>Q.17 =>Q.17 =>Q.17	<input type="checkbox"/>
16.	Does the OD have records of the equipment and non-medical supplies received from the NCHP during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
17.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the Central MOH during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.19 =>Q.19 =>Q.19 =>Q.19	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
18.	Does the OD have records of the equipment and non-medical supplies received directly from the Central MOH during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
19.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the PHD during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.21 =>Q.21 =>Q.21 =>Q.21	<input type="checkbox"/>
20.	Does the OD have records of the equipment and non-medical supplies received directly from the PHD during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
21.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies directly from a donor during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.23 =>Q.23 =>Q.23 =>Q.23	<input type="checkbox"/>
22.	Does the OD have records of the equipment and non-medical supplies received directly from a donor during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
23.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies directly from a project such as HSSP during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.25 =>Q.25 =>Q.25 =>Q.25	<input type="checkbox"/>

Q#	Question	Category/unit	Skips	Value
24.	Does the OD have records of the equipment and non-medical supplies received from a project during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
25.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from an NGO during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.27 =>Q.27 =>Q.27 =>Q.27	<input type="checkbox"/>
26.	Does the OD have records of the equipment and non-medical supplies received from NGOs during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>
27.	According to OD records, did the OD receive any medical or other equipment or any non-medical supplies from the community during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records for this period 4=refused to respond 9=does not know	=>Q.29 =>Q.29 =>Q.29 =>Q.29	<input type="checkbox"/>
28.	Does the OD have records of the equipment and non-medical supplies received from the community during the <b>first quarter of 2003</b> ?	1=yes 2=available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know		<input type="checkbox"/>

Based on the OD's records, please provide the information requested below about any medical or other equipment and non-medical supplies that the OD received during the **first quarter of 2003**.

Q#	Item	Source	Unit	Quantity	Unit value
	29. Which type of equipment or non-medical supply was received during the <b>first quarter of 2003</b> ? <i>(Use a separate line for each different item and for each different source providing equipment or non-medical supplies)</i>	30. From which source was this equipment or non-medical supply received? <i>(Use the source codes provided below)</i>	31. How was this item packaged?  1=kit 2=box or carton 3=bottle 4=individual item  etc.  99=does not know	32. How many of these units were received during the <b>first quarter of 2003</b> ?  9,999=does not know	33. What was the approximate value of each unit of this equipment or non-medical supply at the time it was received by the OD?  Riel  99,999,999
	<i>(Codes for source) =&gt;</i>	01=Central Medical Stores 02=CNM 03=NIP (MCH) 04=NNP (MCH)	05= NRHP (MCH) 06=NCHADS 07=CENAT	08=NCHP 09=Central MOH 10=PHD 11=directly from a donor	12=directly from donor-supported project 13=directly from an NGO 14=directly from the community 15=directly from another source (specify) 99=does not know
a.		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
b.		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
c.		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

Q#	Item	Source	Unit	Quantity	Unit value
	29. Which type of equipment or non-medical supply was received during the <b>first quarter of 2003</b> ? <i>(Use a separate line for each different item and for each different source providing equipment or non-medical supplies)</i>	30. From which source was this equipment or non-medical supply received? <i>(Use the source codes provided below)</i>	31. How was this item packaged?  1=kit 2=box or carton 3=bottle 4=individual item  etc.  99=does not know	32. How many of these units were received during the <b>first quarter of 2003</b> ?  9,999=does not know	33. What was the approximate value of each unit of this equipment or non-medical supply at the time it was received by the OD?  Riel  99,999,999
	<i>(Codes for source) =&gt;</i>	01=Central Medical Stores 02=CNM 03=NIP (MCH) 04=NNP (MCH)	05= NRHP (MCH) 06=NCHADS 07=CENAT	08=NCHP 09=Central MOH 10=PHD 11=directly from a donor	12=directly from donor-supported project 13=directly from an NGO 14=directly from the community 15=directly from another source (specify) 99=does not know
d.		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
e.		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>				<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.1-Q.33, i.e., Q.34-Q264, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about any medical or other equipment or any non-medical supplies (for example, bed nets or insecticide) that the OD may have provided to individual facility during calendar years 2003 or 2004.

**First Quarter 2003**

Q#	Question	Category/unit	Skips	Value
265.	According to OD records, did the OD provide any medical or other equipment or non-medical supplies to any health facility during the <b>first quarter of 2003</b> ?	1=yes 2=no 3=no records are available for this period 4=refused to respond 9=does not know	=>Q.272 =>Q.272 =>Q.272 =>Q.272	<input type="checkbox"/>
266.	Does the OD have records of the equipment or non-medical supplies transferred to individual health facilities during the <b>first quarter of 2003</b> ?	1=yes 2=no, available records do not have this information 3=has records but does not want to provide information 4=refused to respond 9=does not know	=>Q.272 =>Q.272 =>Q.272 =>Q.272	<input type="checkbox"/>

Based on the OD's records, please provide the information requested below about any medical or other equipment and non-medical supplies transferred by the OD to individual health facilities during the **first quarter of 2003**.

Q#	Item	Operational District	Unit	Quantity	Unit value
	267. What type of equipment or non-medical supply was transferred during the <b>first quarter of 2003</b> ? (Use a separate line for each different item and for each different health facility)	268. What is the name of the health facility to which this equipment or these non-medical supplies were transferred? (Write clearly the name of the health facility in the space below. Coder will enter facility codes later.)	269. How was this item packaged?  1=kit 2=carton or box 3=bottle 4=individual item  etc.  99=does not know	270. How many of these units were transferred to this facility during the <b>first quarter of 2003</b> ?  999=does not know	271. What was the approximate value of each unit of this equipment or non-medical supply transferred to this facility at the time it was transferred?  Riel  99,999,999=does not know
a.			Code  □ □	□ □	□ □ □ □ □ □ □ □ □ □
b.			Code  □ □	□	□ □ □ □ □ □ □ □ □ □
c.			Code  □ □	□	□ □ □ □ □ □ □ □ □ □
	<b>COLUMN TOTAL</b>				□ □ □ □ □ □ □ □ □ □

(Similar questions to Q.265-Q271, i.e., Q.272-Q320, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

**Section 4. Service Delivery, User Fee Revenue and Consumption of Drugs and Medical Supplies**

*The information in this section should be provided by the OD Information Officer (i.e., the person in the OD who is in charge of compiling service delivery statistics from the facilities and sending the information on to the PHD.*

I would like to ask you about the services provided, the user fee revenue collected and the drugs and medical supplies consumed by the health facilities in this OD during calendar years 2003 and 2004.

Based on the OD’s records, please provide the information requested below about the services provided by individual facilities during each quarter of calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Facility name	Quantity (outpatient)	Quantity (inpatient)
	1. Please write clearly the name of each facility in the OD on a separate line below, beginning with the referral hospital ( <i>coder will enter facility codes later</i> ).	2. How many outpatients (new cases) were reported by this health facility during the <b>first quarter of 2003</b> ?  Number 999,999=does not know	3. How many inpatient discharges were reported by this health facility during the <b>first quarter of 2003</b> ?  Number 99,999=does not know
a.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
b.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
c.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
d.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
e.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.1-Q.3, i.e., Q.4-Q.24, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about the user fee revenue collected by the facilities in this OD during calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Facility Name	Value
	25. Please write clearly the name of each facility on a separate line below, beginning with the referral hospital <i>(Coder will enter facility codes later).</i>	26. How much user fee revenue was collected by this facility during the <b>first quarter of 2003</b> ?  Riel 999,999,999=does not know
a.		Code  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
b.		Code  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
c.		Code  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
d.		Code  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
e.		Code  <input type="checkbox"/> <input type="checkbox"/>  <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<b>COLUMN TOTAL</b>	<input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

(Similar questions to Q.25-Q26, i.e., Q.27-Q40, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Now I would like to ask you about the value of drugs and medical supplies consumed by the facilities in this OD during calendar years 2003 and 2004.

Based on the OD's records, please provide the information requested below about the value of drugs and medical supplies consumed by each facility during each quarter of calendar years 2003 and 2004.

**First Quarter 2003**

Q#	Facility Name	Value
	41. Please write clearly the name of each facility on a separate line below, beginning with the referral hospital <i>(Coder will enter facility codes later)</i>	42. What is the value of drugs and medical supplies consumed by this facility during the <b>first quarter of 2003</b> ?  Riel  9,999,999,999=does not know
a.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
b.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
c.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
d.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
e.	Code  <input type="text"/> <input type="text"/>	<input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
	<b>COLUMN TOTAL</b>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>

(Similar questions to Q.41-Q42, i.e., Q.43-Q56, would be asked for quarters 2-4 of 2003 and quarters 1-4 of 2004)

Question for the pilot:

1) It is not clear whether this information is reported routinely by the ODs. They may instead report physical quantities of each item consumed.